

HF Trust Limited

HF Trust - Wiltshire DCA

Inspection report

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Ratings

Overall rating for this service

Inspected but not rated

Is the service safe?

Inspected but not rated

Is the service well-led?

Inspected but not rated

Summary of findings

Overall summary

About the service

HF Trust – Wiltshire DCA is a domiciliary care agency providing personal care to 10 people who have a learning disability and/or autism. People lived in a 'supported living' setting. Supported living services enable people to live in their own home and live their lives as independently as possible. Not everyone using 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 lived in two bungalows and two flats on a site shared with other services managed by the provider. There was also a house in a nearby town which provided accommodation for five people. There were shared facilities available on site which included a day service, an activity hall and administration offices.

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

People were supported by staff who had been recruited safely. All the required pre-employment checks had been carried out. There were sufficient numbers of staff to support people, which included some use of agency staff. Staff rotas were planned in advance so regular agency staff could be booked.

People's medicines were being managed by staff who had training. Any medicines incidents had been reported to the local authority and we had received a notification informing us of the incidents. The management team continually reviewed the medicines policy and we could see it was discussed in team meetings.

There is an imposed condition on the registration for this service to submit to CQC a monthly report of their audits which we had received regularly. The provider had also carried out quality monitoring audits at the service which identified areas for improvement. Action plans were in place recording who was responsible for carrying out actions and by when. This was monitored by the registered manager and provider.

For more details, please see the full report which is on the CQC website at www.cqc.org.uk

Rating at last inspection (and update)

The last rating for this service was requires improvement (published 10 October 2019). The provider completed an action plan after the last inspection to show what they would do and by when to improve.

Why we inspected

We undertook this targeted inspection to check on specific concerns we had about staff recruitment and staff working hours, medicines incidents and some areas of management. The overall rating for the service has not changed following this targeted inspection and remains requires improvement.

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.

Follow up

We will continue to monitor information we receive about the service until we return to visit as per our re-inspection programme. If we receive any concerning information we may inspect sooner.

The five questions we ask about services and what we found

We always ask the following five questions of services.

Is the service safe?

The service was not always safe.

Details are in our safe findings below.

Inspected but not rated

Is the service well-led?

The service was not always well-led.

Details are in our well-led findings below.

Inspected but not rated

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Detailed findings

Background to this inspection

The inspection

This was a targeted inspection to check on a specific concern we had about staff recruitment and staff working hours, medicines incidents and some areas of management.

Inspection team

This inspection was carried out by one inspector.

Service and service type

This service provides care and support to people living in five 'supported living' settings, so that they can live as independently as possible. People's care and housing are provided under separate contractual agreements. CQC does not regulate premises used for supported living; this inspection looked at people's personal care and support.

The service had a manager registered with the Care Quality Commission. 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.

Notice of inspection

This inspection was unannounced.

What we did before the inspection

We reviewed information we had received about the service since the last inspection. This included information of concern sent to us by members of staff. 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.

A condition of the provider's registration is for them to send us monthly action plans for this service, which we also reviewed. We used all of this information to plan our inspection.

During the inspection

We spoke with three members of staff, the registered manager and regional manager. We reviewed a range of records. This included three staff files in relation to recruitment and staff rotas. A variety of records relating to the management of the service were reviewed.

After the inspection

We continued to seek clarification from the provider to validate evidence found. We looked at quality monitoring, staff agency usage and staff and house meeting minutes. We contacted one professional and two relatives for their views on care and support provided.

Is the service safe?

Our findings

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 staffing, recruitment and medicines incidents. We will assess all of the key question at the next comprehensive inspection of the service.

Staffing and recruitment

- Staff had been recruited safely. The required pre-employment checks had been carried out. This included obtaining references from previous employers and a check with the disclosure and barring service (DBS). A DBS check helps providers make safer recruitment decisions.
- There were sufficient numbers of staff available to support people. People had staff hours allocated to them by the local authority. The service provided staff to work for the allocated hours.
- Where there were gaps in the staffing rotas the registered manager used agency staff to make sure people had the support they needed. Rotas were planned in advance so that agency staff could be booked. This helped to make sure people had continuity with their staff.
- The registered manager told us some people had not been using all their allocated hours. In response they had organised reviews with the local authority to make sure people had staff support where needed. The registered manager told us this was still under review by the local authority for some people.

Using medicines safely

- For the purpose of this inspection we reviewed medicines incidents and errors. We had received information that medicines incidents had not been reported. We found no information to validate the concern.
- Medicines errors and incidents had been reported to the local authority and to CQC as required. The registered manager had investigated incidents and reviewed the medicines policy to reduce risks of reoccurrence.

Is the service well-led?

Our findings

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 have specific concerns about.

The purpose of this inspection was to check specific concerns we had about management approach and quality monitoring. 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

- The service had a registered manager in post who was supported by a regional manager. They told us they felt well supported by the provider and other staff at the service.
- We had received information of concern that the registered manager was not acting in an open and transparent way. We found the registered manager understood their responsibilities to submit notifications appropriately and without delay. They also reported incidents to the local authority and worked in partnership with professionals when required.
- Staff we spoke with were clear about their roles and all knew how to escalate any concerns. They were all confident the registered manager or regional manager would take appropriate action. Comments about the registered manager included, "[Registered manager] has turned this service around, they are good, approachable and visible" and "I think the manager is ok and very supportive."

Engaging and involving people using the service, the public and staff, fully considering their equality characteristics

- We had received information of concern that people did not have the opportunity to share their views. We found people had been able to take part in 'house meetings' and the providers 'Voices to be heard' meetings. Whilst minutes were kept, we were not able to see actions recorded as a result of the meetings. For example, in a 'house meeting' in March, it was recorded a person was anxious about the coronavirus outbreak. There were no details recorded about how staff had reassured the person or provided them with any other information.
- We discussed with the registered manager other methods of people sharing their views or discussing their concerns such as advocacy services. This had not been offered to people. The registered manager told us they would ask people if they wanted help to access advocacy services.
- Team meetings had been held monthly and minutes kept of discussion. The provider had also carried out a staff survey to support staff to share their views. The results of this were yet to be produced in a report.

Continuous learning and improving care

- We received information of concern that the service was not carrying out audits. Following our inspection in November 2018 we imposed a condition on the providers registration. The condition was for the service to submit to us a report of their quality monitoring and any action plans. The registered manager and regional manager had met this condition, we continued to receive this information.
- In addition to the audits carried out by the service, the provider had also carried out quality monitoring. In

2019 they had visited the service in July and December to carry out audits. The findings were collated into a report and actions for improvements shared with the management team.