

Reliable Personnel Limited

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Inspection report

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Date of inspection visit:
28 April 2016

Date of publication:
25 May 2016

Ratings

Overall rating for this service

Requires Improvement ●

Is the service safe?

Requires Improvement ●

Is the service effective?

Requires Improvement ●

Is the service well-led?

Requires Improvement ●

Summary of findings

Overall summary

We carried out an announced comprehensive inspection of this service on 4 September 2015 when we found the provider was in breach of the regulations. This was because the provider had failed to check the suitability and fitness of new staff before they started working for the agency ensure staff were suitably trained and supported to effectively carry out their duties and monitor the quality and safety of the service people received.

After the comprehensive inspection the provider wrote to us to say what they would do to meet their legal requirements in relation to the three breaches of the regulations described above.

We undertook this unannounced focused inspection to check the provider had followed their action 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 'Reliable Personnel Limited' on our website at www.cqc.org.uk.

Reliable Personnel Limited is a domiciliary care agency that provides personal care and support to people living in their own homes. There were 20 older people receiving a service from the agency when we inspected them.

There was a registered manager in post. A registered manager is a person who has registered with the Care Quality Commission (CQC) 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.

During this focused inspection, we found the provider had taken some action to make improvements to the training and support staff received. However, we also found the provider had not taken all the steps they said they would in their action plan. Specifically, the provider had failed for the second inspection in a row to ensure all the relevant recruitment checks were carried out in respect of new staff. This repeated failure meant people had been placed at unnecessary risk of receiving inappropriate care and support from staff who might not be suitable or fit to work in the adult social care sector. We also found the provider's governance systems used to monitor the quality of the service people received had again failed to identify that staff records did not always include two written employment and/or character references.

We have taken enforcement action against the provider and have issued a Warning Notice because of repeated breaches of the Health and Social Care (Regulated Activities) Regulations 2014. You can see what action we told the provider to take at the back of the full version of the report.

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 appropriate action had not been taken by the provider to improve safety.

People remained at risk of receiving inappropriate care and support from staff who might not be suitable or fit to care for them. This was because the provider had failed to carry out all the necessary recruitment checks on new staff before they started working for the agency.

Requires Improvement ●

Is the service effective?

We found that appropriate action had been taken by the provider to improve the training and support staff received.

We saw the provider had followed their action plan and taken steps to ensure staff were appropriately trained and supported to carry out the duties they were employed to perform.

While we saw improvements had been made we have not changed the rating for this key question because to do so requires consistent good practice over time. We will check this during our next planned comprehensive inspection.

Requires Improvement ●

Is the service well-led?

We found that appropriate action had not been taken by the provider to ensure the service was well-led.

The provider's governance systems had not been effective in that they were not meeting areas for improvements identified in their action plan to address breaches of regulations. This was because their quality arrangements had not spotted that recruitment was not being carried out as robustly as it should have been.

We have therefore not improved the rating for the key question of well-led. 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 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 unannounced focused inspection was undertaken by an inspector on 28 April 2016. The inspection was carried out to check all the improvements the provider said they would make to ensure they met their legal requirements had been implemented. We inspected the service against three of the five questions we ask about services: Is the service safe? Is the service effective? Is the service well-led?

Before our inspection we reviewed the information we held about the service. This included the action plan we had asked them to send us. The action plan set out how the provider intended to meet the regulations they had breached at their last inspection.

During this inspection we spoke with the registered manager, who is also the owner of Reliable Personnel Ltd, and a member of the business support team. We also looked at 12 staff files and other records that related to the overall management of the service, including various quality assurance reports.

Is the service safe?

Our findings

At our last inspection of this service in September 2015 we found the provider was in breach of the regulation in relation to 'Fit and proper persons employed'. This was because the provider had failed to operate effective staff recruitment procedures. Specifically, the provider had not obtained satisfactory evidence of applicants' conduct in previous employment through the request of employment and/or character references in relation to all the new staff they had employed. This meant people using the service were placed at unnecessary risk of receiving care and support from staff who might not be suitable or fit to work in the adult social care sector. The provider sent us an action plan and told us they would make the necessary improvements.

At this inspection we found the provider had not taken all the appropriate steps they said they would in the action plan they had sent us. This meant they had failed once again to operate effective staff recruitment procedures. Records showed that a newly recruited member of staff, who had recently left the agency, had been permitted to work unsupervised with people using the service without the provider obtaining any written references in respect of them. The registered manager told us they had been given a verbal character reference in respect of this individual from another member of staff who also worked for the agency, but had been unable to obtain an employment reference from this person's previous employer. They therefore could not demonstrate they had carried out satisfactory checks of the conduct of applicants in previous employment.

