

Care Avenues Limited

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Inspection report

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Ratings

Overall rating for this service

Requires improvement



Is the service safe?

Requires improvement



Is the service well-led?

Requires improvement



Overall summary

We carried out an announced comprehensive inspection of this service on 10 December 2015. After that inspection we received concerns in relation to people being supported by care staff who were unsuitable. As a result we undertook a focused inspection to look into those concerns. This report only covers our findings in relation to this topic. You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Care Avenues Limited on our website at www.cqc.org.uk

People confirmed that they were always supported by the number of care staff identified as necessary in their care plans however this did not mean that people were safe from the risk of harm. Although the provider had recruitment processes in place to ensure suitable people were employed these were not always followed. Gaps in employment history were not followed up and references were not obtained from appropriate people. Some risk

assessments were not thorough enough to ensure people were supported by suitable care staff. You can see what action we told the provider to take at the back of the full version of the report.

New members of care staff did not always receive the appropriate support to ensure they were suitable to support people safely. New care staff did not always have the opportunity to undertake the provider's full induction programme or shadow experienced care staff. When care staff undertook more senior roles as part of their professional development there were no structures in place to identify what support they required. There was no monitoring to ensure they were fulfilling their new responsibilities which put people at risk of not receiving the care they needed. You can see what action we told the provider to take at the back of the full version of the report.

Summary of findings

There were suitable systems in place to check if people had taken their medication as prescribed. People who needed help to take their medication said they were pleased with the support they received from care staff.

The leadership and management of the organisation had not ensured people would receive a service which safely met their needs. The provider had taken action in response to our last inspection such as introducing an improved call monitoring system. Other actions they had taken were not robust and audit processes had failed to

identify poor staff support, and inconsistent use of risk management and recruitment processes. Following the inspection visit we met with the registered manager and operations manager at our offices to discuss the inspection's findings. We also requested and received information from the provider which gave some assurance about systems and processes they had introduced. You can see what action we told the provider to take at the back of the full version of the report.

Summary of findings

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 provider had not always recorded the action they had taken to ensure people were supported by care staff who were suitable to do so.

Care staff did not always have the skills and knowledge needed to meet people's specific care needs.

We could not improve the rating for safe 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



Is the service well-led?

The provider's systems had not identified that robust recruitment practices were not being followed.

The registered manager had taken action in response to our last inspection but not all actions were effective.

We could not improve the rating 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



Care Avenues Limited

Detailed findings

Background to this inspection

We undertook an unannounced focused inspection of care Avenues Limited on 11 February 2016. This inspection was done because we received concerns in relation to people being supported by care staff who were unsuitable after our 10 December 2015 inspection had been made. The team inspected the service against two of the five questions we ask about services: is the service safe and well-led. This is because the service was not meeting some legal requirements. The inspection was undertaken by one inspector.

As part of planning the inspection we looked at information of concern we had received. We reviewed this information and any other information we held about the service. We also checked if the provider had sent us any notifications. These contain details of events and incidents the provider is required to notify us about by law, including unexpected

deaths and injuries occurring to people receiving care. We also spoke with the people including some from other agencies who had raised concerns about the service. We used this information to plan what areas we were going to focus on during our inspection.

During our inspection we spoke to the registered manager, operations manager, human resources assistant and care co-ordinator. We looked at records including five people's care plans, six staff files, disclosing and barring records for all staff and staff training records to review the provider's recruitment practices. We used this information to identify if staff were suitable to meet people's care needs. We looked at the provider's records for monitoring the quality of the service to see how they responded to issues raised.

After our visit we spoke with six people and the relatives of six other people who used the service. We also spoke to ten care staff and the representative of another agency who was reviewing the service.

Is the service safe?

