

2XL Employment Ltd

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Inspection report

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Ratings

Overall rating for this service	Inadequate ●
Is the service safe?	Inadequate ●
Is the service effective?	Inadequate ●
Is the service caring?	Good ●
Is the service responsive?	Requires Improvement ●
Is the service well-led?	Inadequate ●

Summary of findings

Overall summary

The inspection took place over two days on 20 December 2016 and 12 January 2017 and was announced. We last inspected this service on 27 November 2013 where no concerns were identified and it was meeting the essential standards of quality inspected at that time.

2XL Employment Limited is a domiciliary care agency registered to provide personal care for people in their homes.

2XL Employment Limited requires a registered manager to be in post as part of its registration requirements from the Care Quality Commission. There was no registered manager in the service on the day of the inspection and we were told they would be returning to work in June 2017. On the day of the inspection we met one of the directors who was acting as manager whilst the registered manager was not at work. 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.

Relatives and people who used the agency for their care told us staff were caring and respected their privacy and dignity.

The staff we spoke with understood what abuse was and how to report it if they had any concerns.

Staff recruitment procedures were in place to ensure they were employing appropriate people.

There was a complaints procedure. People said they felt comfortable making complaints but there was not a dedicated place for recording complaints to show action had been taken to resolve them.

We found gaps in care records relating to people's health needs which put them at risk of receiving inappropriate or unsafe care and risk assessments were missing or incomplete.

Supervision was not taking place for care workers and there were some gaps in training which meant people were being put at risk of their needs not being met by suitably trained staff.

We found overall that people were at risk of receiving unsafe, ineffective care. We found breaches of five of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014. We are taking enforcement action against the registered provider and will report further on this when it is completed.

The overall rating for this service is 'Inadequate' and the service is therefore in 'Special measures'.

Services in special measures will be kept under review and, if we have not taken immediate action to

propose to cancel the provider's registration of the service, will be inspected again within six months. The expectation is that providers found to have been providing inadequate care should have made significant improvements within this timeframe.

If not enough improvement is made within this timeframe so that there is still a rating of inadequate for any key question or overall, we will take action in line with our enforcement procedures to begin the process of preventing the provider from operating this service. This will lead to cancelling their registration or to varying the terms of their registration within six months if they do not improve. This service will continue to be kept under review and, if needed, could be escalated to urgent enforcement action. Where necessary, another inspection will be conducted within a further six months, and if there is not enough improvement so there is still a rating of inadequate for any key question or overall, we will take action to prevent the provider from operating this service. This will lead to cancelling their registration or to varying the terms of their 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 safe?

Inadequate ●

The service was not safe. Risks for people were not assessed nor action plans put into place to manage those risks.

Recruitment procedures were robust and references and criminal background checks were in place.

Medicines were not managed safely.

Incidents were not investigated and there was no written record of learning from incidents.

Is the service effective?

Inadequate ●

The service was not effective. 2XL Employment was not acting in accordance with the Mental Capacity Act 2005.

There were no records of supervisions for staff.

Staff had been on basic training but some lacked training in areas specific to the people they were supporting.

People using the service and their relatives were happy with how they were supported to eat and drink but there were gaps in records with a lack of instructions for staff on how to provide the care.

Is the service caring?

Good ●

The service was caring. People and their relatives said they were treated with dignity and respect.

Staff knew the people they were caring for and were able to build up positive relationships.

Is the service responsive?

Requires Improvement ●

The service was not consistently responsive. Care documents were not always person centred and did not give a complete picture of a person or their needs.

Health and social care professionals said 2XL Employment Limited was quick to respond and react to feedback.

People and relatives knew how to complain and felt comfortable doing so.

Is the service well-led?

Inadequate ●

The service was not consistently well led. There was a lack of knowledge about the responsibilities of 2XL Employment Limited as an agency providing a regulated activity.

There was a positive attitude of wanting to improve.

Audits were not in place to check the quality of care.

Staff said they felt supported by the manager and director.

Statutory notifications were not being made.

2XL Employment Limited

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 was planned to check 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.

The inspection took place over two days on 20 December 2016 and 12 January 2017 and was announced. The provider was given 48 hours' notice because the location provides a domiciliary care service to 45 people in their homes and we needed to be sure that someone would be available at the office.

