

Cheviot Care Limited

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Inspection report

15 High Fair
Wooler
Northumberland
NE71 6PA

Tel: 01668282353

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Ratings

Overall rating for this service

Inadequate 

Is the service safe?

Inadequate 

Is the service effective?

Inadequate 

Is the service caring?

Requires Improvement 

Is the service responsive?

Requires Improvement 

Is the service well-led?

Inadequate 

Summary of findings

Overall summary

About the service

Cheviot Care Limited is a domiciliary care agency providing personal care to people in their own homes in Wooler. There were seven people receiving personal care at the time of the inspection.

Not everyone who used the service received personal care. CQC only inspects where people receive personal care. This is help with tasks related to personal hygiene and eating. Where they do, we also consider any wider social care provided.

People's experience of using this service and what we found

At our previous inspection we identified multiple breaches of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014. At this inspection, we found that insufficient action had been taken to improve.

There were continued shortfalls relating to recruitment, the assessment of risk, care records and staff training. New shortfalls were identified in relation to medicines management and records relating to the Mental Capacity Act [2005]. The provider's governance system had not highlighted these issues.

People were supported to have maximum choice and control of their lives and staff supported them in the least restrictive way possible and in their best interests. However, records did not always evidence this.

Action had been taken in relation to the provider's safeguarding system. Staff had undertaken safeguarding training and knew how to report any safeguarding concerns. Infection control and COVID-19 training had also been carried out. Staff were knowledgeable about how to put on and take off PPE safely to reduce the risk of cross infection. One relative said, "When I have gone into the house unexpectedly they are wearing masks, aprons and gloves and I know when they take [relative] shopping, both the carer and [relative] are wearing masks as I see them when I am out and they pass me by in the car."

Although we identified shortfalls in many aspects of the service, people and relatives spoke very positively about the care and support provided. Comments included, "They are very patient in fact marvellous with me whilst caring for me" and "I would recommend this company to anyone looking for good reliable care."

For more details, please see the full report which is on the CQC website at www.cqc.org.uk

Rating at last inspection (and update)

The last rating for this service was inadequate (published 12 January 2021) and there were multiple breaches of the regulations.

The provider has failed to achieve a rating of good at the last five inspections.

Why we inspected

We undertook this inspection to check that improvements had been made and confirm whether they now

met legal requirements.

Enforcement

We are mindful of the impact of the COVID-19 pandemic on our regulatory function. This meant we took account of the exceptional circumstances arising as a result of the COVID-19 pandemic when considering what enforcement action was necessary and proportionate to keep people safe as a result of this inspection. We will continue to discharge our regulatory enforcement functions required to keep people safe and to hold providers to account where it is necessary for us to do so.

We have identified breaches in relation to safe care and treatment, recruitment, training and good governance.

Full information about CQC's regulatory response to the more serious concerns found during inspections is added to reports after any representations and appeals have been concluded.

Follow up

The overall rating for this service remains 'Inadequate' and the service therefore remains in 'special measures'. This means we will keep the service under review and, if we do not propose to cancel the provider's registration, we will re-inspect within 6 months to check for significant improvements.

If the provider has not made enough improvement within this timeframe and there is still a rating of inadequate for any key question or overall rating, we will take action in line with our enforcement procedures. This will mean we will begin the process of preventing the provider from operating this service. This will usually lead to cancellation of their registration or to varying the conditions the registration.

For adult social care services, the maximum time for being in special measures will usually be no more than 12 months. If the service has demonstrated improvements when we inspect it and it is no longer rated as inadequate for any of the five key questions, it will no longer be in special measures.

The five questions we ask about services and what we found

We always ask the following five questions of services.

Is the service safe?

Inadequate ●

The service was not safe.

Details are in our safe findings below.

Is the service effective?

Inadequate ●

The service was not effective.

Details are in our effective findings below.

Is the service caring?

Requires Improvement ●

The service was not always caring.

Details are in our caring findings below.