Our findings

At our last inspection on 10 December 2015 there were no breaches identified with this domain. Prior to our focused inspection we received information that some people who used the service were being supported by care staff that were unsuitable. We looked at the personnel files of six members of care staff which had not been checked at the previous inspection. We noted that in all cases application forms had not been fully completed and the provider had failed to take action to follow up gaps in employment history or in some instances had not obtained suitable references. We noted that three members of care staff had provided references for each other, this had not been noted by the provider and the provider had on several occasions failed to establish the applicant's relationship with the referee. This did not ensure references obtained were sufficiently robust to confirm the character, and or the applicant's skills and abilities.

Not all documentation and risk assessments had been completed to demonstrate action that the provider had taken when they had identified risks with relevant or prospective staff. The operations manager advised that they had introduced a system to assess the potential risks to people when recruitment processes indicated that such an assessment was needed. However there was no formal assessment criteria in place to evaluate potential risks and such assessments that were conducted were not recorded. Recruitment procedures had not ensured that fit and proper persons were employed. This was in breach of regulation 19 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014 .

We found that some of the staff employed by the provider who had been promoted into senior roles had not been supported to undertake training and development to enable them to fulfil the requirements of their new role. The provider had failed to assess and meet such training and supervision needs. In one instance this had resulted in a promoted senior member of staff taking on recruitment activities which had led to the engagement of people who were unsuitable to work at the service and conduct activities they were not legally entitled to do. This meant that plans to ensure people were supported by staff who

had the right mix of skills, competencies and experience to carry out their duties were not robust. This was in breach of regulation 18 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

Whilst we did identify concerns about the suitability of some staff who had been employed and the lack of consistent application of the recruitment procedures, we found that people who used the service made only positive comments about the staff who supported them. We found that most staff we spoke with did have the expected necessary skills and knowledge to perform their duties. People told us they felt the care staff who supported them had the skills and knowledge they needed to keep them safe and meet their needs. Comments included, "The carer understands my conditions;" "They seem quite competent;" "They know what I like," and "Staff appear to know what they are doing." Although all the staff we spoke to were confident that they could meet the individual needs of the people they supported, they gave us mixed views about the quality of the training they received to promote their knowledge. These varied from some care staff saying they had received only a few hours watching videos to several members of care staff saying they enjoyed a three day induction programme. One member of staff said they had received, "Fantastic," training and enjoyed regular supervisions with senior staff. Records showed that although care staff had supervision meetings in order to discuss how to meet people's individual needs there was no formal supervision programme to ensure they would occur regularly.

People we spoke with confirmed that they were supported by the number of care staff identified as necessary in their care plans. They told us care staff turned up on time and there were enough staff to keep them safe and meet their needs. People who used the service told us they felt safe with the members of staff who supported them. Relatives also shared this view. A person told us, "I am safe," and a relative we spoke with said, "Staff know how all about how to look after [Person's name] conditions."

Care staff we spoke with confirmed they were supported by other care staff when necessary however three members of staff said they sometimes felt pressurised by the provider to attend additional calls when other members of care staff were away.

People's care plans contained details about how staff were to keep people safe from the risks associated with their

Is the service safe?

specific conditions. People we spoke with said that care staff supported them in line with these plans. On one occasion however we noted that a risk assessment had not been completed for a person whose specific behaviour could place them and the care staff who supported them at risk of harm.

Care staff we spoke with were knowledgeable about how to identify if a person was at risk of abuse and could explain the provider's policy for keeping people safe. All care staff we spoke with said they would raise any concerns about a person's safety with senior staff and confirmed they received training in how to recognise signs of abuse as part of their induction when they started working at the service.

At our last inspection we noted that the provider had not informed the commission in line with their legal duty when people were or felt to be at risk of harm. These notifications

enable the commission to work with the provider and other agencies when necessary to help keep people safe. At this inspection the operations manager was able to demonstrate that they had notified the commission and appropriate agencies of recent concerns about the safety of the people who used the service.

Although most people who used the service did not require assistance from the service to take their medication, those who did so said they were happy with how they were supported. One person told us, "Staff tell me when to take my tablet." Staff we spoke with were able to explain how they supported people to take their medication and all expressed confidence this was in line with people's care plans. There was a system in place to audit and assess if people had taken their medications as prescribed.

