

Care at Home Services (South East) Limited
Care at Home Services
(South East) Limited -
Tunbridge Wells

Inspection report

4 Linden Close
Eridge Road
Tunbridge Wells
Kent
TN4 8HH

Date of inspection visit:
10 February 2017

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20 April 2017

Ratings

Overall rating for this service

Good ●

Is the service safe?

Good ●

Summary of findings

Overall summary

Care at Home services (South East) Limited- Tunbridge wells is a home care agency based in Tunbridge Wells. The service provides care and support to people in their own homes including people with physical disabilities, people living with dementia and adults over 65 yrs.

At the last inspection, the service was rated good overall and requires improvement for our question 'Is the service safe?'

We carried out an unannounced comprehensive inspection of this service on 9 December 2015. A breach of regulation was found relating to safe medicine practice. After the comprehensive inspection, the registered provider wrote to us to say what they would do to meet legal requirements in relation to the breach of Regulation 12 of the Health and Social Care Act Regulated Activities Regulations 2014, Safe care and treatment. We undertook this focused inspection to check that they had followed their plan and to confirm that they were meeting the regulations. This report only covers our findings in relation to this matter. You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Care at Home Services (South East) Limited - Tunbridge Wells on our website at www.cqc.org.uk.

The service had improved since the last inspection. Medicines were now managed safely and records relating to medicines were accurate and complete.

Staff knew how to recognise and respond to abuse. There had been no safeguarding incidents since our last inspection. The whistle blowing policy had been reviewed and updated to ensure staff knew how to contact outside agencies if they had concerns about poor practice.

Risks continued to be assessed and minimised where possible. Regular health and safety checks were undertaken to ensure the environment was safe and equipment worked as required.

There was enough staff to keep people safe. Staff were checked before they started working with people to ensure they were of good character and had the necessary skills and experience to support people effectively. The registered manager had introduced new systems to monitor the arrival times of staff and the duration of care calls.

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 action had been taken to improve safety.

Medicines were managed safely. Records were maintained consistently and the registered manager had systems for checking medicines practice.

Risks to people continued to be identified and recorded and there was clear guidance in place to help manage the risks.

There was enough staff to keep people safe. Staff were checked before they started working at the service. The registered manager had improved the monitoring of call arrival times and duration to ensure people were receiving the care they were entitled to.

Staff had received training and knew how to recognise and respond to different types of abuse.

Good 

Care at Home Services (South East) Limited - Tunbridge Wells

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 last inspected this service on 9 December 2015. A breach of regulation was identified at this inspection.

We undertook an announced focused inspection of Care at Home Services (South East) Limited - Tunbridge Wells on 10 February 2017. This inspection was carried out to check that the required improvements to meet legal requirements had been made following our inspection on 9 December 2015. We inspected the service against one of the five questions we ask about services: Is the service safe? This was because the service was previously not meeting a legal requirement. This inspection was carried out by one inspector.

The provider had completed a Provider Information Return (PIR) and sent this to us before the inspection. This is a form that asks the provider to give some key information about the service, what the service does well and improvements they plan to make. Before the inspection we reviewed all the information we held about the service, we looked at previous inspection reports and any notifications received by the Care Quality Commission. A notification is information about important events, which the provider is required to tell us about by law.

We spoke with the registered manager. We looked at records including medicines records and audits, staff rotas, risk assessments and care records. We spoke with three people who used the service.

Is the service safe?

Our findings

People told us they felt safe using the service. They told us that the staff treated them well and they were comfortable with them being in their home. One person told us, "The carers are good and I know them well." Another person said, "I feel very safe when they are here and I know I can contact them if I need help." We asked people if they were given the support they needed to manage their medicines safely. They told us they received the care they needed in this area. One person said, "They always check I have taken my medicines and I know they keep some records."

At the last inspection in December 2015 we found that records of people's medicines were not always completed correctly or consistently. At this inspection we found that improvements had been made and the registered provider was meeting the requirements of the regulations. People were supported to manage their own medicines safely. Where they required assistance a risk assessment had been completed to establish what support they required. Staff had completed training in the safe handling of medicines and improvements had been made to the completion of medicines records. The registered manager carried out a recent full medicines audit and had taken action to address shortfalls in recording. A new system for regularly checking the completion of records had been introduced. The registered manager described additional training that was being sourced for senior carers to allow them to take the lead role in monitoring safe medicines practice. The medicines policy had been reviewed and reissued to all staff in January 2017. There had been no medicines errors since our last inspection.

Staff were trained in recognising the signs of abuse and knew how to refer to the local authority if they had any concerns. Staff training records confirmed that their training in the safeguarding of adults was up to date. The registered provider had reviewed the a whistle blowing policy in December 2015 to provide staff with contact details for outside agencies they could speak to if they had any concerns about poor practice or abuse. There were robust systems in place to ensure that people's money was safeguarded. Where staff handled money on behalf of a person, for example to carry out shopping, they issued a receipt and kept accurate records about expenditure. Risk assessments continued to be centred on the needs of the individual with clear measures to reduce the risks to people and appropriate guidance for staff. Accidents and incidents were recorded and monitored by the registered manager. Assessments of people's home environment were carried out before the staff started to provide support to ensure that risks were identified and minimised.

There continued to be sufficient staff to meet people's needs. The registered manager told us they reviewed staffing levels whenever people's needs changed and consulted with people, their relatives, and their funding authority if appropriate, to discuss increasing the support provided. Staff were allocated travelling time between calls and people told us that they were usually arrived at the scheduled time. The registered manager had introduced daily log event sheets to include monitoring the arrival times of carers and the duration of calls. There was a system in place to call a sample of people using the service each week to check staff were arriving at the specified times. There had been no missed calls since our last inspection. Recruitment procedures remained effective and included interview records, checking employment references and carrying out Disclosure and Barring Service (DBS) checks. These checks identified if

prospective staff had a criminal record or were barred from working with people that needed care and support. Gaps in employment history were explained.