

Peoples Choice (UK) Limited

People's Choice UK

Inspection report

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Ratings

Overall rating for this service

Requires Improvement ●

Is the service safe?

Requires Improvement ●

Is the service responsive?

Requires Improvement ●

Summary of findings

Overall summary

We carried out an announced comprehensive inspection of this service on 19 November 2015, during which breaches of legal requirements were found. We found that risk assessments were not robust and did not provide staff with the information they needed to ensure that they could take steps to keep people safe. Those risk assessments that had been completed had not been reviewed on a regular basis to ensure they were an accurate reflection of the risks that were posed to people.

We also found that the provider had failed to ensure that people had accurate and up-to-date person-centred care plans in place. Staff did not have the information they needed to provide people with individualised care and records were accurately maintained. Care plans and daily notes were not reviewed regularly to ensure they were an accurate reflection of people's care and support needs.

We asked the provider to submit an action plan to tell us how they would meet these regulations in the future; they stated that they would be meeting them by 30 March 2016. During this inspection we returned to see if the service had made the improvements they stated in their action plan. We found that the provider was now meeting these regulations.

We undertook this focused inspection on 12 April 2016 to check that they had followed their 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 People's Choice UK on our website at www.cqc.org.uk.

During our previous inspection on 19 November 2015

People's Choice UK is registered to provide personal care to people in their own homes in and around the town of Bedford. When we inspected the service was providing 22 people with care and support.

The service 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.

Improvements had been made to the risk assessments carried out by the service. Risk assessments had been carried out for each person and showed how risk levels had been calculated. They also provided staff with control measures which detailed how they could work to reduce the impact of risks on people's health, safety and well-being.

There had also been improvements made regarding people's care plans and records. Care plans were more person-centred and were reviewed and updated regularly to ensure they were accurate. Records such as daily notes were collected regularly and reviewed to identify trends and update care plans if necessary.

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 not consistently safe.

Improvements had been made to the systems in place to assess, manage and review risks to people who received care from the service.

There had also been improvements to the way that medication administration was managed by the service.

We could not improve the rating for safe from requires improvement, 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 responsive?

The service was not consistently responsive.

Improvements had been made to people's care plans to ensure they were more person-centred. Care plans had been reviewed and daily notes were collected on a regular basis to ensure the content of people's records was accurate and up-to-date.

We could not improve the rating for responsive from requires improvement, because to do so requires consistent good practice over time. We will check this during our next planned comprehensive inspection.

Requires Improvement ●

People's Choice UK

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.

We undertook an announced focused inspection of People's Choice UK on 12 April 2016. This inspection was carried out to check that improvements to meet legal requirements planned by the provider after our 19 November 2015 comprehensive inspection had been made. We inspected the service against two of the five questions we ask about services: is the service safe and responsive. This is because the service was not meeting some legal requirements.

The inspection team comprised of one inspector.

Before this inspection we reviewed all the information we held about the service, including data about safeguarding and statutory notifications. Statutory notifications are information about important events which the provider is required to send us by law. We spoke with the local authority to gain their feedback as to the care that people received. We also reviewed the report from our previous inspection.

During the inspection we spoke to the provider, who was also the registered manager, about the improvements they had implemented following our previous inspection. We also spoke with a care coordinator and a carer who also helped out with administrative tasks.

We reviewed five people's care records and two staff recruitment records to check to see if the planned improvements had been implemented. We also checked medication and quality assurance records to see if changes had been made.

Is the service safe?

Our findings

During our inspection on 19 November 2015, we found that risks to people's safety had not been effectively assessed or reviewed, to ensure that appropriate action was taken to minimise the impact of risks on people. The provider had not taken people's history regarding specific risks into account; therefore staff were unable to implement control measures to safeguard them from future risk. Medication records were also not managed appropriately and did not always contain specific information regarding people's medication and how it should be taken. We found that this was a breach of regulation 12 (1) (2)(a)(b)(g) of the Health and Social Care Act 2008 (Regulated Activities) 2014.

During this inspection we found that improvements had been made by the provider. The registered manager explained that they had carried out a full review of how risks were assessed and managed at the service. They told us that they had sourced and introduced some specific risk assessment tools, such as Waterlow tools, used to assess people's risk of developing a skin integrity breakdown. They also told us that they had worked with professionals such as district nurses to help them and their staff get used to these tools and ensure they were used correctly.

Staff members told us they had noticed an improvement in terms of risk management at the service. They explained that risk assessments were now more comprehensive and provided them with useful information and guidance regarding how to manage risks. They told us that this had a positive effect on the care that people received, as potential problems were quickly identified and remedial action could be taken. One staff member said, "We identify risks more quickly and steps are put in place to manage them." Another staff member told us, "People are getting better care and we have more information available to us."

We looked at risk assessments in people's care plans. We saw that they were comprehensive and covered key areas such as skin integrity, mobility and falls risks. Risk assessments provided staff with control measures and guidance to help them reduce risks and the impact that they may have on people. Where applicable, specific tools were used to give a reliable risk rating which was revisited on a regular basis to help monitor risk levels and identify if there was a change to the risks that people faced. We saw that all risk assessments were reviewed on a regular basis to ensure that they were accurate and provided staff with the information they needed.

The registered manager also told us that people's medication records had been reviewed and a new Medication Administration Record (MAR) chart had been introduced to help improve the way medication administration was recorded. Staff members told us that they found the new MAR charts useful and easier to use. In addition, they told us that medication information had been added to people's care plans, making it easier for them to check and make sure they were giving the correct medicines at the right times.

We checked people's MAR charts and found that they had been simplified and were more user-friendly since our last inspection. MAR charts had been completed in full and demonstrated that people had been given their medication as prescribed. There was also evidence to show that MAR charts had been checked by senior staff, to ensure that they had been completed in full. People's care plans also contained information

about their medication and provided staff with guidance about why it was prescribed and how they liked to take it. This helped to ensure that medication was managed appropriately by the service and in line with people's wishes.

Is the service responsive?

Our findings

During our inspection on 19 November 2015 we found that people did not always receive personalised care to meet their individual needs. People's care records did not provide staff with consistent person-centred information and were not updated on a regular basis. We found that there were not accurate, complete and contemporaneous records for each person, which was a breach of regulation 17(1) (2)(c) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

During this inspection we found that the provider had made improvements to people's records. The registered manager explained that they were in a process of reviewing each person's care plan in full, to update the information within them to ensure they were person-centred. They told us that they had introduced a system to collect people's daily notes on a monthly basis and store them at the main office. This allowed them to review these notes and make any necessary changes to the care plan based on what had been recorded.

Staff members told us that there had been an improvement in the content of the people's care plans. One staff member said, "A lot of things have changed. The care plans are better now." They told us that they contained more specific information about their needs and preferences, which helped them to perform their roles and get to know people. They also told us that care plans were reviewed regularly so they knew that they could feed new information back and it would be used to help improve the plans.

We looked at people's care plans and noted that they had been improved to ensure that there was more person-centred information available to staff. We also saw that these care plans had been reviewed on a monthly basis, and that changes had been made to them where necessary. People's daily notes had been completed on a monthly basis and we could see that the information recorded within them had also improved. The service had implemented systems to ensure that people had person-centred records which were regularly reviewed and kept up-to-date.