

Sonia Heway Care Agency Ltd

# Sonia Heway Care Agency

## Inspection report

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09 October 2020

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## Ratings

Overall rating for this service

Inadequate ●

Is the service effective?

**Inspected but not rated**

Is the service well-led?

**Inspected but not rated**

# Summary of findings

## Overall summary

### About the service

Sonia Heway Care Agency is a domiciliary care agency providing personal care to 11 people at the time of the inspection.

Not everyone who used the service received personal care. CQC only inspects where people receive personal care. This is help with tasks related to personal hygiene and eating. Where they do, we also consider any wider social care provided.

### People's experience of using this service and what we found

The acting manager and nominated individual did not have full oversight of the service. The provider's electronic call monitoring system had not been working for three days, and no one working at the service had realised until this was brought to their attention during the inspection. The acting manager did not have access to essential information needed to have oversight of the service, including information about people's healthcare needs and handover information, due to a technical error. Staff supported people to manage their healthcare needs.

For more details, please see the full report which is on the CQC website at [www.cqc.org.uk](http://www.cqc.org.uk)

### Rating at last inspection and update

The last rating for this service was inadequate (published 21 October 2020).

### Why we inspected

We undertook this targeted inspection to check on a specific concern we had about staff responding to people's deteriorating healthcare needs. The overall rating for the service has not changed following this targeted inspection and remains inadequate.

CQC have introduced targeted inspections to follow up on Warning Notices or to check specific concerns. They do not look at an entire key question, only the part of the key question we are specifically concerned about. Targeted inspections do not change the rating from the previous inspection. This is because they do not assess all areas of a key question.

We have found evidence that the provider needs to make improvements. Please see the well-led sections of this full report. You can see what action we have asked the provider to take at the end of this full report.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Sonia Heway Care Agency on our website at [www.cqc.org.uk](http://www.cqc.org.uk).

### Enforcement

We have identified a breach in relation to good governance. Please see the action we have told the provider

to take at the end of this report.

Full information about CQC's regulatory response to the more serious concerns found during inspections is added to reports after any representations and appeals have been concluded.

#### Follow up

We will request an action plan from the provider to understand what they will do to improve the standards of quality and safety. We will work alongside the provider and local authority to monitor progress. We will return to visit as per our re-inspection programme. If we receive any concerning information we may inspect sooner.

#### Special Measures

The overall rating for this service is 'Inadequate' and the service remains in 'special measures'. This means we will keep the service under review and, if we do not propose to cancel the provider's registration, we will re-inspect within 6 months to check for significant improvements.

If the provider has not made enough improvement within this timeframe. And there is still a rating of inadequate for any key question or overall rating, we will take action in line with our enforcement procedures. This will mean we will begin the process of preventing the provider from operating this service. This will usually lead to cancellation of their registration or to varying the conditions the registration.

For adult social care services, the maximum time for being in special measures will usually be no more than 12 months. If the service has demonstrated improvements when we inspect it. And it is no longer rated as inadequate for any of the five key questions it will no longer be in special measures.

## The five questions we ask about services and what we found

We always ask the following five questions of services.

### **Is the service effective?**

At our last inspection we rated this key question requires improvement. We have not reviewed the rating at this inspection. This is because we only looked at the parts of this key question we had specific concerns about.

**Inspected but not rated**

### **Is the service well-led?**

At our last inspection we rated this key question inadequate. We have not reviewed the rating at this inspection. This is because we only looked at the parts of this key question we had specific concerns about.

**Inspected but not rated**

# Sonia Heway Care Agency

## Detailed findings

### Background to this inspection

#### The inspection

We carried out this inspection under Section 60 of the Health and Social Care Act 2008 (the Act) as part of our regulatory functions. We checked whether the provider was meeting the legal requirements and regulations associated with the Act. We looked at the overall quality of the service and provided a rating for the service under the Care Act 2014.

This was a targeted inspection to check on a specific concern we had about staff responding to people's deteriorating healthcare needs.

#### Inspection team

This inspection was carried out by one inspector and an inspection manager.

#### Service and service type

This service is a domiciliary care agency. It provides personal care to people living in their own houses and flats.

The service had a manager registered with the Care Quality Commission, however they were unavailable during the inspection. This means that they and the provider are legally responsible for how the service is run and for the quality and safety of the care provided. We were supported by an acting manager during the inspection.

#### Notice of inspection

We informed the provider we would be inspecting the service with 45 minutes notice because we wanted to ensure there was time for the provider to facilitate a safe visit due to the COVID-19 pandemic.

