

Day and Nite Services Ltd

Day and Nite Services (Kingston)

Inspection report

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Ratings

Overall rating for this service

Good



Is the service well-led?

Good



Overall summary

We carried out an announced comprehensive inspection of this service on 4 and 9 February 2015 and breaches of legal requirements were found. This was because the service did not operate effective governance systems to assess, monitor and improve the quality and safety of the services they provided. 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 25 September 2015 to check that they had followed their action plan and to confirm that they now met legal requirements. This inspection was also announced. We told the registered manager two days before our visit that we would be coming to ensure they would be available.

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 Day and Nite Services (Kingston) on our website at www.cqc.org.uk

Day and Nite Services (Kingston) is a domiciliary care agency that provides people living in their own homes personal care and support designed to meet their individual needs and circumstances. At the time of our inspection 68 older people and younger adults were receiving services from the agency. The needs of these individuals' were varied and included people living with dementia or mental ill health and people with physical or learning disabilities.

Summary of findings

The service had 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 our focused inspection we found that the provider had followed their action plan which they had told us would be fully implemented by June 2015. We saw legal requirements had been met by the provider because they operated effective governance systems that ensured they routinely assessed, monitored and improved the quality and safety of the services they provided.

Summary of findings

The five questions we ask about services and what we found

We always ask the following five questions of services.

Is the service well-led?

We found that appropriate action had been taken by the provider to ensure the domiciliary care agency was well-led.

The provider operated good governance systems to regularly assess, monitor and improve the quality and safety of the service the agency provided. Feedback from people receiving services from the agency was also routinely sought and used to drive improvement.

This meant that the provider was now meeting legal requirements and we have therefore revised the rating for this key question; to improve the rating to 'Good'.

Good



Day and Nite Services (Kingston)

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 announced focused inspection was undertaken by a single inspector on 25 September 2015. This inspection was completed to check that improvements to meet legal

requirements planned by the provider after our comprehensive inspection in February 2015 had been made. We inspected the service against one of the five questions we ask about services: is the service well-led?

Before our inspection we reviewed the information we held about the agency, this included the provider's action plan, which set out the action they would take to meet legal requirements.

During our inspection we visited the agency's offices and spoke with the services' quality assurance manager and two care coordinators'. We also looked at records that related to the overall management of the service, including various quality assurance audits, feedback received from people using the service and their relatives, and staff supervision and training records.

Is the service well-led?

Our findings

At our comprehensive inspection of this service on 4 and 9 February 2015 we found the provider was in breach of legal requirements because we identified issues with the provider's governance systems. Although we saw the agency had established some good processes to assess and monitor the quality of the service they provided; we found they were not always operated effectively. Specifically, there was no evidence to show the provider routinely analysed what had happened when an incident took place involving people using the service or a complaint was made about the agency's operation. In addition, where issues had been identified, no action plans were put in place which stated clearly what the agency needed to do to learn valuable lessons from mistakes that were made in order to mitigate risks or prevent similar events reoccurring. Similarly, feedback from people using the service, their relatives, professional representatives and staff was not regularly sought by the agency and used to help them to improve the quality and safety of the service they provided.

At this focused inspection we found that the provider had followed the action plan they had written to meet shortfalls in relation to the legal requirements described above. We found that the provider had established good governance systems to effectively assess monitor and improve the quality and safety of the personal care services they provided to people in their own homes.

It was clear from records we looked at, and discussions we had with the service's quality assurance manager, that staff now regularly sought the views of people using the service and their relatives through bi-monthly telephone contact

and the use of quarterly satisfaction surveys. We saw this feedback was analysed on a monthly basis and where any issues were found, an action had been put in place which made it clear what the agency needed to do to improve. For example, although people who had participated in the agency's most recent satisfaction survey said that overall they were happy with the overall quality of the service they received; most felt some staffs knowledge and skills could be improved. We saw the agency had put an action plan in place which identified dates staff were scheduled in to attend refresher training courses to update their existing knowledge and skills.

Other records were more comprehensive and showed us what had happened during any accidents or incidents involving the people using the service, as well as any complaints raised about the agency, which were now analysed on a monthly basis by the quality assurance manager. We saw an action plan had been established that stated clearly what staff needed to do to minimise the risk of similar incidents reoccurring. Staff records also showed us staff had regular individual supervision meetings with their line manager and group meetings with their co-workers. The quality assurance manager told us staff had their overall work performance observed and appraised at least once a year, which staff we spoke with confirmed. Through these meetings and spot checks staff were provided opportunities to discuss their work performance, issues or concerns and any learning and development needs they had. Staff also told us any accidents, incidents, safeguarding issues or complaints made about the agency were discussed at their individual supervision or team meetings to ensure they were aware of what happened and the improvements that were needed.