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GTG Care Nursing - 112a Lichfield Street

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 well-led?	**Requires Improvement**

Summary of findings

Overall summary

We carried out an announced comprehensive inspection of this service on 26 January and 07 February 2017. At that time we identified continued breaches of three legal requirements. This was because people were not protected by a safe recruitment system and the provider did not consider people's capacity to make decisions about their care in line with the Mental Capacity Act (2005). The third breach related to good governance whereby the provider had not ensured adequate systems were in place to monitor the safety and quality of care that people received.

After the last inspection we met with the provider to discuss our concerns about the service. They also wrote to us to say what changes they would make to ensure they met the legal requirements and to consistently provide a well-led service.
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 GTG Care Nursing on our website at www.cqc.org.uk

We carried out this announced focussed inspection on 04 August 2017. We undertook the inspection to check if the provider had followed their plans and to confirm that they were now meeting legal requirements. At this inspection we found that improvements had been made which meant they were now meeting the three areas of the law, further improvements were still required in some areas. We did not review the ratings at this inspection. We will do this when we next inspect all of the five key questions at this service.

GTG Care Nursing is registered with the Care Quality Commission to provide personal care for people in their own homes. There was a registered manager in post at the time of 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.

People were protected from any risks associated with provider operating an unsafe recruitment system. We found the provider had taken steps to improve the system by ensuring staff had the correct documentation and legal checks were carried out to ensure staff were suitable to work with people who used the service.

People could be assured that their rights would be protected as staff had the knowledge and skills to implement the principles on the Mental Capacity Act.

People were protected by a governance system which ensured the quality of the care they received was monitored and steps taken to ensure where improvements were highlighted action would be taken.

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

Improvements had been made to the recruitment system which meant people were protected as staff were suitable to work with people who used the service.

Is the service effective?

Requires Improvement

Improvements had been made with regards to staff training and staff understood the principles of the Mental Capacity Act 2008 which meant people's rights were protected.

Is the service well-led?

Requires Improvement

Improvements had been made in the governance system used by the provider which meant people were protected by a governance system which ensured their care was monitored and identified where improvements were needed.

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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 04 August 2017 and was announced. The provider was given 48 hours' notice because the location provides a domiciliary care service and we needed to be sure that someone would be in.

The team consisted of one inspector. As part of the inspection we reviewed the information we held about the service. We looked to see if statutory notifications had been sent by the provider. A statutory notification contains information about important events which the provider is required to send us by law. We sought information and views from the local authority.

As part of the inspection we spoke with two people who used the service. We spoke with the registered manager and three members of staff. We sampled medicine records and looked at two staff files and other records relating to the management of the service.

Requires Improvement

Is the service safe?

Our findings

At our inspection in January 2017 we found the provider was still in breach of Regulation 19 of the Health and social Care Act 2008 (Regulated Activities) Regulations 2014. This was because the recruitment system in place did not ensure that staff were suitable to work with people who used the service. At this inspection we found the required improvements the provider had told us they would make had been implemented and they were now meeting the requirements of the law.

We found the provider had a safe recruitment system in place which ensured new staff were suitable to work with people who used the service. We spoke to one recently recruited member of staff who explained to us the recruitment process they had experienced when they first started work. They told us they were asked to bring in documents to prove their identity and any other legal documents which meant they had the right to work in the United Kingdom and they were safe to work with people who used the service. We looked at the files of two members of staff who had recently started work at the service. We saw the provider had ensured there was documentation in place which assured them of their identity and they had the legal right to work in the United Kingdom. We saw the provider had completed Disclosure and Barring checks (DBS) prior to them commencing their employment in the service. DBS helps employers to make safer recruitment decisions and prevents unsuitable staff being recruited. We saw the recruitment system recognised when staff had previous convictions. We found the provider had assessed their suitability to determine if they presented any additional risks to people who used the service before employing them. The registered manager told us they now had a system in place to ensure all new staff who were recruited had the appropriate documents and checks in place before they commenced employment. They told us they had also addressed this with staff who already work in the service to ensure all staff were safe to work with people who used the service.

Requires Improvement

Is the service effective?

Our findings

At our inspection in January 2017 we found the provider was still in breach of Regulation 11 of the Health and social Care Act 2008 (Regulated Activities) Regulations 2014. This was because staff did not always seek consent from people before providing them with personal care. Staff told us they had not received any training with regards to the Mental Capacity Act (MCA) and therefore did not understand the principles. We found the registered manager had not considered one person's capacity to make decisions about their care. At this inspection we found the required improvements the provider had told us they would make had been implemented and they were now meeting the requirements of the law.

We spoke to people about how staff delivered their personal care. One person said, "They are wonderful. They always ask my permission first". The Mental Capacity Act 2005 (MCA) provides a legal framework for making particular decisions on behalf of people who may lack the mental capacity to do so for themselves. The Act requires that as far as possible people make their own decisions and are helped to do so when needed. When they lack mental capacity to take particular decisions, any made on their behalf must be in their best interests and as least restrictive as possible. Staff told us they had received training in the MCA and understood how it affected people's care. One member of staff said, "We can't make decisions for people when they have capacity to make them. We ask people's permission on a daily basis. If they say no we can't go ahead". Another member of staff told us," We assume everyone has capacity. We ask them if they agree with what we are doing". The registered manager told us they had also received training and was now more up to date with the principles of the MCA. Both staff and the registered manager told us at the time of our inspection all the people they provided care to were able to make decisions about the care they received. The provider had ensured staff had the knowledge and skills to ensure the principles of the MCA had been embedded into the care received by people who used the service.

Requires Improvement

Is the service well-led?

Our findings

At our inspection in January 2017 we found the provider was still in breach of Regulation 17 of the Health and social Care Act 2008 (Regulated Activities) Regulations 2014. This was because the governance system in place was not effective at identifying where improvements were needed in the care people received. At this inspection we found the required improvements the provider had told us they would make had been implemented and they were now meeting the requirements of the law.

We saw the provider had implemented a system to monitor people's medicines. We saw the system highlighted where staff had not signed to say they had administered a person's medicine and then the member of staff was spoken to ensure they understood the requirement to sign people's medicine charts. As a result the amount of errors had reduced. We looked at recent medicine records and found there were no gaps which meant the system in place had improved and the registered manager was assured people got their medicines as prescribed. Audits were completed on a monthly basis of care records to ensure staff completed records where appropriate. The registered manager told us they had received training with regards to the IT system in place which meant they could now monitor any calls which may be missed and take any preventative action if necessary which ensured people got the care they needed. We saw the system worked as the registered manager was alerted to a call which was due and called the member of staff to ensure they could still deliver the care. The member of staff confirmed they were close and the call would not be missed. Some improvements were still required with regards to the system in place to monitor complaints. We saw the registered manager had no central place to register if people complained which meant we could not be assured that when people complained they would be responded to appropriately. They told us they would be implementing this following our inspection.