Is the service well-led?

Our findings

At our last inspection on 10 December 2015 there were no breaches identified with this domain. Prior to our focused inspection the information of concern we received about recruitment of possibly unsuitable people raised concerns about the quality monitoring systems in place. During the focused inspection we found that the systems used to ensure the service operated effectively in line with legislation were not robust. The provider's systems to monitor the effectiveness of their recruitment processes and ensure people were supported by suitable care staff were ineffective. There were no effective monitoring and assessment of the performance of senior staff to assess if they were acting within the remit of their role and recruiting in line with the provider's processes and procedures.

At the last inspection we had found that whilst there were systems in place they were not always being consistently applied to check that all aspects of the service were being monitored with a view to assessing and managing any risks and driving up improvement. At that time we received assurances that improvements would be made particularly in respect of management of risk and reviewing care and support provided to people using the service.

Since the last inspection the operations manager had introduced a new recording process to record any risks identified in the recruitment of new care staff. However this new process was not comprehensive and had not been used consistently. The providers system to monitor the systems in place had failed to identify that the process was not robust and was not being used consistently.

There was no formal programme in place to ensure a review of all records would be completed timely. Although the operations manager told us they had conducted a review of one person's care records in response to concerns at our last inspection but this had been a verbal review and their records had not been updated. This approach did not ensure that care records would be regularly reviewed and updated to ensure they contained the appropriate information and guidance for care staff.

The issues in respect of failures in assessing and monitoring risks relating to processes, staff support and compliance with the law is a breach of regulation 17 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

Most of the people we spoke with were generally happy to be supported by the service. Comments included; "They do what we ask;" "I can't thank my carers enough," and "Staff are very nice." However one person we spoke with expressed dissatisfaction with the support they received, but would not elaborate and two other people said the operations manager did not always respond promptly when they raised concerns about the service.

Care staff we spoke with had mixed feelings about how well the service was managed. Most staff we spoke with said they were happy to work at the service and felt supported to raise concerns. However two people we spoke with said they had recently left the service believing it to be poorly organised. They stated that they did not always receive their rotas promptly or were pressurised into taking on additional calls when other members of staff were unavailable. One member of care staff told us they had felt pressurised into working seven days without a break and another member of staff said they were scared to raise a concern with a member of the senior management team. Although care staff had supervision meetings with senior staff they said that these were not planned and care staff said they were unsure when they would have the opportunity to catch up with senior staff. The failure to provide ongoing support, supervision and appraisal did not help to promote a positive culture or provide opportunities to promote the vision of the service.

The registered manager, who was also the nominated individual for the service, had taken action to ensure the operations manager had applied to become the new registered manager for the service. They told us this would help them to concentrate on overseeing and improving the quality of the service. The operations manager had already reviewed concerns raised at our recent inspection and taken action to plan the development of an improvement plan for the service. They had already introduced a telephone based system which would alert them promptly when a person was at risk of receiving a late or missed call.

This section is primarily information for the provider

Action we have told the provider to take

The table below shows where legal requirements 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 did not take formal enforcement action at this stage. 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>System or processes were not established and operated effectively. Regulation 17(1)</p> <p>Systems and process did not enable the provider to identify where safety was being compromised and respond appropriately. Regulation 17(2)(a)</p> <p>When risks were identified the provider did not introduce effective measures to reduce or remove the risks within a timescale that reflected the level of risks and impact on people using the service. Regulation 17(2)(b)</p>
Regulated activity	Regulation
Personal care	<p>Regulation 18 HSCA (RA) Regulations 2014 Staffing</p> <p>Persons employed by the provider did not receive appropriate support, training and professional development as was necessary to enable them to carry out their duties. Regulation 18(1)</p>
Regulated activity	Regulation
Personal care	<p>Regulation 19 HSCA (RA) Regulations 2014 Fit and proper persons employed</p> <p>Recruitment procedures were not operated effectively to ensure persons employed for the purpose of carrying on a regulated activity were of good character. Regulation 19(2)(a)</p>