Is the service responsive?

Requires Improvement ●

The service was not always responsive.

Details are in our responsive findings below.

Is the service well-led?

Inadequate ●

The service was not well-led.

Details are in our well-led findings below.

Cheviot Care Limited

Detailed findings

Background to this inspection

The inspection

We carried out this inspection under Section 60 of the Health and Social Care Act 2008 (the Act) as part of our regulatory functions. We checked whether the provider was meeting the legal requirements and regulations associated with the Act. We looked at the overall quality of the service and provided a rating for the service under the Care Act 2014.

Inspection team

The inspection was carried out by one inspector and an Expert by Experience. An Expert by Experience is a person who has personal experience of using or caring for someone who uses this type of care service.

Service and service type

This service is a domiciliary care agency. It provides personal care to people living in their own houses and flats.

The service had a manager registered with the Care Quality Commission. The registered manager was also the provider. This means that they are legally responsible for how the service is run and for the quality and safety of the care provided.

Notice of inspection

We announced the inspection. This was because it is a small service and we needed to be sure that the registered manager/provider would be in the office to support the inspection.

Inspection activity started on 14 April 2021 and ended on 29 April 2021. We visited the office location on 14 and 15 April 2021.

What we did before the inspection

We reviewed information we had received about the service since the last inspection. We sought feedback from the local authority. We used all of this information to plan our inspection.

During the inspection

We spoke with two people who used the service and three relatives by telephone about their experience of the care provided. We spoke with the registered manager/provider, a director and a care worker.

We reviewed a range of records. This included three people's care records, medicines records, one staff member's recruitment file and all staff training files.

After the inspection

We continued to seek clarification from the registered manager/provider to validate evidence found.

Is the service safe?

Our findings

Safe – this means we looked for evidence that people were protected from abuse and avoidable harm.

At the last inspection this key question was rated inadequate. At this inspection this key question has remained the same. This meant people were at risk of avoidable harm.

This is the fifth consecutive inspection where breaches have been identified in this key question and the sixth inspection where the provider has failed to achieve a rating of good in this area. We have taken this into account when rating this key question.

Assessing risk, safety monitoring and management; Learning lessons when things go wrong; Preventing and controlling infection

At our last inspection an effective system was not in place to assess, monitor and manage risks. This was a breach of Regulation 12 (Safe care and treatment) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014. Not enough improvement had been made at this inspection and the provider remained in breach of this regulation.

- An effective system to assess, monitor and manage risks and the safety of the service was still not in place. Not all risks had been assessed and monitored. Risks relating to COVID-19 had not been formally assessed.
- Lessons had not been learned from previous inspections and the necessary improvements had not been fully made.

The failure to appropriately and effectively assess, monitor and manage risk was a continued breach of Regulation 12 of the Health and Social Care Act 2008 (Regulated Activities) 2014, Safe care and treatment.

- Staff had undertaken training in infection control and COVID-19 since our last inspection. They were knowledgeable about how to put on and remove their PPE to reduce the risk of cross infection. One person told us, "They get kitted up [wear PPE] and stick to all the rules."

Using medicines safely

- An effective system to manage medicines was not in place.
- Medicines records did not always demonstrate that medicines were administered as prescribed.

The failure to have an effective system to manage medicines was a breach of Regulation 12 of the Health and Social Care Act 2008 (Regulated Activities) 2014, Safe care and treatment.

Staffing and recruitment

At our last inspection an effective recruitment system was not in place. This was a breach of Regulation 19 (Fit and proper persons employed) of the Health and Social Care Act 2008 (Regulated Activities) Regulations

2014. Not enough improvement had been made at this inspection and the provider remained in breach of this regulation.

- Recruitment checks were not in line with legal requirements and therefore recruitment at the service was not safe. Action had not been taken following our last two inspections to ensure effective recruitment systems were in place.

The failure to check that staff were suitable to work at the service was a continued breach of Regulation 19 of the Health and Social Care Act 2008 (Regulated Activities) 2014, Fit and proper persons employed.

