

Carmel Domiciliary Care Limited

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Inspection report

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Ratings

Overall rating for this service

Good ●

Is the service well-led?

Requires Improvement ●

Summary of findings

Overall summary

This inspection took place on 22 March 2017 and was announced. Carmel Domiciliary Care is a domiciliary care service which provides support and care to people with mental health needs in their own homes.

A registered manager was in place as required by their conditions of registration. 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.

At our previous inspection, the systems to assess, monitor, action, evaluate and mitigate any risks relating to the welfare of people, staff development and the quality of the service were not effective. Since this inspection, a new provider had acquired the service.

At this inspection we met with the new provider and registered manager and found they were acting on our concerns and implementing systems to monitor the quality of the service and improve the records relating to people's care.

A system was now in place to monitor staff recruitment, training and support. The new provider was planning to implement a new support plan format to capture people's care and support needs. People's risks and medicines were now recorded in detail to provide staff with guidance on how people should be supported. The new provider had established quality monitoring systems to monitor the service and identify any shortfalls. The registered manager also regularly worked alongside people and staff which gave them an insight into the running of the service and people's needs.

We found that the service had met the legal requirements. However we could not improve the ratings for 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.

The five questions we ask about services and what we found

We always ask the following five questions of services.

Is the service well-led?

This service was now well-led.

Clear systems to monitor staff development and recruitment were now in place.

Systems were being implemented to regularly check on the quality of the service being delivered and drive improvement.

We could not improve the ratings for 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 ●

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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 22 March 2017 and was announced. More than 48 hours' notice of the inspection was given because the service is small and the manager is often out of the office supporting staff or providing care and we wanted to meet the new provider. We needed to be sure that they would be available. The inspection was carried out by one inspector.

Before the inspection, we examined information that we held about the provider, previous inspection reports, the provider's action plan and reviewed notifications which are information the provider is required to send us about significant events.

During our inspection we spoke with the unit manager, the registered manager and the new provider. We looked at the new provider's action plans, systems and governance tools which would be implemented across the service. We were shown samples of records relating to people and staff.

Is the service well-led?

Our findings

At our inspection of September 2016, we found that the provider did not have effective systems in place to assess, monitor, action, evaluate and mitigate any risks relating to the welfare of people, staff development and the quality of the service. People's care records did not always reflect their needs and risks.

Since our last inspection, Carmel Domiciliary Care Limited has been taken over by a new provider. At this inspection, the new provider shared with us the actions they would be taking to address our concerns raised in our inspection in September 2016. We were shown their action plans, target dates and who was responsible for implementing the actions. We were assured that actions were being taken to improve the monitoring of the service being delivered and the documentation of people's care needs and personal risks.

The new provider's plans included the review of all staff records to ensure they held the relevant recruitment documentation and staff training and support records. A supervision matrix was now in place to monitor the frequency of staff support meetings in line with the new provider's policy. We were shown an updated training matrix showed when staff had completed their mandatory training and the expiry dates. The new provider had procedures in place to resource various training sessions for staff including general e-learning in health and social care subjects and by the provider's in-house accredited trainer. We were told that training would also be delivered by local accredited trainers so staff were aware of expected local practices such as local safeguarding procedures. A person who used the service had agreed to deliver three sessions to staff on their experiences of mental health issues.

The new provider had reviewed the management structure of the service. The registered manager and unit manager roles would involve both supporting people and managing the service. The unit manager said, "I want to continue to work with the service users, it keeps me in touch with what they want and any changes in them." There were plans to do further recruitment of care staff. The registered manager told us people who used the service would be part of the interview process.

People's care records were being reviewed and plans were in place to implement the new provider's format of care plans called 'My support plan' and associated consent forms. The registered manager showed us examples of robust risk assessments which identified the hazards, risks and actions to be taken to reduce the risks. Clear protocols had been put into place for people who had been prescribed medicines 'as required'. This gave staff clear guidance of when people may require these medicines and other possible methods of support that may be initially used before administering their medicines.

The new provider employed a quality auditing manager who overviewed and audited the provider's services on a regular basis. We were told the quality audit manager would visit Carmel Domiciliary Care monthly and quarterly to check and monitor the service being provided. They shared with us their monthly and quarterly auditing tools which reflected the policies and expected procedures across the service. People's accident and incidents were now being recorded in detail with information about the accident and any actions that was required to prevent the incident reoccurring. People also had detailed personal emergency evacuation plans which provided staff with the information they needed to support people in the event of an evacuation.

Since the acquisition, the new provider's policies and procedures were being discussed with staff and implemented. The registered manager was aware that some of the provider's policies required additional statements to support the practices and systems of Carmel Domiciliary Care. The new new provider was also engaging and consulting with people, their families and other key stakeholders to understand their needs; answer their questions and drive improvement within the service.

We concluded that the new provider had a good understanding of our concerns and was implementing governance systems which met the legal requirements to monitor the welfare of people, staff development and the quality of the service. However we could not improve the rating for 'Is the service well led?' from requires improvement because to do so requires consistent good practice overtime. We will check this during our next planned comprehensive inspection.