

Gray Healthcare Limited

Gray Healthcare

Inspection report

West Tower
Brook Street
Liverpool
Merseyside
L3 9PJ

Tel: 01512552830
Website: www.grayhealthcare.com

Date of inspection visit:
22 March 2016

Date of publication:
20 May 2016

Ratings

Overall rating for this service

Good ●

Is the service safe?

Requires Improvement ●

Summary of findings

Overall summary

At our comprehensive inspection of this service on 6 and 13 May 2015, a breach of legal requirement was found. This was because procedures did not ensure that staff were safely recruited and skilled to complete their duties.

After the comprehensive inspection, the provider wrote to us to say what they would do to meet legal requirements in relation to the breach. We undertook a focused inspection on the 22 March 2016 to confirm that they now met legal requirements.

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 'Gray Healthcare' on our website at www.cqc.org.uk

Gray Healthcare is registered to provide personal care and the treatment of disease, disorder or injury for adults across the U.K. The office base is located in Liverpool, Merseyside. The office building is modern and fully accessible for people who required disabled access. At the time of our inspection the service was supporting 21 people who were located in the north of England. The service provides support to people living in their own home who have enduring mental health needs, an acquired brain injury or learning disability. The service specialises in supporting people who have a forensic mental health history and who have experienced episodes of care in secure mental health services. Care and support was being provided to people in their own homes on a flexible basis which was based on the person's assessed needs. The amount of support provided varied between several hours per day to 24 hour support, 7 days per week.

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.

At our focused inspection on the 22 March 2016, we found that the provider had not followed their plan which they had told us would be completed by the 14 August 2015 however legal requirements had been met.

We looked at induction records for staff and saw that four of the eight staff had not completed their induction as required by the provider's own policy and action plan.

The provider offered staff access to a wide range of suitable training and had systems in place to monitor attendance. However these systems had not identified the staff who had not completed their basic induction.

We saw that improvements had been made to the systems that supported the safe recruitment of staff. We

found that each of the eight staff records that we looked at contained evidence of two satisfactory references.

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.

Some staff had not completed their induction training in accordance with the provider's policy.

The provider had made improvements to ensure that staff had been recruited safely.

Requires Improvement 

Gray Healthcare

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.

This focused inspection took place on 22 March 2016 and was announced. This was to ensure that people would be available to support the inspection process. The inspection was completed to check that improvements to meet legal requirements identified at the comprehensive inspection on 6 and 13 May 2015 had been met. The inspection was undertaken by two adult social care inspectors.

We inspected the service against one of the five questions we ask about the service; Is the service safe? This is because the service was not meeting legal requirements in relation to this question.

Before our inspection we reviewed the information we held about the service. At the visit we spoke with the registered manager and three administrative staff involved in the recruitment and training of staff. We looked at eight staff records and policies and procedures relating to staff recruitment and training. We spoke with three care staff.

Is the service safe?

Our findings

At our comprehensive inspection of this service on 6 and 13 May 2015, a breach of legal requirement was found. This was because procedures did not ensure that staff were safely recruited and skilled to ensure they were fit to work with vulnerable people.

At our focused inspection on 22 March 2016 we looked at what action had been taken by the provider to ensure that staff were recruited and trained in accordance with the regulations. We saw that improvements had been made to the systems that supported the safe recruitment of staff. We found that each of the eight staff records that we looked at contained evidence of two satisfactory references. However, they had not completed all of the actions indicated in their action plan that they provided to us within the timescales specified.

Following the comprehensive inspection the provider sent us an action plan which indicated what steps had been taken to address this breach. They included:

1. Registration of staff on the skills for care certificate.
2. A personalised programme of shadowing, training and coaching specific to each department.

We looked at induction records for eight staff and saw that four of the eight had been recently recruited and had not completed all elements of the Care Certificate induction as required by the provider's own policy and action plan. The policy required staff to complete a specific programme of learning within twelve weeks of starting their employment. Records of induction training relating to the Care Certificate were incomplete and did not clearly demonstrate that staff had completed any equivalent training. This meant that the provider could not be certain that they were suitably skilled to meet the requirements of their role. We spoke with the registered manager and an administrator who provided evidence that staff had attended a programme of person centred recovery and rehabilitation training provided by Gray Healthcare which included adult safeguarding, risk management and mental health awareness and gave us assurance that staff who had not, or who were in the process of completing the Care Certificate would be prompted and directly supervised by the locality managers to complete the programme as a priority. Further analysis of other training records demonstrated that staff were sufficiently trained and skilled to complete their duties and keep people safe. We spoke with two of the four staff who told us that they had completed training prior to starting work and had been supported by colleagues on shadow shifts [working under the supervision of an experienced colleague] before working on their own. They each told us that they felt equipped to complete their duties safely.

The provider offered staff access to a wide range of training and had systems in place to monitor attendance. However these systems had not identified the staff who had not completed their Care Certificate induction programme.

We have noted the improvements made but have not revised the rating for this key question to 'good' from 'requires improvement'. To improve the rating to 'good' would require a longer term track record of

consistent good practice. We will review our rating for 'safe' at the next comprehensive inspection.