

Unity Care Solutions Limited

Unity Care Solutions (Maidstone)

Inspection report

Suite 31, 50 Churchill Square
Kings Hill
West Malling
Kent
ME19 4YU

Tel: 08450346410

Website: www.unitycaresolutions.co.uk

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Ratings

Overall rating for this service

Good ●

Is the service safe?

Good ●

Summary of findings

Overall summary

We carried out an announced comprehensive inspection on 23 June 2016. On this inspection, we identified that there were two breaches of regulations 12 and 19 (Regulated Activities) Regulations 2014 in relation to effective recruitment procedures and carrying out appropriate checks on people's health and equipment. Following this inspection in August 2016 the provider sent us an action plan detailing how they were going to meet the regulations. As a result, we undertook an announced focussed inspection on Safe. You can read the report from our last comprehensive inspection, by selecting 'all reports' link for Unity Care Solutions (Maidstone) on our website at www.cqc.org.uk.

Unity Care Solutions (Maidstone) is a domiciliary care agency registered to provide personal care for adults and children who required support in their own home. At the time of our inspection the service was providing care to 15 people in the local community.

There was a registered manager 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.

At our previous inspection on 23 June 2016, the service was in breach of regulation 12 (Regulated Activities) Regulations 2014. This breach was in relation to effective recording of people's health and carrying out appropriate safety checks of equipment. At this inspection improvements had been made and the service was no longer in breach of the regulation.

The registered manager had effective auditing systems in place to check and ensure that staff were checking equipment on arrival at people's homes and that people's records were completed. People's files showed that staff were completing all necessary records on people's health. Training was given to all staff on people's specific equipment prior to starting care

At our previous inspection on 23 June 2016, the service was in breach of regulation 19 (Regulated Activities) Regulations 2014. This breach was in relation to gaps in staff employment history. At this inspection improvements had been made and the service was no longer in breach of the regulation.

The registered manager had put in place auditing systems to check staff files and this included any gaps in employment history. Any gaps or missing information had been identified and rectified through this auditing process. Staff files showed that appropriate checks were made to ensure that staff were safe to work with vulnerable adults and children.

The provider had ensured that there were appropriate systems in place to identify and minimise risk for people using the service. Risks to people's safety had been assessed and actions taken to protect people from the risk of harm.

Medicines were managed safely by trained staff. Guidance was given to staff about people's medicines.

There was sufficient staff to provide care to people. The provider had effective systems in place to ensure that there was appropriate cover when it was required. Staff had safety checks to ensure they were safe to work with children and adults.

People were protected from abuse by trained staff who could identify the forms of abuse and who they can report to. The provider had effective safeguarding systems in place.

The five questions we ask about services and what we found

We always ask the following five questions of services.

Is the service safe?

Good ●

We found that action had been taken to improve safety.

Staff were checking people's equipment and recording all people's health and vital signs when required. The registered manager had auditing systems in place to ensure this was being completed.

Staff files were being effectively audited by the registered manager to ensure that any gaps in employment history were being completed.

There were sufficient staff to provide care and effective systems in place to ensure appropriate cover was available.

The provider had ensured there were appropriate measures in place to identify and mitigate risk.

Competent trained staff managed medicines safely.

People were protected against abuse as the provider had ensured effective safeguarding policies and procedures.

Unity Care Solutions (Maidstone)

Detailed findings

Background to this inspection

We undertook an announced focused inspection of Unity Care Solutions (Maidstone) on 1 June 2017. This inspection was done to check that improvements to meet legal requirements planned by the provider after our comprehensive inspection on 23 June 2016 had been made. The team inspected the service against one of the five questions we ask about services: is the service Safe? This is because the service was not meeting some legal requirements at the last inspection.

The inspection was undertaken by one inspector. During our inspection we spoke with three people using the service, three members of staff and the registered manager. At this visit, we looked at the auditing and quality assurance records at the service, three people's care plans, environmental safety documentation and people's medicine records. Before our inspection, we reviewed our previous report and the information we held about the service.