The inspection team was made up of two inspectors and one expert by experience. An expert by experience is a person who has personal experience of using or caring for someone who uses this type of care service. Before the inspection we reviewed previous inspection reports and information on notifications we had received from the service. During the inspection we spoke with one person using the service and five family members. We interviewed six staff members, and tracked the care records of six people. We looked at personnel files for six staff members, and reviewed policies, training records, incidents and accidents and quality control documents.

We contacted social workers and health care professionals and had feedback from local councils.

Is the service safe?

Our findings

A relative said their family member "feels safe with them yes". Another relative said, "I feel [my family member] is safe with them because before I leave them... I shadow them to make sure they can cope with [their] needs and they have the skills to manage."

Risks to people were not fully assessed or measures put into place to manage those risks. For some people there was no risk assessment or review completed by 2XL Employment Limited. One person with complex needs who received support for over 18 months, had no risk assessment completed by the provider. We asked the provider why risks had not been assessed, they told us they relied on local authority assessments and were not aware that they had to complete an assessment of risks for every person they supported. We looked at risk assessments for people and where there were assessments in place found there were gaps in identifying what risks a person faced and how people and staff could manage those risks to reduce them. For example, in one person's daily care records it was noted that care workers supported with a continuous positive airway pressure machine (CPAP) but this was not mentioned on the risk assessment. A CPAP machine increases air pressure in the throat so the airway does not collapse when breathing in. It was not recorded what the risks were that this person faced or the medical condition related to their breathing or how care workers could support them to safely manage this risk through the use of the machine or other actions. During the inspection we made the provider aware of this risk and that it had not been identified.

The risk assessment forms were split into risk areas including lighting, manual handling, fire, smoking, stress, violence and aggression, and food safety. We found risk assessments had a focus on the safety of staff rather than the people being supported by the service. They showed a lack of understanding of how to assess risks that each person might individually face and how to set actions for care workers to minimise those risks when providing care. When we discussed with the provider the layout and focus of the forms we were told that the form is staff focussed because the risk assessment on file "is for us [the provider]" and the one staff refer to is the one that social services write. We did not see recent risk assessments completed by social services in care files and there was no evidence of up to date assessments being requested. For example, one risk assessment that we saw was written in 2014. The provider told us that the risk assessments they do are reviewed every year and the registered manager checks them once completed. The provider explained that care workers do not have a copy of the risk assessment to assess risks for themselves.

For one person it was noted that staff must follow the care plan to minimise the risk of choking, but there was no care plan in place for staff to find out what they needed to do to support this person to eat in a safe way. There was no instruction for staff regarding what consistency food or fluids should be or what to do if the person started to choke. This left the person at risk. We asked the director and staff trainer if they have any Speech and Language Therapist guidelines for people they support to eat with a choking risk. We were told the agency does not hold any copies of these kinds of documents and they are all kept in the person's home or the families are relied on to pass information on to care staff. Relatives said they showed care workers how to feed their family members if they needed support to do this. After the inspection we asked the provider to make sure that every staff member knew about choking risks and how to manage them if they were supporting a person who was at risk of choking.

We saw two incident records for one person who had fallen; one fall resulted in a visit to hospital due to a cut on their face. The incident records were not complete as the outcome section was left blank in both cases. This person's risk assessment and needs assessment were not updated to reflect this information and falls were not assessed on their risk assessment. This shows that the provider did not learn from incidents in order to minimise the risk of a similar incident occurring.

Medicines were not always managed safely. We saw that some care workers had introductory training in administering medicines. The provider told us completed medicine administration records (MAR) were sent to the commissioning body and not kept in the office. We saw on care files that most people were supported with medicines by their family but the service supported some people to take medicines. Care documents were unclear regarding the level and nature of support people required to take their medicines as prescribed. For example, for one person who was supported with medicines we saw a copy of a MAR sheet that was filled out over a one month period with no gaps. However, their needs assessment did not state what medicine they were prescribed and that care workers needed to support them to take it. One care file that we looked at noted that the person being supported had severe epilepsy and specified that care workers supporting them needed to have completed training in administering their emergency rescue epilepsy medicine. On the day of the inspection we found that care workers who supported this person had not completed this training. This was confirmed by the staff trainer and director and online training records. This person was being placed at risk of their emergency epilepsy medicine not being administered correctly. We asked 2XL Employment Limited to check that all staff who were administering medicines had appropriate training for the medicine they were administering.

