Mears Care Limited

Mears Care - Ealing

Inspection report

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Ratings

Overall rating for this service	Requires Improvement

Is the service safe?	**Requires Improvement**
Is the service effective?	**Requires Improvement**
Is the service caring?	**Good**
Is the service responsive?	**Good**
Is the service well-led?	**Requires Improvement**

Summary of findings

Overall summary

The inspection took place on 17 November 2015 and was announced. We gave the provider 48 hours' notice because the location provides a domiciliary care and we wanted to make sure someone was available.

The last inspection was on the 17 March 2015 when we found breaches of four Regulations relating to safe care and treatment, good governance, the support of staff and the identifying, receiving and handling of complaints.

We undertook this inspection so we could look at whether the provider had made progressing in meeting these breaches. The inspection also took place because the Home Office Immigration Enforcement Department had found that some of the staff employed at the location were working illegally in the UK. This had resulted in a number of staff leaving the employment of the agency without any notice impacting on the service being provided. We wanted to make sure people's needs were being met and the agency had plans in place to recover from this.

Mears Care-Ealing is an agency providing personal care and support to people who live in the own homes in the London Borough of Ealing. This location is a branch of a national organisation, Mears Care Limited. The Ealing branch provided a service to 127 people at the time of the inspection. The majority of people were older adults, some had dementia. There were also a small number of younger adults with a physical disability, acquired brain injury, learning disability or mental health needs.

There was a manager in post. He had started work at the location four weeks before our inspection. He was in the process of applying to be registered with the Care Quality Commission. A registered manager is a person who has registered with the Care Quality Commission to manage the service. Like registered providers, they are 'registered persons'. Registered persons have legal responsibility for meeting the requirements in the Health and Social Care Act and associated Regulations about how the service is run.

The care people received had been affected by the sudden loss of staff in September. The manager and other senior staff also left around this time and this affected how the service was coordinated and managed. However, the new manager had been in post for four weeks at the time of our inspection and we could see that improvements had started. The impact of the loss of staff had been reduced as new staff had been employed.

Most people felt safe, although some people raised concerns about unfamiliar care workers, or care workers arriving late or not at all. The provider had introduced systems to reduce the risk of missed visits and to monitor visits. However, some people reported that visits were not always on time, and some people did not receive care as planned. This meant people were still at risk.

The staff had not received the supervision and support they needed since the incident in September 2015. The provider was starting to offer more support and supervision to all staff and there were plans for them to

have regular supervision from senior staff.

People told us the care workers were kind, polite and caring.

People felt their complaints were responded to and investigated by the provider.

The provider had an action plan to address some of the areas of improvement.

You can see what action we told the provider to take at the back of the full version of the report.

The five questions we ask about services and what we found

We always ask the following five questions of services.

Is the service safe?

Requires Improvement

The service was not always safe.

Whilst the majority of people we spoke with told us they felt safe, others did not. Some people had not received care as planned because their care workers were late or had not arrived for the visit. This put them at risk.

Is the service effective?

Requires Improvement

The service was not always effective.

The staff did not always receive the support and supervision they needed to care for people.

Is the service caring?

Good

The service was caring.

People were treated with kindness and respect. They found their care workers to be polite and their privacy was respected.

Is the service responsive?

Good

The service was responsive.

People told us their complaints were investigated and acted upon.

Is the service well-led?

Requires Improvement

The service was not always well-led.

Since the last inspection there had been some incidents and complaints which had not been acted upon or responded to. However, the manager had started to address this and the provider had systems to monitor the delivery of the service and ask people for their feedback.

Mears Care - Ealing

Detailed findings

Background to this inspection

We carried out this inspection under Section 60 of the Health and Social Care Act 2008 as part of our regulatory functions. This inspection checked whether the provider is meeting the legal requirements and regulations associated with the Health and Social Care Act 2008, to look at the overall quality of the service, and to provide a rating for the service under the Care Act 2014.

This inspection took place on 17 November 2015 and was announced. The provider was given 48 hours' notice because the location provides a domiciliary care service and we wanted to make sure someone was available.

The inspection visit was conducted by one inspector. A second inspector and an expert-by-experience supported the inspection by making telephone calls to people who used the service to find out about their experiences. An expert-by-experience is a person who has personal experience of using or caring for someone who uses this type of care service. The expert-by-experience on this inspection had personal and professional experience of using care services.

Before the inspection visit we spoke with 42 people who used the service and/or their relatives. We also spoke with the senior contracts manager at the London Borough of Ealing who monitored the care they had purchased from the agency.

During the inspection we met with the manager and regional manager. We looked at the provider's records for monitoring the service. We also looked at the provider's records of complaints, missed visits and safeguarding alerts. We looked at three care records for people who used the service and the staff training and support records for two staff. We looked at records of the provider's contact with people using the service and staff.

