

Golden Key Support Ltd

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Inspection report

East London Business Centre, G5
93-101 Greenfield Road
London
E1 1EJ

Tel: 02036897015
Website: www.goldenkeysupport.co.uk

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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 inspection of this location on 28 April and 2 May 2017. Breaches of regulations were found in relation to staff recruitment and the management of medicines. We issued a warning notice requiring the provider to make improvements with regards to staff recruitment processes; after this inspection the provider wrote to us to say what they would do to meet legal requirements.

We undertook this announced focussed inspection on 14 September 2017 to check whether the provider had followed their action plan and made the necessary improvements to meet legal requirements. This report only covers our findings in relation to these areas. You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for 'Golden Key Support Ltd' on our website at www.cqc.org.uk

Golden Key Support is a domiciliary care agency which provides care and support to older people and people with physical disabilities in East London. At the time of our inspection there were 23 people using the service.

The location had a registered manager. 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.

We found that the provider had met the requirements of the warning notice regarding staff recruitment. We had issued this notice as we found that five staff were working for the agency who had fraudulent references from previous employers, and that the provider had failed to carry out a risk assessment for a staff member who had information of concern on their background check. At this inspection we found that the provider had obtained alternate references for these staff and made calls to confirm that references were genuine, and that they had carried out a suitable risk assessment for this staff member. They had introduced a system for verifying that background checks were in place before a staff member was signed off to start work. However, the provider was still not meeting this regulation, as although they had obtained references for staff, we found that some care workers' references did not provide satisfactory evidence of previous employment in health and social care.

At our previous inspection we found that the provider was not meeting regulations regarding the safe management of medicines. We found that the provider was now meeting this regulation, as they had obtained suitable medicines administration charts for people they were supporting, and these were now fully audited by the registered manager to ensure that they were properly completed. Relatives of people who used the service were positive about the changes made by the provider.

We found one breach of regulations relating to staff recruitment and you can see what action we told the provider to take at the end of the full version of this 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?

The provider had taken action to improve the safety of the service but it was still not always safe.

References for care workers were now checked to ensure that they were genuine. However, references did not always cover care worker's previous employment in health and social care.

We found that medicines were safely managed and the registered manager carried out suitable checks to ensure that this was the case.

We were unable to change the rating for this question as the provider was not fully meeting regulations in this area, and to do so requires evidence of good practice over time. We will look at this again during our next comprehensive inspection.

Requires Improvement ●

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Detailed findings

Background to this inspection

We undertook an announced focused inspection of Golden Key Support Ltd on 14 September 2017. This was to check that improvements to meet legal requirements planned by the provider after our inspection in on 28 April and 2 May 2017 had been carried out. 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 some legal requirements.

Prior to the inspection we reviewed records we held about the service, including information of significant events the provider is required by law to tell us about and the provider's action plan from their previous inspection. The inspection was carried out by a single inspector.

We looked at records relating to the recruitment of 13 care workers and the management and audit of medicines for both people the provider supported with medicines. We spoke with the registered manager, administrator, care co-ordinator and two representatives of the two people who were supported with medicines.

Is the service safe?

Our findings

After our previous inspection on 28 April and 2 May 2017 we issued the provider with a warning notice as they were not meeting legal requirements with regards to staff recruitment. This is because we found five care workers had previous employment references which were not genuine, and in one case a care worker had evidence of a previous conviction on their check with the Disclosure and Barring Service (DBS), which the provider had not carried out a risk assessment for. The DBS provides information on people's backgrounds, including convictions, to help employers to make safer recruitment decisions.

We found that the provider had taken action to address the issues identified in the warning notice, but was still not meeting this regulation. The provider had carried out a suitable risk assessment for the care worker who had a previous conviction. As was the case in the last inspection, we found that the provider had carried out DBS checks on all care workers before they had started work.

Immediately after our previous inspection the provider had written to the five care workers who had fraudulent references and had obtained new references for these care workers. We reviewed a further eight care workers' files and found that there were at least two references in place for all care workers when required. The law requires employers to obtain satisfactory evidence of conduct in previous employment concerned with the provision of services relating to health and social care. The provider had recorded when they had called the referee in order to verify that the reference was genuine, and, as we found last time, where personal references were given the provider obtained identification of the referee such as a passport or driving licence. The provider continued to obtain suitable identification for care workers such as photographic identification, proof of address and of their right to work in the UK.

However, we found that the provider could not always evidence that care workers had evidence of satisfactory conduct in previous employment in social care. This was because we identified four care workers whose work histories stated that they had been employed as care workers, and although there were references from previous employers or personal references, they had not obtained a reference relating to their previous employment in care. The provider immediately contacted these previous employers in order to obtain references.

This constituted a breach of Regulation 19 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

At our previous inspection we found that the provider was not meeting the regulation with regards to the safe management of medicines. This was because medicines administration recording (MAR) charts were hand written and did not record information such as what medicines should be administered or the dose and time to be taken, which meant that there was a high risk of medicines errors. This meant that these could not be suitably audited, and that audits therefore missed serious errors and discrepancies.

At this inspection we found the provider was now fully meeting this regulation. The provider had worked with local pharmacies who now provided printed MAR charts for the two people they supported with

medicines. These were produced on a monthly basis and therefore contained up to date information on the medicines people took, including dose, timing and dispensing instructions. This was simpler for staff to manage. We reviewed two MAR charts for each person and saw that staff had correctly completed these. The registered manager had an audit system in place where he checked that these were correctly drawn up and completed and checked for any gaps in signing. These had been carried out promptly for both people on a monthly basis. The audit had identified one possible discrepancy which was addressed by the registered manager with clear instructions for care workers to follow. This meant medicines were now managed safely. We identified one discrepancy whereby a person's care plan did not reflect the level of support care workers provided with medicines. We brought this to the attention of the registered manager, who told us they would review this person's care plan to address this.

Relatives we spoke with were positive about the changes which the provider had made regarding medicines management. Comments included, "They can be sure it's done, I think it's a positive thing" and "[It] is working a lot better, because there was some inconsistency from the carers, they [now] know what they need to do and we can check that it happened."

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 will check that this action is taken by the provider.

Regulated activity	Regulation
Personal care	<p>Regulation 19 HSCA RA Regulations 2014 Fit and proper persons employed</p> <p>The provider did not ensure that persons employed to carry on a regulated activity were of good character, by failing to obtain satisfactory evidence of conduct in previous employment concerned with the provision of services relating to health and social care 19(1)(a)</p>