The above evidence demonstrates a breach of Regulation 12 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

We looked at how 2XL Employment Limited ensured it had enough staff to meet people's needs. The director told us that for every package of support they provide there is a backup support team to fill in if care workers are unwell or unable to attend. For example, if the two regular care workers were on holiday the care would be provided by two care workers who had met the person and shadowed the regular staff so they knew their needs. Relatives told us, "they are always on time and they stay until [person] is ready" and another said, "we mainly get the same staff but if someone different is coming they let me know." This was very positive as it showed the provider ensured people were cared for by consistent staff who knew their needs.

We asked to look at records where care calls had been missed by care workers but we were told the system was not set up to provide this at the time of inspection. The director told us they would look at putting a system in place to audit where care calls had been missed. People and relatives said that care calls were not missed and if staff were going to be late they were informed.

2XL Employment Limited's recruitment processes were robust. We looked at six staff files which all had references, criminal records checks and recruitment information in them. A member of office staff told us, "All checks must be completed before the person is allowed to work." The service recruited from its sister agency 2XL Recruitment so had no difficulties in recruiting staff and knew potential care staff before appointing them. This was evidence of good recruitment practices to minimise the risk of unsuitable staff being employed.

We asked to look at safeguarding records, the provider confirmed there had been no safeguarding concerns that they could recall. The director and trainer were aware of different types of abuse and how to report this to the local authority safeguarding team if they had concerns but were not aware that any referrals should

be notified to the CQC. Staff had yearly safeguarding training and staff were able to demonstrate they knew how to recognise abuse and what to do if they thought somebody was at risk of abuse.

Is the service effective?

Our findings

The Mental Capacity Act 2005 (MCA) sets out what must be done to make sure that the human rights of people who may lack mental capacity to make decisions are protected, including when balancing autonomy and protection in relation to consent or refusal of care. The MCA Deprivation of Liberty Safeguards (DoLS) requires providers to submit applications to a 'Supervisory Body' for authority to deprive someone of their liberty. We checked whether the service was working within the principles of the MCA.

We looked at care records and found there were no consent documents in place for the care files we looked at for six people. In two of the files, there were mental capacity assessments but neither document referred to a specific decision that was being assessed and the decision makers sections were not filled out. These assessments were incomplete and did not say why the mental capacity assessment was taking place and which decision was being assessed.

We looked at an incident record for one person who had been noted as not having capacity and who had been reported as missing to the police after leaving their home. The incident record said that following the incident the property had been made harder to leave for the person so they were less likely to go missing again. There was no record of a best interest meeting when the decision had been made to limit this person's freedom.

Staff had all completed mental capacity awareness training. The director and care workers had an understanding of the principles of the MCA when we asked them about it. However, this understanding did not extend to ensuring that the service was acting within the principles of the MCA. There was a lack of awareness that 2XL Employment Limited had a responsibility to satisfy themselves that they were acting in accordance with the MCA. The director and staff trainer told us they thought capacity assessments and consent for care were the responsibility of the local authority and they did not hold any records on this. The above evidence demonstrates a breach of Regulation 11 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014

People said, "yes I think they are properly trained" when we asked them if they thought staff had the right training to provide good care. A relative that we spoke with said, "I am happy with their training because they are capable of managing [persons] condition and needs and they have additional physiotherapy training." However, we found that training was inconsistent at 2XL Employment Limited which affected how care workers were able to care for people. Staff were provided with training on areas such as moving and handling, first aid, safeguarding and MCA by 2XL Employment Limited's staff trainer. Other courses were completed online using an e-learning system.

When we asked how the understanding of staff was checked we were told that 2XL Employment Limited looks at the results of online tests for each course. Training that needed refreshing or updating was flagged up on an online alarm system so that courses could be booked. We saw that some people had a profile which stated what training care workers should have before starting to work with them. One person needed to have staff trained in epilepsy rescue medication but on the day of the inspection 2XL Employment Limited were unable to show that this had taken place. One person required 24 hour support, their profile stated staff needed to have training in dementia. Training records showed that only one out of three care workers

for this person had training for caring for people with dementia and this was over 10 years ago. This showed that although care workers were getting some training, staff did not always get appropriate training to meet the individual care needs of people.