Requires Improvement

Is the service safe?

Our findings

At the inspection of 17 March 2015 we found that the agency had not provided care as planned to some people because the care workers did not visit them. This put people at risk and some people were left without meals or receiving their medicines.

At this inspection we found improvements had been made. However, since the last inspection there had still been occasions when care workers had not arrived for their planned visits and this had left people at risk. Four people we spoke with told us that some of their visits during September had been missed.

Some people said they had experienced care workers not arriving as planned. Two different people said, ''Sometimes they are late or do not come'' and ''Sometimes they miss a call or are late and I have complained to the office.'' One person told us, ''My calls were missed on the last two Fridays without explanation.'' Another person said, ''They have got worse recently with missed calls.'' One person told us that the care worker did not visit as planned one night and they had not been able to go to bed. They said they had slept in the chair with their clothes on.

Whilst some people raised serious concerns about missed calls and this leaving them feeling unsafe, the majority of people told us that care workers did visit them. Most people said that care workers were not normally later than ten minutes. A small number of people said that care workers were sometimes more than ten minutes late and not reliable. One person said, ''They are a nightmare as times vary so much, they can come any time between 8.30am and 10.30am, I never know when to expect them.'' However, others told us they had a more reliable service. Some people told us that care workers were not usually late and if they were going to be late they called to let them know. One person said, ''They always ring if they are late and apologise.''

The manager told us that some visits had been cancelled by the person who used the service because the care worker had been too late. These were not recorded as missed visits but they still had an impact because the person had not received their care as planned.

This was a breach of Regulation 12 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014

The manager told us that they were introducing a new electronic monitoring system to help improve the real time information the office staff received about how calls were being delivered. The branch was also going to introduce a new system which would improve monitoring further.

There had been some recorded missed visits and the manager showed us evidence that these had been investigated. There was evidence that appropriate action had been taken to prevent these reoccurring.

Over half the people we spoke with told us they did not always have the same regular care worker and they were not happy about this. One person said, ''I feel very nervous when new carers come as they are not

supervised.'' Another person said, ''I sometimes get a different carer each week." One person told us that they did not feel safe because they had been visited by a care worker who was ''rough'' and ''rude.'' Another person told us that a care worker had stolen fruit from their house and this had made them fear further incidents may occur. The people told us they had raised their concerns directly with the agency and these incidents had been dealt with but they still felt unsafe.

Other people told us they felt safe with the agency and that they found care workers trustworthy. People who required support with shopping told us they trusted the staff with their money.

In September 2015 the Home Office Immigration Enforcement Department found that some staff employed by the agency were working in the United Kingdom illegally. They undertook checks of Mears Care Limited's recruitment procedures and were satisfied that they were undertaking appropriate checks on the suitability of staff. However these checks had not been able to identify falsified documents and therefore the staff had been employed without the provider knowing they did not have permission to work in the United Kingdom. These staff were removed from Mears Care Limited.

The provider undertook recruitment checks on staff suitability to work with vulnerable people, such as references from previous employers, a criminal record check and a formal interview. Since September 2015 the Home Office Immigration Enforcement Department had provided additional checks on documentation for all newly recruited staff at the agency. They were also providing training for Mears Care Limited staff who were responsible for the recruitment and selection of new staff to help them better recognise falsified documents.

When the Home Office Immigration Enforcement Department first removed staff from the agency it had an impact on the care provided. Initially some people did not receive a visit as planned and this put them at risk. The manager told us that in the weeks following the removal of staff, people received visits later than planned and there were changes to the regular care workers for many of the people. Mears Care Limited had a contingency plan which they followed. The agency had employed temporary staff from other branches and other providers to help cover the staff absences. The manager told us they had started to recruit new staff and this had helped enable care to be delivered as planned again.

The manager showed us evidence that they had assessed the risk for all the people who used the service and ensured that those with the highest needs and those who were most vulnerable had received the care they needed. The manager told us there had been an impact for the less vulnerable people with care workers visiting them later than planned. He said this had been communicated to them and their representatives. The manager or senior staff at the branch had contacted everyone who used the service about the problems with staffing and we saw evidence of this.

Requires Improvement

Is the service effective?

Our findings

At the inspection of 17 March 2015 we found that staff did not receive the support or supervision they needed to carry out their role. In particular there had been no additional supervision, training or support for the staff who had been responsible for poor practice. Where complaints had been upheld there was no evidence that the agency had followed this up with the staff to make sure they understood what had gone wrong and to ensure that incidents were not repeated.

At this inspection we found some improvements had been made. However, because of changes in management, the senior team and the staffing levels, the manager told us they had not been able to ensure all staff had regular supervision, support and appraisals of their work.