- There were enough care staff deployed to meet people's needs. One person told us, "We have a rota, so we know who is coming and when. They are never late, and they don't rush you. I have never experienced a missed call. They do have enough staff to meet my needs."

Systems and processes to safeguard people from the risk of abuse

At our last inspection an effective safeguarding system was not fully in place. This was a breach of Regulation 13 (Safeguarding people from abuse and improper treatment) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014. Sufficient action had been taken and the provider was no longer in breach of this regulation.

- A safeguarding system was in place. Staff had undertaken training and were able to tell us what action they would take if abuse were suspected. People felt safe with the staff who supported them. One person told us, "I feel perfectly safe with my carers I have known them a long time in fact they are more like friends and family."

Is the service effective?

Our findings

Effective – this means we looked for evidence that people's care, treatment and support achieved good outcomes and promoted a good quality of life, based on best available evidence.

At the last inspection this key question was rated requires improvement. At this inspection this key question has deteriorated to inadequate. This meant there were widespread and significant shortfalls. People's care and support was not based on best practice guidance to ensure people achieved good outcomes.

This is the third consecutive inspection where breaches have been identified in this key question and the fourth inspection where the provider has failed to achieve a rating of good in this area. We have taken this into account when rating this key question.

Staff support: induction, training, skills and experience

At our last inspection an effective system was not in place to ensure staff were suitably trained. This was a breach of Regulation 18 (Staffing) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014. Not enough improvement had been made at this inspection and the provider remained in breach of this regulation.

- An effective system to ensure staff were suitably trained was still not in place. We identified concerns relating to medicines management, MCA, the assessment of risk and the maintenance of records. Further training was needed in these areas to ensure staff were suitably trained and had the skills to carry out their roles effectively.

The lack of staff training was a continued breach of Regulation 18 of The Health and Social Care Act 2008 (Regulated Activities) Regulations 2014, Staffing.

Supporting people to eat and drink enough to maintain a balanced diet

- Staff supported people with eating and drinking. However, information about one person's dietary needs was not up to date. This meant it was not clear what support and monitoring was required.

The failure to maintain accurate records relating to people's dietary needs was a breach of Regulation 17 of The Health and Social Care Act 2008 (Regulated Activities) Regulations 2014, Good governance.

Ensuring consent to care and treatment in line with law and guidance; Staff working with other agencies to provide consistent, effective, timely care; Supporting people to live healthier lives, access healthcare services and support

The Mental Capacity Act 2005 (MCA) provides a legal framework for making particular decisions on behalf of people who may lack the mental capacity to do so for themselves. The Act requires that, as far as possible,

people make their own decisions and are helped to do so when needed. When they lack mental capacity to take particular decisions, any made on their behalf must be in their best interests and as least restrictive as possible.

People can only be deprived of their liberty to receive care and treatment when this is in their best interests and legally authorised under the MCA.

When people receive care and treatment in their own homes an application must be made to the Court of Protection for them to authorise people to be deprived of their liberty.

We checked whether the service was working within the principles of the MCA.

- Records did not evidence that staff were following the principles of the MCA. Information about people's capacity to make specific decisions was not recorded in people's care files.
- It was not clear whether one person had the capacity to refuse medical treatment and there was no evidence that their Lasting Power of Attorney (LPA) for health and welfare had been contacted for advice.

The failure to ensure records evidenced how staff were following the principles of the MCA was a breach of Regulation 17 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014, Good governance.

- People were supported to access health care support where necessary, to ensure their health needs were met. One relative told us, "If my [relative] is unwell during the day or night her carers will call the GP and ourselves, it is a good partnership."

Assessing people's needs and choices; delivering care in line with standards, guidance and the law

At our last inspection an effective system to assess people's needs was not in place. This was a breach of Regulation 17 (Good governance) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014. Not enough improvement had been made at this inspection and the provider remained in breach of this regulation.

