

Phronimoo Services Ltd

Safer Care Community Services

Inspection report

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Overall summary

This focussed inspection took place on June 9 2015 and was announced. We informed the provider one day in advance of our visit that we would be inspecting. This was to ensure there was somebody at the location to facilitate our inspection. This focussed inspection took place to look into concerns raised by local authority commissioning teams around safeguarding, appropriate training for staff and that care plans for people were not personalised.

The service is a domiciliary care service that provides support with personal care to people living in their own homes. At the time of our inspection the service was providing care to 22 adults and 16 children.

There was a registered manager employed at the service. 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.

Staff did not always have the most appropriate information to meet people's current care needs because the provider did not ensure care records were

person-centred and reflected people's personal preferences. The care plans were not personalised as they did not state the name of the person receiving care and gave no personal preferences, methods of communication, guidance and interests to support staff to provide personalised care.

Systems were in place to help ensure people were safe. Staff had undertaken training about safeguarding adults and had a good understanding of their responsibilities with regard to this. Risk assessments were in place which provided information about how to support people in a safe manner.

Staff received regular training and were knowledgeable about their roles and responsibilities. They had the skills, knowledge and experience required to support people with their care and support needs. People and their relatives said that the service responded to any concerns or complaints.

We found one breach of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014. You can see what action we asked the provider to take at the back of the full version of this report.

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 safe?

The service was safe. People and their relatives told us they felt the service was safe. Staff had a good understanding of their responsibilities with regard to safeguarding adults

Risk assessments were in place to help ensure people were supported in a safe manner.

Is the service effective?

The service was effective. Staff had received the appropriate training and support to carry out their roles.

Is the service responsive?

The service was not always responsive. Staff did not always have the most appropriate information to meet people's current care needs because the provider did not ensure care records were person-centred and reflected people's personal preferences.

People and their relatives said that the service responded to any concerns or complaints.

Safer Care Community Services

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.

Before our focused inspection, we reviewed the information we held about the service. We spoke to the local contracts and commissioning teams that commissioned the service on behalf of the people using the service.

We undertook a focused inspection of Safer Care Community Services on 9 June 2015. The inspection was carried out by two inspectors. On the day of the inspection we spoke with the provider, registered manager, care co-ordinator and four care workers. After the inspection we spoke on the phone with two relatives of the people that used the service. We also visited two people in their homes, two relatives and a friend of a person who used the service. We looked at 12 care files, two care folders in people's homes, daily records, training records, and policies and procedures for the service.

Is the service safe?

Our findings

We had received information from the local commissioning teams that people were at risk of harm as staff had not received adequate training for safeguarding adults and children. During the inspection we checked whether people were at risk of harm.

A friend and relatives of the people who used the service told us they felt the service was safe. One relative told us, "Yes it is safe. They did risk assessments and who to call in an emergency." Another relative said, "The service is safe. I am regularly updated." A friend of a person who used the service said, "I feel it is safe when I am not here."

We saw that the service had a safeguarding adults and children's policy and procedure in place. Staff were able to explain the procedure they would follow in the event of any

concerns about people's safety. They all knew the different types of abuse and had a good understanding of the provider's policy for safeguarding adults and children. One staff member told us, "I would call the manager if I suspected anything." Another staff member said, "I would let the agency know then write it all down." We saw records that safeguarding training had been recently delivered to staff. Staff we spoke with knew about whistleblowing procedures and who to contact if they felt concerns were not dealt with correctly.

People's risk assessments had been completed for tasks such as medicines, falls, skin integrity, and moving and handling. The information in these documents was up to date. This meant that staff had access to current information about the people they supported. Our discussions with staff showed that guidance in these areas was followed.

Is the service effective?

Our findings

We had received information from the local commissioning teams that staff had not received appropriate training.

People and relatives of the people who used the service told us the needs were being met by staff who knew what they were doing. One person said about their carers, "Everyone is good." One relative told us, "I would say they [staff] have good skills." Another relative said, "Some staff less skilled than others. When someone is new there is usually a lot of training going on." The same relative said, "Usually less skilled carers are accompanied with a fully skilled person."

The manager and staff told us that new care workers attended a three day training program which covered the 15 standards for the Care Certificate. The three days took place at the current office and is taught by the manager.

The manager had been a teacher and had completed "Train the trainer". New staff on completing this induction attended practical sessions at an external training company. We looked at the training matrix which showed what topics were covered for the practical sessions. Topics included first aid, food safety, health and safety, safeguarding, record keeping, person centred planning, moving and handling, equality and diversity and infection control. Staff told us they had worked alongside experienced staff so they could get to know the care and support each individual required before providing care and support on their own. One staff member told us, "After induction I was taken to the client's home and showed what goes on." Another staff member said, "Induction was for three days. Recently I did mandatory training on health and safety." The same staff member said, "For the moment I have had enough training to do my job."

Is the service responsive?

Our findings

We had received information from the local commissioning teams that care plans for people were not personalised.

Staff did not always have the most appropriate information to meet people's current care needs because the provider did not ensure care records were person-centred and reflected people's personal preferences. For example, the provider had identified a child receiving care needed social stimulation. The care plan stated "engage child in conversation and mental stimulation" as guidance.

Another care plan had identified someone who wanted to improve their life skills and the guidance on the care plan stated "support to develop life skills." The care plans were not personalised as they did not state the name of the person receiving care and gave no personal preferences, methods of communication, guidance and interests to support staff to provide personalised care.

These issues demonstrated a breach of regulation 9 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

The provider had a system in place to log and respond to complaints. There was a complaints procedure in place. This included timescales for responding to complaints and details of who people could escalate their complaint to, if they were not satisfied with the response from the service. People were given a copy of the complaints procedure included in the service users guide. One relative told us, "The manager will deal with problems very quickly." The complaints had been investigated and resolved to ensure people received the care they expected. This showed that complaints were effectively managed.

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 | <p>Regulation 9 HSCA (RA) Regulations 2014 Person-centred care</p> <p>Person-centred care</p> <p>The registered persons did not take proper steps to ensure that each service user is protected against the risk of receiving care that is inappropriate or unsafe, by means of the planning and delivery of care in such a way as to meet the service user's individual needs and reflect their personal preferences.</p> <p>Regulation 9(1)(b)(c)(3)(b)</p> |