Is the service safe?

Our findings

People we spoke to who use the service told us they felt the care staff provided safe care. One person told us, "It is completely safe. They know what they are doing and are not afraid to ask us questions on the care we want." Another person told us, "They are totally safe. They have all been given the right training that is specific to our son's needs."

At our previous inspection 23 June 2016, the service was in breach of regulation 12 of the Health and Social Care Act (Regulated Activities) Regulations 2014. We found that the provider had failed to ensure that staff had carried out appropriate checks of equipment and people's health to ensure care and treatment was given in a safe way. At this inspection, the provider had made improvement and was no longer in breach of the regulation.

People were provided with safe care and treatment as staff were making appropriate checks of equipment and people's health. The registered manager had introduced a monthly auditing system to check daily logs which included checking of equipment and people's health where required. The registered manager told us, "We have introduced new charts that are specific to the needs of the people we provide care for." People's care files showed that checks were being made that were specific to people's needs and equipment checks were for the specific named piece of equipment a person used. Staff were also given training on how to use a person's equipment and they were not deemed safe to work with a person until they had completed that training. Guidance was available in people's care files on how to maintain any equipment a person may use that included any settings required for that person. Staff were also completing any required documents to checks people's health. This included the completion of seizure and fluid charts. Where required, staff were completing vital signs of people on visits.

At our previous inspection on 23 June 2016, the service was in breach of regulation 19 of the Health and Social Care Act (Regulated Activities) Regulations 2014. We found that the provider had not operated recruitment procedures effectively. At this inspection, the provider had made improvements and was no longer in breach of the regulation.

The provider had ensured that staff were safe to work with the people they supported. We looked at three staff files and these included completed applications forms, two references and photo identification. There were no gaps in employment history in the checked staff files. Staff records showed that checks had been made with the Disclosure and Barring Service (criminal records check) to make sure staff were suitable to work with vulnerable adults and children. The registered manager told us, "I have introduced a six monthly staff file audit check that they are all up to date and there are no gaps." The previous audit in February 2017 identified that some staff did not have a full copy of their criminal record check on file. The audit identified that there were no gaps in employment history. One action identified that these had been obtained by April 2017. The staff file audit also identified where criminal records check needed to be updated. The registered manager told us, "It is company policy to carry out safety checks on staff every two years." Nurses were registered with the Nursing and Midwifery Council and the registered manager had made checks on their PIN numbers to confirm their registration status.

People who use the service told us that there were enough staff working available to support them. One person told us, "We have three staff assigned to us and a stand in if they are not available. We meet them all before they start providing care and if we are not comfortable with someone then the management we send out others for us to meet." The last three weeks rota showed that there were no gaps. A member of staff told us, "They plan in advance so that there is always cover if it is needed." We were shown rotas that were being completed up to October 2017.

Medicines were being managed safely by trained staff. Staff were completing people's medicine administration records (MAR) and this was being checked in a monthly audit by the registered manager. Care files gave descriptions on each prescribed medicine that a person may have. Information included name, dose, time to be taken, format and preferred method for taking.

Risks to people's personal safety had been assessed and plans were in place to minimise risk. People had risk assessments that were personalised to their needs and these were reviewed on a regular basis and adjusted if a person's needs had changed. Risk assessment were personalised and provided staff with guidance on how to reduce the risk. There were seizure charts in place for those that needed them and appropriate risk assessments in place that gave staff guidance on how to support a person during a seizure, what to look out for during a seizure and after care. There were risk assessments for oxygen therapy, people's specific medicines and moving and handling. The registered manager also carried out risk assessments on a person's living environment and lone working when appropriate.

People were protected against the potential risk of abuse as staff had received safeguarding training and could identify the types of abuse and how to appropriately react. One member of staff told us, "As we do work with children we need to be able to identify any signs of abuse such as neglect. We can report any concerns to the manager or social services if required." The registered manager had effective systems in place to record and investigate any safeguarding concerns.