

First Class Care Limited

First Class Care

Inspection report

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Date of inspection visit:
28 July 2016

Date of publication:
02 September 2016

Ratings

Overall rating for this service

Requires Improvement ●

Is the service safe?

Requires Improvement ●

Is the service well-led?

Requires Improvement ●

Summary of findings

Overall summary

This inspection took place on 28 July 2016. First Class Care is a domiciliary care service which provides personal care and support to people in their own home across Nottinghamshire and 11 people were using the service. At the time of our inspection First Class Care was operating from an address which was not registered. The provider had not taken the appropriate action to correctly register the location.

The service had not had a registered manager for 15 months prior to our inspection. 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 2008 and associated Regulations about how the service is run. A new manager had been recruited and was due to start working at the service shortly after our inspection. We will monitor the situation to ensure that an application to register is made.

We carried out an announced comprehensive inspection of this service on 31 March & 1 April 2016. Breaches of legal requirements were found in respect of recruitment procedures and good governance. After the comprehensive inspection, the provider wrote to us to say what they would do to meet legal requirements in relation to the breaches.

We undertook this focused inspection to check that they had followed their plan and to confirm that they now met legal requirements. This report only covers our findings in relation to those requirements. You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for (location's name) on our website at www.cqc.org.uk

Improvements had been made to the recruitment procedures. Staff were required to undergo an interview and assessment process prior to being offered work. Appropriate checks of their conduct in previous employment, identification and criminal record were carried out. These checks are important to assist providers in making safer recruitment decisions.

Improvements had also been made to the systems used to assess and monitor the quality of the service provided. People were regularly asked for their opinion and changes made to their care package where necessary. Audits were carried out on staff performance and record keeping and any issues identified were acted upon. Improvements had been made to record keeping although there were still occasions where staff had not fully completed records relating to the care they had provided to people.

The five questions we ask about services and what we found

We always ask the following five questions of services.

Is the service safe?

We found that action had been taken to improve recruitment procedures.

We could not improve the rating for 'Is the service safe?' from Requires Improvement because to do so requires consistent good practice over time. We will check this during our next planned comprehensive inspection.

Requires Improvement ●

Is the service well-led?

We found that action had been taken to improve quality monitoring systems.

We could not improve the rating for 'Is the service well-led?' from Requires Improvement because to do so requires consistent good practice over time. We will check this during our next planned comprehensive inspection.

Requires Improvement ●

First Class Care

Detailed findings

Background to this inspection

We undertook an announced focused inspection of First Class Care on 28 July 2016. This inspection was done to check that improvements to meet legal requirements planned by the provider after our inspection of 31 March & 1 April 2016 had been made. The team inspected the service against two of the five questions we ask about services: is the service safe and is the service well-led? This is because the service was not meeting some legal requirements

We gave 48 hours' notice of the inspection because we needed to be sure that the manager would be in. The inspection team consisted of one inspector.

Prior to our inspection we reviewed information we held about the service. This included information received and statutory notifications. A notification is information about important events which the provider is required to send us by law.

During our inspection we spoke with three relatives of people using the service, the care manager and the provider. We looked at the care plans of three people and any associated daily records such as the daily log and medicine administration records. We looked at five staff files as well as a range of records relating to the running of the service such as audits and training records.

Is the service safe?

Our findings

At our inspection in March 2016 we found that people were not fully protected from the risks associated with unsuitable staff because recruitment procedures were not operated effectively. During this inspection we found the required improvements had been made and people could be assured that the provider carried out appropriate checks on new staff before they started work.

The relatives we spoke with confirmed that their loved one received care from a consistent group of staff and they had not had any concerns in relation to staff recruitment. We looked at the files relating to all of the staff who were employed by First Class Care at the time of this inspection. Each member of staff had completed an application form which detailed their previous employment and relevant skills. In addition, staff were required to complete a health questionnaire and also declare whether they had any previous criminal convictions. This information was discussed with staff during an interview to determine whether or not they would be suitable to work with vulnerable people.

Following a successful interview, the provider carried out a series of checks to further verify their suitability for the role. A criminal records check was carried out as well as obtaining references from previous employers. Whilst the criminal records checks had all been carried out, the confirmation of this for one person had not been recorded until the day of our inspection. The provider told us that they had forgotten to print out a confirmation report. Checks were also made of each staff member's identity and, where required, their right to work in this country. The checks were carried out before staff were able to start work.

Is the service well-led?

Our findings

At our inspection in March 2016 we found that systems were not in place to assess and monitor the quality of the service that people received. In addition, records were not up to date and did not always accurately reflect the care that had been provided to people. During this inspection we found that the required improvements had been made. People could be assured that their feedback about the quality of the service was listened to and that checks of the quality of the service were being carried out. Records relating to the care people received were more complete, although staff had sometimes not fully completed records.

The relatives we spoke with told us that they were regularly asked for their opinion of the service by the provider. This was done during a telephone call or a face to face visit. Relatives felt that the provider listened to their opinion and took action to make improvements when necessary. People were asked for their opinion about the service they received through regular phone calls as well as during full care plan reviews. The records we saw indicated that people's care was reviewed two or three times per year. The majority of comments people had made were positive and indicated that they were satisfied with the care they received. Where people had raised any issues, these were investigated and acted upon.

The care manager carried out a series of audits and spot checks to establish the quality of the service people received. For example, each care plan was audited on a monthly basis alongside the daily records and medicines administration records completed by staff. We saw that this was a thorough check of all aspects of the care the person received. Where any shortcomings were identified these were acted upon and an action plan put into place. Some issues had been found with the quality of the records made by staff and these were discussed with staff during supervision and staff meetings. Regular spot checks were carried out on staff to ensure that they were providing people with an acceptable level of care. The care manager checked their punctuality, infection control practice and interaction with people amongst other areas, taking action to bring about improvements when necessary.

When staff provided care for people they made records confirming what care they had given and the times they had arrived and departed. Where applicable, staff also recorded which medicines people had taken and any food and drink people had consumed. Whilst the records were generally well completed, we saw there were occasions when staff had not completed medicines administration records. Also, staff did not always record the time they had arrived or departed a person's house. This meant it was not always possible to determine if people had received the support they required. As the daily records were audited when returned to the office these issues had already been identified and action taken to support staff to improve their practice.