- At this inspection, whilst some action had been taken to improve, an effective system was still not in place to ensure best practice guidance was followed when assessing and providing care. We identified shortfalls relating to the assessment of risk, medicines management and the MCA. In addition, one person did not have a care plan. The provider was using information from the person's care manager which was not up to date. Following our inspection, the registered manager told us that they had written the person's care plan.

The failure to ensure an effective system was in place to assess people's needs was a continued breach of Regulation 17 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014, Good governance.

Is the service caring?

Our findings

Caring – this means we looked for evidence that the service involved people and treated them with compassion, kindness, dignity and respect.

At the last comprehensive inspection this key question was rated as good. At this inspection this key question has now deteriorated to requires improvement. This meant there was a risk that people may not always be well supported.

Ensuring people are well treated and supported; respecting equality and diversity

- Due to the concerns identified during the inspection, we could not be assured that people received a high quality, compassionate and caring service. We have taken this into account when rating this key question.
- Despite the shortfalls and omissions we identified during our inspection; people and relatives spoke positively about the staff and the care provided. Comments included, "I know they are going to look after me and it is comforting to know they are coming" and "I think I have a good connection with the carers, I can talk to them about my problems and they will help me find a solution. They are good listeners and we have a laugh and a joke." One relative raised an issue about staff boundaries which we passed to the registered manager for their information.

Supporting people to express their views and be involved in making decisions about their care

- People and relatives told us that they were involved in people's care. However, care records did not always evidence this involvement.

Respecting and promoting people's privacy, dignity and independence

- People's privacy, dignity and independence were promoted. One person told us, "They always protect my privacy and dignity. They help me into the shower and allow me privacy whilst in the shower as I am able to do most of this myself." Another person said, "I am now getting more mobile and managing to more for myself. Once they have helped me into the shower, I can manage to wash myself. Without their support and encouragement, I don't think I would be making such good progress."

Is the service responsive?

Our findings

Responsive – this means we looked for evidence that the service met people's needs.

At the last inspection this key question was rated requires improvement. At this inspection this key question has remained the same. This meant people's needs were not always met.

This is the third consecutive inspection where breaches have been identified in this key question and the fifth inspection where the provider has failed to achieve a rating of good in this area. We have taken this into account when rating this key question.

Planning personalised care to ensure people have choice and control and to meet their needs and preferences

At our last inspection, records relating to people's care and support were not well maintained. Care records were not always detailed and did not always fully reflect the care which was provided. This was a breach of Regulation 17 (Good governance) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014. Not enough improvement had been made at this inspection and the provider remained in breach of this regulation.

- Whilst some action had been taken to improve people's care plans; we identified shortfalls relating to people's medicines records and the MCA.
- A system to review and ensure care plans were in place and up to date was not fully in place.

The failure to ensure care records reflected people's care was a continued breach of Regulation 17 of The Health and Social Care Act 2008 (Regulated Activities) Regulations 2014, Good governance.

- Weekly staff meetings were carried out. People's needs were discussed during these meetings.
- Despite the shortfalls and omissions we identified relating to care records, people and relatives spoke very positively about the care and support provided. One relative told us, "I would happily recommend this service to others as the service we have witnessed has been excellent. We know the carers are well trained, arrive on time and do a good job."

Supporting people to develop and maintain relationships to avoid social isolation; support to follow interests and to take part in activities that are socially and culturally relevant to them

- People were supported with their social needs within their own lifestyles, where this was part of their plan of care. One relative told us, "They take her out into the community. In their bid to enable her to become more independent they help to compile a shopping list and then they take her to the shops to get the items required. They are supportive and reactive to her needs."

Improving care quality in response to complaints or concerns

- A complaints procedure was in place. None of the people or relatives we spoke with raised any concerns

or complaints. They were very complimentary about the service. One person told us, "I have never had to grumble about any of my care or any of the carers. If I was unhappy, I feel sure that I would be able to tell that person and they would take it on board and make changes."

