

Aliizor Ltd

# Lizor Care Concept

## Inspection report

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29 June 2022

Date of publication:  
19 July 2022

## Ratings

Overall rating for this service	Inspected but not rated
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Is the service well-led?	Inspected but not rated
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# Summary of findings

## Overall summary

### About the service

Lizor Care Concept is a domiciliary care agency providing personal care to people in their own home. At the time of our inspection there were 17 people using the service. Not everyone who used 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's experience of using this service and what we found

Improvements had been made to the medicines recording systems since the last inspection. Medicines administration records had been fully completed and gave details of the medicines people had been supported to take.

The provider had worked with the supplier of their electronic records systems to understand ways they could resolve their recording issues. Staff had been provided with additional training on the medicines recording systems following this, to ensure they understood what they needed to do to maintain accurate records.

At the last inspection people told us they received good support from staff to take their medicines. We did not seek further feedback from people at this inspection, because our concerns at the last inspection related to the records staff kept, rather than the care people received.

The manager had developed a series of audits, to assess how key aspects of the service were operating. These included assessments of the medicines management systems, care planning, risk assessments and observations of staff practice. Records demonstrated these audits had identified shortfalls in the way some systems were working and identified how improvements could be made. Actions from the assessments had been followed through to ensure improvements were implemented by all staff.

For more details, please see the full report which is on the CQC website at [www.cqc.org.uk](http://www.cqc.org.uk)

### Rating at last inspection and update

The last rating for this service was requires improvement (published 20 May 2022)

### Why we inspected

We undertook this targeted inspection to check whether the Warning Notice we previously served in relation to Regulation 17 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014 had been met. The overall rating for the service has not changed following this targeted inspection and remains requires improvement.

We use targeted inspections to follow up on Warning Notices or to check 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, which will help inform when we next inspect.

## 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?**

At our last inspection we rated this key question requires improvement. We have not reviewed the rating as we have not looked at all of the key question at this inspection.

**Inspected but not rated**

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## Detailed findings

### Background to this inspection

#### The inspection

We carried out this inspection under Section 60 of the Health and Social Care Act 2008 (the Act) as part of our regulatory functions. We checked whether the provider was meeting the legal requirements and regulations associated with the Act. We looked at the overall quality of the service and provided a rating for the service under the Health and Social Care Act 2008.

This was a targeted inspection to check whether the provider had met the requirements of the Warning Notice in relation to Regulation 17 (Good governance) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

#### Inspection team

The inspection was completed by one inspector.

#### Service and service type

This service is a domiciliary care agency. It provides personal care to people living in their own homes.

#### Registered Manager

This service is required to have a registered manager. A registered manager is a person who has registered with the Care Quality Commission to manage the service. 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.

At the time of our inspection there was not a registered manager in post. A new manager had been employed since the last inspection and had applied for registration.

#### Notice of inspection

We gave the service 48 hours' notice of the inspection. This was because it is a small service and we needed to be sure that the provider or manager would be in the office to support the inspection.

#### What we did before the inspection

We reviewed information we had received about the service since the last inspection, including actions

plans submitted by the provider. The provider was not asked to complete a Provider Information Return (PIR) prior to this inspection. A PIR is information providers send us to give some key information about the service, what the service does well and improvements they plan to make. We used all of this information to plan our inspection.

During the inspection

We reviewed records relating to medicines management for six people and a range of management records. We spoke with the manager and two members of staff.

# Is the service well-led?

## Our findings

Well-led – this means we looked for evidence that service leadership, management and governance assured high-quality, person-centred care; supported learning and innovation; and promoted an open, fair culture.

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 on action taken to meet the requirements of Regulation 17 (Good governance). 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

At our last inspection the provider had failed to keep an accurate record of the medicines they had supported people to take or to have effective systems to assess, monitor and improve the quality of the service provided. This was a breach of regulation 17 (Good governance) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

Enough improvement had been made at this inspection and the provider was no longer in breach of regulation 17.

- Since the last inspection the provider had employed a new operations manager. The manager had applied for registration with CQC.
- The manager said their priority had been to build confidence with the staff and ensure they took action to meet the warning notice.
- The manager had developed detailed action plans to address all the shortfalls identified at the last inspection. The plans included information about who was responsible for completing actions and had been regularly reviewed to ensure they were on track.
- Medicines administration records had been fully completed. These gave details of the medicines people had been supported to take.
- The manager had reviewed the medicines administration records with staff and identified the reasons for errors identified at the last inspection. Changes had been made to the way staff worked, to ensure they were able to maintain accurate records.
- The provider had worked with the supplier of their electronic records systems to understand ways they could resolve their recording issues. Staff had been provided with additional training on the medicines recording systems following this, to ensure they understood what they needed to do to maintain accurate records.
- At the last inspection people told us they received good support from staff to take their medicines. We did not seek further feedback from people at this inspection, because our concerns at the last inspection related to the records staff kept, rather than the care they received.
- Quality assurance forms had been sent out to everyone who used the service. The manager said they

planned to use their feedback as a baseline to plan improvements and move forward.

- The manager had developed a series of audits, to assess how key aspects of the service were operating. These included assessments of the medicines management systems, care planning, risk assessments and observations of staff practice. Records demonstrated these audits had identified shortfalls in the way some systems were working and identified how improvements could be made. Actions from the assessments had been followed through to ensure improvements were implemented by all staff.