We asked to look at supervision records to show that staff were receiving appropriate support but the provider was unable to provide any supervision records. Staff told us they felt supported and the management team kept in touch regularly to see how they were but we saw no records to show that supervision meetings had taken place in the last 12 months. We asked the director to show us records or notes of supervision meetings and they told us, "we don't have set staff supervisions here it's an open door policy." We were told that staff are contacted at least fortnightly and that care workers have appraisals yearly with a review after 6 months. Appraisal records showed that appraisals were taking place by telephone and in person and covered training needs and development but had gaps for the review and setting of performance targets.

We asked to look at notes from staff meetings but were told by the director that team meetings for care workers were not taking place but this was something they were considering putting in place.

The above evidence demonstrates a breach of Regulation 18 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

People were happy with how they were supported to eat and drink and maintain a healthy diet. One person said, "We buy the food together and they help me prepare meals from fresh and I get plenty to eat and drink." A relative said care workers "are also very good on my instructions such as healthy eating and they watch what [person] eats at the day centre." However, we looked at needs assessments and care plans and saw that although some people required support with eating, the information on what support they required was not clear.

We saw evidence that people were supported to maintain good health and access healthcare services. One person said, "They help to organise and take me to hospital and doctors appointments." We saw daily care notes to show that care workers liaised with GPs and social workers and supported people to attend health care appointments when they needed to. Relatives said care workers supported their family member to do things they wouldn't do ordinarily that helped them to exercise and promote wellbeing. For example, one relative told us about care workers supporting a person to go swimming and to attend day centres. A care worker said, "I try to help [person] walk for at least 15 minutes a day to get stronger muscles and some fresh air, we enjoy doing that together."

Is the service caring?

Our findings

Every person and relative we spoke with said care staff were kind and caring. One person said, "They are very polite" and a relative said, "they are very kind." Some people required short term care from 2XL Employment Limited but many had on-going support from the same care workers over a period of years and built up trusting relationships. Care workers spoke fondly of people they supported. One relative said, "they treat like their own family and when [person] kicks off sometimes, they are very understanding and patient." We saw that some people had been supported by the same care workers for over ten years and relatives told us that positive trusting relationships had been built up.

We were told that 2XL Employment Limited did not accept care packages of under 90 minutes because shorter than that would compromise the experience of the person receiving the care. The director told us how caring the service was and how it was set up because they felt "care could always be better". We discussed with the director that they use the family test and philosophy of "it's my mum they are caring for." We were given examples of the caring culture at the service. For example care workers staying late to ensure people feel settled before they leave for the evening and one care worker giving a person they care for a gift at Christmas.

People said care workers respected their dignity. One person said, "they wash, dress and shower me ...and they are very respectful towards me." Each risk assessment we saw had a section for confidentiality which showed an awareness of keeping people's documents securely stored and respecting their privacy. A health and social care professional said "Staff maintain a professional approach and on observation treat people with dignity." Relatives said, "when they help [person] they respect privacy and dignity absolutely" and "they treat with dignity yes."

Care documents were not always written in a caring way. They did not always contain information about people's religious or spiritual needs and for two files had different spellings of the same name and the wrong name included on documents. We found the paperwork regarding care was often staff focussed and the records were not comprehensive in describing a person's needs, history and preferences. In one person's records their state of mind was described several times as "a bit moody" and care workers referred to when they had "put [person] back to bed". This was not respectful of the person's dignity.

One person said "At the start they came out to see me and they went through everything I needed doing and it works fine." We asked the director how much involvement people and their relatives have in deciding their care, we were told "we want people to have a say in the type of care that they get". We saw from care records that some assessments had been signed by relatives but out of the six care files we saw only two had a signature of a relative or person to say they were involved in the process. The director told us that families provide most of the care and support for people and they know their needs best. We saw that in care documents it was not always clear what the family situation was for people and who was to provide what care at what time.

A professional told us how care workers had worked patiently and consistently with a person with complex

needs and supported them to build structure into their daily routine so they were much more settled and independent.

Is the service responsive?