Inspection activity started on 7 October and ended on 13 October 2020. We visited the office location on 7 and 9 October 2020.

#### What we did before the inspection

We reviewed information we had received about the service since the last inspection. We sought feedback

from the local authority and professionals who work with the service. The provider was not asked to complete a provider information return prior to this inspection. This is information we require providers to send us to give some key information about the service, what the service does well and improvements they plan to make. We took this into account when we inspected the service and made the judgements in this report. We used all of this information to plan our inspection.

#### During the inspection

We spoke with one person who used the service and one relative about their experience of the care provided. We spoke with two members of staff including the nominated individual and acting manager. The nominated individual is responsible for supervising the management of the service on behalf of the provider.

We reviewed a range of records. This included four people's care records and multiple medication records. A variety of records relating to the management of the service, including policies and procedures were reviewed.

#### After the inspection

We continued to seek clarification from the provider to validate evidence found. We looked at training data and quality assurance records. We spoke with two local authorities who commission with the service.

# Is the service effective?

## Our findings

Effective – this means we looked for evidence that people's care, treatment and support achieved good outcomes and promoted a good quality of life, based on best available evidence.

At the last inspection this key question was rated as requires improvement. We have not changed the rating of this key question, as we have only looked at the part of the key question we had specific concerns about.

The purpose of this inspection was to check a specific concern we had about staff responding to people's deteriorating healthcare needs. We will assess all of the key question at the next comprehensive inspection of the service.

Supporting people to live healthier lives, access healthcare services and support

- People were supported to access healthcare services they needed. One person, who required support due to skin breakdown told us, "The district nurse came and had a look. The nurse came back twice a week. The carer [staff] looks at what they have done and check it is alright and the nurse comes and changes it."
- Some people required support with catheter care and staff had been completing fluid charts where needed to check people's fluid intake and output was at a safe level.
- When people had become seriously unwell staff had called an ambulance so people could receive the appropriate support.

# Is the service well-led?

## Our findings

Well-Led – this means we looked for evidence that service leadership, management and governance assured high-quality, person-centred care; supported learning and innovation; and promoted an open, fair culture.

At the last inspection this key question was rated as inadequate. We have not changed the rating of this key question, as we have only looked at the part of the key question we have specific concerns about.

The purpose of this inspection was to check a specific concern we had about staff responding to people's deteriorating healthcare needs. We will assess all of the key question at the next comprehensive inspection of the service.

Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements

At our last inspection the provider had failed to robustly assess the risks relating to the health safety and welfare of people. This was a breach of regulation 17 (Good Governance) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

Not enough improvement had been made at this inspection and the provider was still in breach of regulation 17.

- There was a lack of effective systems and processes in place to ensure adequate oversight at the service.
- On the first day of the inspection we identified the provider's electronic call monitoring (ECM) system, used to monitor staff and ensure they arrived on time to provide people's support, had not been working for three days. No one at the service had identified this serious error.
- The acting manager told us they required further training on the electronic monitoring system in use, so were unable to check it was working effectively. At previous inspections we had been told a member of staff was employed to monitor the system constantly, however, they had not alerted the acting manager to any errors and were uncontactable during the inspection.
- Staff completed paper records stored in people's homes, however, they recorded the planned times for people's visits, not the actual times they visited to provide support to people. Whilst the acting manager told us they had completed spot checks on some staff for the three days of the error, this lack of accurate record keeping meant it was impossible to verify if people had received support at the time agreed.
- The acting manager had completed audits on some documents such as medicines records, however, they did not have access to all the information needed to offer an overview of people's support. They told us due to a technical error they were unable to access key documents such as handover information or emails to healthcare professionals.

We found no evidence that people had been harmed however, systems were either not in place or robust enough to assess and monitor the quality and safety of the service. This placed people at risk of harm. This was a continued breach of regulation 17 (Good Governance) of the Health and Social Care Act 2008



(Regulated Activities) Regulations 2014.

- The acting manager informed the local authorities they worked with of the serious error found during the inspection.
- On the first day of the inspection the acting manager told us they were planning to introduce a new ECM system and were in the process of training staff. On the second day of our visit to the office we saw that staff were now using the new system.

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 will check that this action is taken by the provider.

Regulated activity	Regulation
Personal care	<p>Regulation 17 HSCA RA Regulations 2014 Good governance</p> <p>The provider had failed to ensure there were systems and processes in place to assess, monitor and improve the quality and safety of the service.</p>