

A C S Care Services Ltd

# ACS Care Services Ltd

## Inspection report

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## Ratings

Overall rating for this service

Requires Improvement ●

Is the service well-led?

**Requires Improvement** ●

# Summary of findings

## Overall summary

ACS Care Services provide personal and practical help that includes all aspects of personal care, meal preparation, domestic assistance including shopping, pension collection, accompanying people on appointments and other trips. ACS Care Services also provides a 'sitting service' keeping a person company whilst their main carer takes a break. There were 137 people using this service when we visited.

During our inspection in June 2016, we identified that the registered provider had failed to ensure that systems or processes were in place to assess, monitor and improve the quality and safety of the services provided and to mitigate the risks relating to the health, safety and welfare of people using the service. In addition the registered provider had not consistently gained and acted upon feedback from people for the purposes of continually evaluating and improving services.

This was a breach of Regulation 17 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

Following the inspection the provider sent us an action plan detailing the improvements they were going to make, and stating that improvements would be achieved by November 2016.

We undertook this announced focused inspection on 5 December 2016, to check that they had followed their plan and to confirm that they now met legal requirements. 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 ACS Care Services Ltd on our website at [www.cqc.org.uk](http://www.cqc.org.uk).

A registered manager was in post. 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.

We reviewed the quality assurance systems in place, and found that these had been strengthened. The processes in place were more robust and we saw that more regular quality assurance checks were taking place to ensure that people's feedback was gathered and acted upon to make changes.

While improvements had been made we have not revised the rating for this key question; to improve the rating to 'Good' would require a longer term track record of consistent good practice. We will review our rating for well led at the next 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?

The service was not consistently well led.

The systems and processes in place in respect of quality assurance had been strengthened to ensure that people's feedback was gathered on a more frequent basis.

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** ●

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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 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.

We undertook an announced focused inspection of ACS Care Services on 5 December 2016. This inspection was done to check that improvements to meet legal requirements planned by the provider after our June 2016 inspection had been made. The team inspected the service against one of the five questions we ask about services: is the service well led? This is because the service was not meeting some legal requirements.

The inspection was undertaken by one inspector.

Prior to this inspection we reviewed all the information we held about the service, including data about safeguarding and statutory notifications. Statutory notifications are information about important events which the provider is required to send us by law. We spoke with the local authority and health and social care professionals to gain their feedback as to the care that people received.

During our inspection, we spoke with the registered manager, the human resources manager and quality manager.

We looked at records to see if they were accurate and reflected the action the service had taken since our last inspection. We reviewed further records, relating to the management of the service, including safeguarding notifications, quality assurance questionnaires and the results and additional actions that the provider had taken to make improvements.

# Is the service well-led?

## Our findings

During our inspection on 16 and 17 June 2016, we identified that although potential safeguarding concerns and incidents of concern were not sent to the Care Quality Commission (CQC). We also found that the quality assurance systems needed to be improved to ensure that it was robust in all areas of the service, including gaining feedback from people, relatives and staff.

This was a breach of Regulation 17 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

At this inspection, we found that the provider had followed their action plan, to meet shortfalls in relation to the regulatory requirements as described above.

As a consequence of the issues we identified at the last inspection, we found that staff were motivated, and keen to meet the needs of people using the service in the right way and to make the service the best that it could be. The registered manager was flexible in their approach and had decided to remain in the service as registered manager, to enable other senior staff to expand and develop their roles to get the best they could from them.

We found that the registered manager and quality manager had a good awareness of people's needs and staff abilities. They understood what staff were experiencing. If they encountered any issues they dealt with them directly. Where staff values and behaviours were in question, this enabled the registered manager and quality manager to formulate an action plan of how to deal with this, so that appropriate action, including disciplinary action, could be taken if required. Our discussions with the registered manager confirmed that they understood their responsibilities to people, the staff and the Care Quality Commission (CQC).

The quality manager told us, and records confirmed that incidents were recorded, monitored and investigated appropriately and action was taken to reduce the risk of further incidents. It was clear that the care staff were aware of all accidents and incidents that occurred and had assured themselves that no further action needed to be taken. Information CQC held also showed that we had received all required notifications since our last inspection and that these had been submitted in a timely manner.

Since our last inspection we found that action had been taken to ensure that people who used the service and their relatives were asked for feedback on their experience of care delivery and any ways in which improvements could be made. This took place in the form of care reviews and we found that the provider analysed the results to identify any possible improvements that could be made to the service.

The service had also made changes to the process by which they assessed and monitored the quality of the service provided within the service. We saw recent records of annual satisfaction surveys for people who used the service. These showed positive responses and meant that the service had taken on board people's feedback, with the intention of using it to drive future improvement.

The registered manager carried out regular audits, including environmental, health and safety, medication, care plans and staff files. Staff told us that the audit checks were up to date and the records we reviewed confirmed this and that no current concerns had been identified. When areas for improvement were identified, the quality manager told us, and records confirmed that action plans would be implemented. The quality manager confirmed that visits to monitor quality assurance were conducted by a representative of the provider on a regular basis. We saw that the findings from the visits were written up in a report and areas identified for improvement during the visits were recorded, action plans were put in place with realistic timescales for completion. The service had learnt lessons from the last inspection and had taken steps to make improvements to the service delivery.