Is the service well-led?

Our findings

Well-Led – this means we looked for evidence that service leadership, management and governance assured high-quality, person-centred care; supported learning and innovation; and promoted an open, fair culture.

At the last inspection this key question was rated as inadequate. At this inspection this key question has remained the same. This meant there were widespread and significant shortfalls in service leadership.

This is the fifth consecutive inspection where breaches have been identified in this key question and the provider has failed to achieve a rating of good. We have taken this into account when rating this key question.

Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements; Continuous learning and improving care

At our last inspection, an effective governance system to monitor the quality and safety of the service was not in place. This was a breach of Regulation 17 (Good governance) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014. Not enough improvement had been made at this inspection and the provider remained in breach of this regulation.

- A system to ensure regulatory requirements were met was still not in place. We have carried out 10 inspections of the service since the provider first registered with CQC in 2011. The provider was in breach of the regulations at six of the 10 inspections.
- We identified continued shortfalls with care records, recruitment, the management of risk and staff training. New shortfalls were found with medicines management and records relating to the MCA. The provider's quality monitoring system had not highlighted these shortfalls.

The failure to have an effective governance system to monitor the quality and safety of the service was a continued breach of Regulation 17 of The Health and Social Care Act 2008 (Regulated Activities) Regulations 2014, Good governance.

- At our previous inspection, staff did not have access to policies and procedures. These were now in place. However, some policies and procedures required further information to ensure clear guidance about best practice was available for staff.
- Despite the shortfalls and omissions we identified; all people and relatives spoke very positively about the care and support provided. One person said, "I know they are coming and know they will look after me and my family all know that as long as I have Cheviot Care I am okay."

Engaging and involving people using the service, the public and staff, fully considering their equality characteristics; Promoting a positive culture that is person-centred, open, inclusive and empowering, which achieves good outcomes for people

- A system was in place to involve people and staff in the running of the service. Surveys were carried out

and weekly staff meetings were held.

How the provider understands and acts on the duty of candour, which is their legal responsibility to be open and honest with people when something goes wrong

- There had been no incidents which required the provider to act on this duty.

Working in partnership with others

- The service was part of the local community. Staff and people lived in the same area, so they shared a common knowledge of the amenities and events in Wooler and the surrounding areas. One relative told us, "They keep [name of relative] up to date with what is happening in the village. That is the beauty of living in the country where there is a community spirit."

This section is primarily information for the provider

Enforcement actions

The table below shows where regulations were not being met and we have taken enforcement action.

Regulated activity	Regulation
Personal care	Regulation 12 HSCA RA Regulations 2014 Safe care and treatment An effective system to assess, monitor and manage risk was not in place. Regulation 12 (1).

The enforcement action we took:

We issued a notice of decision to cancel the registered manager and provider's registration with the Care Quality Commission. Their registration was cancelled on 8 June 2021.

Regulated activity	Regulation
Personal care	Regulation 17 HSCA RA Regulations 2014 Good governance An effective system to monitor the quality and safety of the service was not in place. Regulation 17 (1).

The enforcement action we took:

We issued a notice of decision to cancel the registered manager and provider's registration with the Care Quality Commission. Their registration was cancelled on 8 June 2021.

Regulated activity	Regulation
Personal care	Regulation 19 HSCA RA Regulations 2014 Fit and proper persons employed An effective system to ensure suitable staff were recruited was not in place. Regulation 19 (1).

The enforcement action we took:

We issued a notice of decision to cancel the registered manager and provider's registration with the Care Quality Commission. Their registration was cancelled on 8 June 2021.

Regulated activity	Regulation
Personal care	Regulation 18 HSCA RA Regulations 2014 Staffing An effective system to ensure staff were suitably trained and skilled was not in place. Regulation 18 (1).

The enforcement action we took:

We issued a notice of decision to cancel the registered manager and provider's registration with the Care

Quality Commission. Their registration was cancelled on 8 June 2021.