This failure notwithstanding we found other evidence that the provider had carried out some relevant checks on the former member of staff described above before they started working for the agency, which had included checking their identity, right to work in the UK, and if they had a criminal record.

We looked at the provider's staff recruitment and selection policy which we saw clearly stated 'where written references are not received, the prospective employee may not be permitted to commence working for the agency'. The registered manager acknowledged they had contravened their own staff recruitment policy and had placed people using the service at unnecessary risk of harm because they had not obtained any written references for the former employee described above.

This repeated failure to obtain written references in respect of staff notwithstanding, other records we looked indicated the provider had carried out appropriate employment checks for most staff. This had included checking all new staffs' proof of identity, their right to work in the UK, relevant qualifications and experience, employment histories, employment references and criminal records.

Is the service effective?

Our findings

At our last inspection in September 2015 we found the provider had failed to ensure staff were always suitably trained and supported to carry out the duties they had been employed to perform. Specifically, not all staff had received up to date training in some key aspects of their role that included dementia awareness, moving and handling and understanding the Mental Capacity Act 2005 (MCA). We also found that contrary to the providers training and development policy staff were neither attending regular individual or group meetings with the registered manager and/or their co-workers, and nor had anyone had their overall work performance appraised in the past 12 months. This meant staff had limited opportunities to review and develop their working practices. They sent us an action plan and told us they would make the necessary improvements by April 2016.

At this focused inspection we found the provider had taken appropriate steps to follow their action plan and address the staff training and support issues described above. We found people received care and support from staff who were appropriately trained and supported. Training records showed that most staff had refreshed their moving and handling training since our last inspection and that all new staff were now required to work towards achieving the 'Care Certificate'. The Care Certificate is a nationally recognised set of standards that gives staff an introduction to their roles and responsibilities within a care setting. Subjects covered by the Care Certificate include: dementia, learning disability and mental health awareness; person centred care; privacy and dignity, communication; equality and diversity; moving and handling; safeguarding adults; basic life support; managing medicines; infection control; and, health and safety. The registered manager told us dates for all staff to complete their Mental Capacity Act 2005 (MCA) training had been scheduled to take place over the next few months.

Other records revealed that in the last six months most staff had attended a group meeting with their co-workers, as well as had their overall work performance appraised individually by the registered manager. The registered manager told us these group meetings and individual appraisals were used to review staff's working practices and professional development. The registered manager told us dates for all staff to attend an individual supervision meeting with them had been arranged to take place over the next few months.

Is the service well-led?

Our findings

At our last inspection in September 2015 we found the provider had failed to establish good governance systems to routinely assess, monitor and improve the quality and safety of the service people using the agency received. Specifically, the provider did not have any formal processes in place to regularly spot check and observe staff working practices or monitor the effectiveness of their staff recruitment procedures, staff's record keeping or the training and support staff received.

During this inspection we found the provider had failed to notice that a former member of staff had been permitted to commence working for the agency without providing them with satisfactory evidence of their conduct in past employment through the request of suitable employment references. Their quality assurance arrangements had therefore not been very effective to identify that they were not meeting their own recruitment procedure and the action plan they had drawn up to address breaches of legal requirements.

This point notwithstanding we found the provider had taken steps to address some of the issues we previously had about their quality monitoring systems. For example, records showed the provider had introduced monthly telephone calls and annual satisfaction surveys to find out what people using the service thought about the standard of care and support they received from the agency. The registered manager told us the feedback from these surveys was used to find out what people thought the agency did well and what they could do better. The registered manager also told us since our last inspection they had employed a clinical governance and training manager to oversee the service's audits and staff training. Records showed the new clinical governance manager regularly visited the service to carry out audits. This included reviewing the training and support staff received.

This section is primarily information for the provider

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 did not take formal enforcement action at this stage. We will check that this action is taken by the provider.

Regulated activity	Regulation
Personal care	Regulation 17 HSCA RA Regulations 2014 Good governance The provider had not established good governance systems to regularly assess, monitor, and where required, improve the quality and safety of the service people received. Regulation 17(2)(a)

This section is primarily information for the provider

Enforcement actions

The table below shows where regulations were not being met and we have taken enforcement action.

Regulated activity	Regulation
Personal care	Regulation 19 HSCA RA Regulations 2014 Fit and proper persons employed People using the service were at risk of receiving care and support from staff who might not be suitable to work with them. This was because the registered person had failed to undertake all the relevant recruitment checks on new applicants before they were employed to work for the agency. Regulation 19(3)(a)

The enforcement action we took:

Regulation 19 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014