

Honeybourne House Ltd Cameroon

Inspection report

Whitestone Heathcross Exeter Devon EX4 2HR Date of inspection visit: 01 August 2017

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Tel: 0164761018 Website: www.alliedcare.co.uk

Ratings

Overall rating for this service

Is the service safe?

Inadequate

Good

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Summary of findings

Overall summary

This focussed inspection took place on 1 August 2017. Cameroon is registered to provide accommodation and personal care for up to 13 people with learning disabilities. At the time of this inspection there were nine people living there.

The purpose of this inspection was to check on actions taken by the provider and registered manager to address the breach of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014, Regulation 19; Fit and proper persons employed, which we found at the previous inspection of the service on 3 August 2016. We found that recruitment procedures had not always been carried out in a safe or effective way.

After the last inspection we received a satisfactory action plan from the provider detailing the actions they proposed to take to meet the regulations. They told us they would insist all applicants for jobs must complete an application form giving a minimum of a ten year evidence of work history and any explanations of gaps. Recruitment checks would be completed including gathering references from previous employers and character references. They would also complete a check with the Disclosure and Barring Service (DBS). An interview would be carried out, and if the applicant were found to be suitable, a start date would be agreed. New staff would not begin working in the service until this process had been completed and satisfactory references and checks received.

However, during this inspection we found that the provider had failed to follow the recruitment process set out in their action plan. The service continued to experience a high turnover of staff. They had been unable to recruit new staff locally, and had instead used recruitment agencies to provide staff from other countries. We were unable to see evidence that either the recruitment agencies or the provider had taken care when recruiting new staff to gather evidence of the applicants' suitability for the job. This placed people at risk of harm, abuse or poor care.

The provider's failure to ensure the suitability of new staff had impacted on other areas of the service. People could not be confident the provider would be able to maintain safe staffing levels in the future because the home experienced a high turnover of staff. New staff had arrived in this country with an expectation that they would start work immediately. However, the registered manager told us some new staff had arrived with a very poor command of the English language. Most of the new staff had little or no relevant previous experience. Some staff had not started, and had been passed back to the agency immediately, and some had left the job within a few days or weeks of starting. This had affected the morale of the staff team, and they had experienced periods of very high turnover of staff in the last year. New staff were given some basic induction at the start of their employment and a period of 'shadowing' more experienced staff for the first two weeks. However, this had meant people received support from staff who did not always have the skills, knowledge or experience to meet their needs safely. It also meant that people could not be confident they would receive a consistent service from staff who knew them well, understood their needs, or could communicate effectively with them. The provider had been unable to recruit a cook or cleaning staff. This meant the staff team were expected to carry out cooking and cleaning duties in addition to care tasks. While we found most areas appeared clean, and people received support with personal care when they needed it, people told us they would like to do more activities, and go out more often.

At the time of this inspection we found vacant shifts had been covered by staff from other services operated by the provider. This meant there were sufficient staff to meet people's basic needs, although staff had limited time to support people with activities, outings or social needs. Some people living in the service had limited verbal communication skills and were unable to answer our questions. We spoke with four people who told us they were happy living there and felt safe. We spoke with four staff who told us they enjoyed working in the home and said there was a friendly and positive atmosphere. Comments included "I like it here", and "We just need a couple more reliable staff we can hold on to.

After the inspection the provider told us they intended to close the home. They had contacted the local authority commissioning team to agree a timescale for the closure.

We found one continued breach and two new breaches of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014. In reaching a decision about our regulatory response to the continued breach of regulations we took into consideration the provider's decision to close the service. After the inspection we sought confirmation from the provider that they will maintain a safe staffing level until the home is closed. In their response they assured us they will enhance their monitoring processes to ensure the home runs smoothly during the closure process. They told us they will maintain safe staffing and management levels to meet the dependency levels of the people living there. They proposed to increase the number of monitoring visits by the area management team and quality monitoring team to ensure people continue to receive the best service possible until the home finally closes.

The five questions we ask about services and what we found

We always ask the following five questions of services.

Is the service safe? Inadequate The service was not safe. Inadequate People could not be sure they received care from suitable staff because safe recruitment procedures had not always been followed. People were not supported by sufficient numbers of suitably skilled and experienced staff. High staff turnover meant people did not always receive support from a consistent staff team who knew them well and understood their needs.



Cameroon

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 checked 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 focussed inspection took place on 1 August 2017 and was unannounced. It was carried out by one inspector.

We inspected the service against one of the five questions we ask about services; Is it safe? The purpose of the inspection was to check that actions the provider had told us they would take to address a breach of regulations found at the last inspection had been carried out satisfactorily.

Before our inspection we reviewed the information we held about the service, including notifications received and information from the local authority.

We spoke with the registered manager and four members of staff. We spoke with, or observed care provided to seven people living in the home. We looked at four recruitment records, three care plans and risk assessment records, and the staff rotas. After the inspection we contacted the provider by e mail.

Is the service safe?

Our findings

People continue to receive a service that is not entirely safe. At the previous inspection of the service on 3 August 2016 we found that recruitment procedures had not always been carried out in a safe or effective way.

After the last inspection we received a satisfactory action plan from the provider detailing the actions they proposed to take to meet the regulations. They told us they would insist all applicants for jobs must complete an application form giving a minimum of a ten year evidence of work history and any explanations of gaps. Recruitment checks would be completed including gathering references from previous employers and character references. They would also complete a check with the Disclosure and Barring Service (DBS). An interview would be carried out, and if the applicant were found to be suitable, a start date would be agreed. New staff would not begin working in the service until this process had been completed and satisfactory references and checks received.