Some people told us they thought care workers did not have the skills they needed and had not been supervised in the work place. The manager told us he acknowledged this had been a problem.

This was a breach of Regulation 18 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014

The majority of staff had met with their manager to discuss and appraise their work in July 2015.

There was evidence that action had been taken against the staff who had been responsible for substantiated complaints and incidents.

Good

Is the service caring?

Our findings

People told us they were happy with their care workers and they were kind and polite. Some people gave us examples of care workers who had not been kind, but they said these were not their regular care workers and they had told the agency about it.

Some of the things people told us were, "I am quite happy'', "The carers are polite and treat him well'', "They are completely honest, polite and respectful'', "My carer has been with me a long time and she knows what I need, how I like things done and adheres to my care plan'', "They do the best they can under the circumstances", "I am quite happy with everything we are satisfied'', "My care is very good, kind and respectful'' and "They are all very professional and completely honest.''

People told us the care workers respected their privacy and dignity.

Good

Is the service responsive?

Our findings

At the inspection of 17 March 2015 we found that complaints had not always been investigated. The agency had not taken action to minimise the risks of incidents reoccurring and there was no evidence that any other action had been taken following complaints.

The majority of people said that they did not have any complaints but when they had raised concerns these had been investigated and addressed. Three of the people who we spoke with told us they had experienced problems in the past and their complaints had gone unanswered or things had not changed. However, all three people told us that things had improved in the weeks before our inspection.

We looked at the provider's records of complaints. Records of some of the complaints made shortly after our last inspection were incomplete and it was difficult to assess whether they had been fully investigated and acted upon. However we saw that there were detailed records of the investigations into recent complaints. These included evidence that follow up action, such as disciplinary action or staff retraining had taken place. The manager was in the process of collating all complaints and analysing these to see if there were any trends or patterns. The manager was also looking at the details of the past complaints to make sure they were investigated and action was taken at the time.

Requires Improvement

Is the service well-led?

Our findings

At the inspection of 17 March 2015 we found that the provider did not have an effective system to assess and monitor the quality of the service. Some of the incidents which had occurred, such as staff not attending visits, had not been properly investigated. There was no overall analysis of such incidents to determine what had gone wrong, to look at themes and trends and make improvements to the way in which care and treatment were provided as a result of reflecting on these. Not all complaints had been investigated and there was no evidence of learning from these to improve the way in which the service was run. Therefore the provider had not identified or managed the risks for people using the service.

At this inspection we found that improvements had been made and the provider had started to investigate all incidents and complaints. They had introduced systems to minimise the risks of missed visits. The manager had started to analyse complaints and incidents. However, since the last inspection the records of a number of incidents and complaints were incomplete and it was difficult to assess whether these had been acted upon.

The provider had an action plan and to address concerns identified at the last inspection, through their own quality monitoring and feedback from the local authority. They had contacted the majority of people who used the service to ask for their feedback. They had contacted 40 people who had been affected by the loss of staff in September to make sure they were aware of what was happening.

Some people told us they thought it was a good organisation and they were happy with the service. Others told us that over the past year they felt there had been problems, although some of these people said that things had improved shortly before our inspection.

The registered manager left the service in September 2015. A new manager had been in post for four weeks. They told us they were in the process of applying to be registered with the Care Quality Commission. They had previously worked for Mears Care Limited in the quality assurance team. They showed us some of the plans they had for improving the way in which the location was managed. These included changing the way staff were matched to the people they were supporting to make this more effective, improving quality monitoring and improving records.

The staffing changes in September also included the sudden loss of some senior members of staff who worked at the location. This had impacted on the way the service was managed and coordinated. The manager told us the remaining senior staff had worked hard to try to deliver a consistent and high quality service to all people. New senior staff had been recruited and an additional administrator post had been created to support the team.

The regional operations manager at Mears Care Limited told us that they had started to recruit and train new staff and hoped to be back to their original staffing levels by mid-December 2015 and in a position to take on new care packages again early in 2016.

This section is primarily information for the provider

Action we have told the provider to take

The table below shows where regulations were not being met and we have asked the provider to send us a report that says what action they are going to take. We did not take formal enforcement action at this stage. We will check that this action is taken by the provider.

Regulated activity	Regulation
Personal care	Regulation 12 HSCA RA Regulations 2014 Safe care and treatment The registered person did not always do all that was reasonably practical to mitigate risks to the health and safety of service users receiving their care and treatment. Regulation 12(2)(b)

Regulated activity	Regulation
Personal care	Regulation 18 HSCA RA Regulations 2014 Staffing The registered person did not always ensure that persons employed received appropriate supervision, support and appraisal in their work. Regulation 18(2)(a)