

Sevacare (UK) Limited

Sevacare - Lincoln

Inspection report

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Ratings

Overall rating for this service

Requires Improvement ●

Is the service safe?

Requires Improvement ●

Summary of findings

Overall summary

We carried out an announced focussed inspection of this service on 7 June 2017. At the time of our inspection the service was providing care for approximately 315 people in their own home, most of whom were older people. The service covered the Lincolnshire LN6 area which included Hykeham, Birchwood, Skellingthorpe, Hartsholme and also Eagle, Whisby and Witham St Hughes.

At our previous inspection on 31 January 2017 we found that the provider did not have effective and safe systems in place for the allocation of staff. A breach of legal requirements was found.

After the inspection, the provider wrote to us to say what they would do to meet legal requirements in relation to the breach. We undertook this focused inspection 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 Sevacare-Lincoln on our website at www.cqc.org.uk

At this inspection we found the provider had made the necessary improvements.

Arrangements were in place to monitor the times of visits and ensure people received their visits in a timely manner. People received their visits at the times they expected. Sufficient staff were deployed in order to meet people's needs.

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. Communication with the local office was effective.

The five questions we ask about services and what we found

We always ask the following five questions of services.

Is the service safe?

We found that action had been taken to improve safety.

There were sufficient staff available to provide appropriate care to people. Care was provided in a timely manner to meet people's needs.

We could not improve the rating for safe 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 unannounced comprehensive inspection of Sevacare-Lincoln on 31 January 2017. We found the service was not meeting some legal requirements. We carried out a focussed inspection on 7 June 2017. This was completed to check that improvements to meet legal requirements planned by the provider after our inspection in January had been made. We 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 legal requirements in relation to this section.

The inspection team consisted of one inspector.

During our inspection we spoke with the registered manager and four care staff. We also spoke with four people who used the service. We looked at five care records. Before our inspection visit to the service we reviewed any notifications of incidents that the registered persons had sent us since the last inspection.

Is the service safe?

Our findings

At our comprehensive inspection in January 2017 we identified that people were not adequately protected against the risks associated with the insufficient staff to provide care in a timely manner. We found on some of occasions visits had not been completed on time or missed completely and people had been placed at risk of harm because they had specific medical needs.

This was a breach of Regulation 18 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

After our inspection the provider wrote to us to say what they would do to meet the legal requirements. At this inspection we found that some improvements had been made since our inspection in January 2017. Arrangements were in place to safeguard people against the risks associated with late or missed visits.

We spoke with four people who used the service. They all told us they were happy with the service they were now receiving. One person said, "On the whole good." Two people told us they had been unhappy with the times of their calls and they had spoken with the registered manager about this. They said that the calls had been changed. One person said the calls were at 'acceptable limits' and they were informed if there was a delay. Another person told us, "None are overly late." They said there had been one occasion when another person had been ill and the carer had stayed with them until the ambulance arrived but that they were informed of this delay.

We looked in detail at five records that described when visits should have been undertaken and when they had been completed over a period of a month. We saw that in four records people's visits were usually provided at a consistent time. However in one record we found visits could be up to an hour late on a regular basis. We spoke with the registered manager about this who told us that this had been agreed with the person, however the record did not reflect this. In one record it was still difficult to understand what time the person's visits should be because care plans did not detail the specific time for the visit. We spoke to the registered manager about this who told us they were now putting this information into care records when people were initially assessed for accessing the service. We observed this was being carried out.

We spoke with four care staff. The staff we spoke with said they felt there was usually sufficient staff to provide the care people required in the time allocated. One member of staff gave an example of the support they provided. They told us they always sat with a person when they were having their breakfast. However another member of staff did raise concerns that due to time constraints support was often very task focussed. However they said they were able to chat with people whilst they were providing support to people. Staff said that if they were delayed for their next visit the systems which were in place now worked better and people were usually informed.

Staff told us there was a high turnover of staff but that new staff had been recruited. The registered manager told us they had a continuous recruitment campaign to ensure they had sufficient staff and had also increased remuneration in order to attract appropriate staff. Systems had been put in place to ensure that

visits were monitored and a monthly report was provided to show how the service was doing. However following our inspection we spoke with six people who had raised concerns regarding the timeliness of their calls and missed calls. We spoke with the provider who confirmed to us they were in the process of resolving these issues.