However, during this inspection we found that the provider had failed to follow their own recruitment process as set out in their action plan. The service continued to experience a high turnover of staff. They had been unable to recruit new staff locally, and had instead used recruitment agencies to provide staff from other countries. We looked at the recruitment records of three staff recruited since the last inspection. The provider had requested a Disclosure and Barring Service check on staff when they arrived in this country. However, they had failed to seek evidence of any relevant criminal convictions from the countries they had previously lived in. This meant they could not be certain the new staff were suitable to work with vulnerable adults. Some of the references they had received had been addressed 'to whom it may concern' and had not been received as a result of a direct request from the service, for example from the most recent employer. This meant they could not be certain the references were from genuine sources who were able to vouch for the applicant's suitability for the job. This placed people at risk of harm, abuse or poor care.

This is a continued breach of Regulation 19; of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014: Fit and proper persons employed

People could not be confident they would be supported by sufficient numbers of skilled and competent staff at all times. There was a risk that safe or consistent staffing levels may not be maintained. The provider's failure to ensure the suitability of new staff had impacted on other areas of the service. New staff had arrived in this country with an expectation that they would start work immediately. However, the registered manager told us some new staff had arrived with a very poor command of the English language. Most of the new staff had little or no relevant previous experience. Some staff had not started, and had been passed back to the agency immediately, and some had left the job within a few days or weeks of starting. A week before this inspection took place three staff had left on the same day.

In the last year the service had experienced periods of high turnover and had struggled to recruit new staff to fill the vacancies. New staff were given some basic induction at the start of their employment and a period of 'shadowing' more experienced staff for the first two weeks. However, this had meant people received

support from staff who may have only been in post for a few weeks, and whose competence and ability to support people effectively had not yet been proven. It also meant that people could not be confident they would receive a consistent service from staff who knew them well, understood their needs, or could communicate effectively with them.

The provider had been unable to recruit a cook or cleaning staff. This meant the staff team were expected to carry out cooking and cleaning duties in addition to care tasks. While we found most areas appeared clean, and people received support with personal care when they needed it, people told us they would like to do more activities, and go out more often.

At the time of this inspection we found some vacant shifts had been covered by staff from other services operated by the provider. The staff rota showed that on weekdays there was usually the registered manager and/or the deputy manager on duty plus one team leader and two support workers. This meant there were sufficient staff to meet people's basic needs, although staff had limited time to support people with activities, outings or social needs. The staff rotas showed here was no management cover at weekends.

This is a breach of Regulation 18; of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014: Staffing

Some risk assessments were not up-to-date. Three care plans had recently been reviewed and updated. The registered manager told us they were in the process of updating other care plans. One person had recently been in hospital and their needs had significantly changed, but their care plan and risk assessments had not been updated to show their current risks to their health. The registered manager told us all staff had been made aware of the person's current needs and risks, and information about the changes in their risks had been recorded in the communication book. However, with the high turnover of staff, and the use of agency staff and staff from other services run by the provider it was important people's records were up to date. People may be placed at risk of harm or ill health because staff did not have access to up-to-date information from people's care records on people's needs and risks. The registered manager told us they aimed to update the person's care plan and risk assessment by the end of the week.

This is a breach of Regulation17 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014: Good governance

Some of the people living in the home had limited verbal communication skills and were unable to answer our questions. During the inspection we spoke with, or observed people being supported by staff. Four people told us they were happy living there and felt safe. They told us they liked the staff, and they were happy with the way the staff supported them. However, two people told us they did not know some of the staff very well because there had been lots of staff changes.

We spoke with four staff who were positive and told us they enjoyed working in the home despite the high turnover of staff. They said there was a friendly and positive atmosphere. Comments included "I like it here", and "We just need a couple more reliable staff we can hold on to.

After the inspection the provider told us they intended to close the home. They had contacted the local authority commissioning team to agree a timescale for the closure. We have written to the provider to ask for their assurances the home will be safely staffed until every person has moved out.

A week after the inspection we contacted the registered manager by telephone to check on the staffing levels. They told us a further member of staff had left in the previous week. Vacant shifts were being covered by a local agency and they had asked the agency to supply the same staff where possible in order to

maintain continuity. The registered manager and deputy manager were also working additional shifts to cover the vacancies. The registered manager gave us assurances that the current staff team had good English language skills and were able to communicate with people effectively.

Action we have told the provider to take

The table below shows where regulations were not being met and we have asked the provider to send us a report that says what action they are going to take.We will check that this action is taken by the provider.

| Regulated activity | Regulation |
|--|--|
| Accommodation for persons who require nursing or personal care | Regulation 17 HSCA RA Regulations 2014 Good governance |
| | The provider has failed to establish systems to assess, monitor and mitigate the risks relating to the health and safety of people who use the service. Care plans have not been updated to reflect any changes in people's health and personal care needs. |
| Regulated activity | Regulation |
| Accommodation for persons who require nursing or personal care | Regulation 19 HSCA RA Regulations 2014 Fit and proper persons employed |
| | The provider had failed to follow safe procedures when recruiting new staff to ensure staff are of good character and have the skills, competence and experience for the work to be performed by them. |
| Regulated activity | Regulation |
| Accommodation for persons who require nursing or personal care | Regulation 18 HSCA RA Regulations 2014 Staffing |
| | The provider has failed to ensure there are sufficient numbers of suitably qualified, competent, skilled and experienced persons employed to meet the needs of the people who use the service. |