Our findings

We asked people if they thought 2XL Employment Limited was a responsive service. They said, "I get the support I need and when I want it" and "they are always approachable and if I need cover quickly they can provide it." A health and social care professional fed back to us they found the provider quick to respond if there were any concerns and that actions were put in place and followed up.

Some people's care needs were assessed by 2XL Employment Limited before they started receiving care. The staff trainer told us they were responsible for going to people's homes and conducting an assessment with people and their families. One person said "they went through everything when it started...they came to my house once for a risk assessment of the house which I thought was quite good." We were told the needs of each person were taken into account and whether they could be matched up to a staff member with the relevant experience, training and availability. We saw that people were able to request a specific care worker if they developed a positive relationship with them. We were told that the needs document was reviewed once yearly and if there were any changes to a person's needs. Where an assessment had been done we saw a review had been completed. For one person their last review was in November 2016 and there had been several incidents and a gradual increase in behaviours that others find challenging in the previous 12 months. This was not reflected in the new review document.

One person's needs assessment was blank in sections relating to date of birth, next of kin, medical history, family background, social relationships and social interests. One person had continence support needs and the support was described in the needs assessment as "needs to be managed for infection control." There was no detail about what the individual needs were and no description of what care should be provided. 2XL Employment Limited was not assessing or reviewing effectively the needs of people it was providing care for.

We looked at daily records where care staff recorded what care has taken place and sent the logs to the office to be stored electronically. We looked at the records for one person over a three week period. We also looked at what support this person should be receiving from care staff in an email kept on their file. The records showed that over the three week period the person did not leave their home despite their local authority paying this provider to support them to go out three days of the week. This shows that 2XL Employment Limited was not providing care that met the needs of this person.

Some parts of care documents we looked at were person centred and focussed on the person as an individual. For example we looked at a profile for one person that explained clearly how they communicated and their diagnoses which related to their care needs. Also included on this document were details of another care agency who worked with the person, that they attended a day centre daily and who they lived with. However, other documents in the care file contradicted this information showing that it was not up to date. Another document we looked at explained in detail what support was needed for a person. However, this detailed explanation was only for two days out of the seven and it was not clear what support was required for the other five days.

When we spoke with the director and staff trainer we found that a focus was on the wellbeing of staff rather than the individuals that were being supported by the service. We saw this reflected in risk documents which were written with staff in mind. There was a lack of risk assessments to safeguard people using the service. When we asked about feedback on the service we were provided with feedback staff had given rather than people receiving care.

The above evidence demonstrates a breach of Regulation 9 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

When we asked about how people receiving care gave feedback the director told us they could feed back at yearly reviews and spot checks, and were sent questionnaires twice a year and called on the telephone twice a year. We saw evidence of two spot checks having taken place in the files we looked at but people's representatives were not asked for their feedback on these spot checks.

2XL Employment Limited had a complaints policy and procedure in place which stated an acknowledgement letter would be sent to the complainant within one day of the complaint being received and it would be recorded on the "quality register" and the investigation process would start. We asked people if they knew how to raise a complaint and if they had ever made a complaint. We received comments which included "I have no complaints but I have no problems when I ring them and they have a standby on call system" and "I've not really had to complain but if I ring the office for anything they are approachable and they try to help me."

We asked for copies of complaints that had been made in the last 12 months and were told there was not a central place where they were kept and a report would need to be produced from their online database. We asked to be sent a report of complaints and were sent a document that did not show when complaints had been made, or that they were being recorded in a consistent manner, and failed to show what action had been taken to resolve them in the timescale given in the policy. People, relatives and professionals working with 2XL Employment Limited fed back that they were happy with how complaints were managed. However, the records were not clear what had taken place to resolve any reported issues and we did not see evidence that the complaints procedure was being followed.

Is the service well-led?

Our findings

During the inspection we identified a number of issues with record keeping and found the provider was not ensuring documents were up to date, accurate and complete. We saw that supervision records were not in place for any care staff and appraisals had not been effectively audited as they contained gaps. Consent documents were not in place and mental capacity assessments were filled out incorrectly and were incomplete. Care records were not in place for a large number of people and the director confirmed that there were not records completed by 2XL Employment Limited for these people. Where we did see risk assessments they did not accurately capture key risks to people and focussed instead on risks to staff. Needs assessments were reviewed and in some parts comprehensive but many were incomplete and did not record accurately the needs of people or what support was required to meet those needs safely and effectively. When we discussed this with the provider there was a lack of awareness that 2XL Employment Limited had a responsibility to assess the needs and associated risks for people or keep consent documents to show they were in keeping with the principles of the MCA. We found there were inadequate governance systems and processes in place to assess and monitor the quality and safety of the service and ensure all relevant information was kept on file for people receiving care.

The above evidence demonstrates a breach of Regulation 17 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

Feedback we had from staff was that they felt supported and the management team were approachable and friendly. Staff said of their manager "I always feel supported" and "they want to know how you are coping". When we spoke with the director they expressed that they speak to care workers very regularly to check their wellbeing but had not been recording this to demonstrate the support was taking place.

We saw that the culture was open and friendly and the aim of the service was to provide a positive experience for people. The provider was open about the improvements that were needed in the service and expressed that they wanted to keep improving as a service and welcomed feedback.

Services that provide health and social care to people are required to inform the CQC of important events that happen in the home. The registered provider had not always informed us of significant events that they were required to, for example if a safeguarding concern was raised. This showed a lack of understanding of what was required of the provider in terms of making statutory notifications. We looked at notifications made to us and also at incidents that had occurred in the service and found two incidents that had not been reported to us in the last 12 months.

This was a breach of Regulation 18 of the Care Quality Commission (Registration) Regulations 2009.

This section is primarily information for the provider

Enforcement actions

The table below shows where regulations were not being met and we have taken enforcement action.

Regulated activity	Regulation
Personal care	<p>Regulation 18 Registration Regulations 2009 Notifications of other incidents</p> <p>Regulation 18 of the Care Quality Commission (Registration) Regulations 2009 The provider failed to notify the Commission without delay of incidents which occurred whilst services are being provided in the carrying on of a regulated activity. Incidents that have not been notified to the commission are regarding where a person has been harmed.</p>

The enforcement action we took:

Warning notice

Regulated activity	Regulation
Personal care	<p>Regulation 9 HSCA RA Regulations 2014 Person-centred care</p> <p>Regulation 9 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014. The provider did not carry out an assessment of the needs and preference of service users collaboratively with the relevant person. Regulation 9 (3) (a)</p>

The enforcement action we took:

Warning notice

Regulated activity	Regulation
Personal care	<p>Regulation 11 HSCA RA Regulations 2014 Need for consent</p> <p>Regulation 11 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.</p> <p>The provider did not always gain consent of the relevant person in regards to care and treatment. The provider did not make sure that staff who obtain the consent of people who use the service are familiar with the principles and codes of</p>

conduct associated with the Mental Capacity Act 2005. Regulation 11 (1).

The enforcement action we took:

Warning notice

Regulated activity	Regulation
Personal care	<p>Regulation 12 HSCA RA Regulations 2014 Safe care and treatment</p> <p>Regulation 12 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014. The provider did not provide care and treatment in a safe way, assess risks to the health and safety of service users or do all that is reasonably practicable to mitigate any such risks. The provider did not ensure that persons providing care or treatment to service users have the qualifications, competence skills and experience to do so safely.</p> <p>Regulation 12 (1) (2) (a) (b) (c)</p>

The enforcement action we took:

Warning notice

Regulated activity	Regulation
Personal care	<p>Regulation 17 HSCA RA Regulations 2014 Good governance</p> <p>Regulation 17 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014. The provider failed to establish and operate effectively systems or processes to assess monitor and improve the quality and safety of the service. The provider failed to assess, monitor and mitigate the risks to the health, safety and welfare of service users and others and maintain securely an accurate, complete and contemporaneous record in respect of each service user. Including a record of the care and treatment provided to the service user and of decisions taken in relation to the care and treatment provided.</p> <p>Regulation 17 (1) (2) (a) (b) (c)</p>

The enforcement action we took:

Warning notice

Regulated activity	Regulation
Personal care	<p>Regulation 18 HSCA RA Regulations 2014 Staffing</p> <p>Regulation 18 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.</p>

The provider did not ensure that persons employed by the service provider received such appropriate support, training, professional development, supervision and appraisal as is necessary for them to carry out the duties they are employed to perform.
Regulation 18 (2) (a)

The enforcement action we took:

Warning notice