

Day and Nite Services Ltd

Day and Nite Services (Kingston)

Inspection report

Unit 31
Kingspark Business Centre, 152-178 Kingston Road
New Malden
Surrey
KT3 3ST

Tel: 02089497179

Website: www.dayandniteservices.co.uk

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Ratings

Overall rating for this service

Good ●

Is the service safe?

Good ●

Is the service effective?

Good ●

Is the service well-led?

Requires Improvement ●

Summary of findings

Overall summary

The last Care Quality Commission (CQC) inspection of Day and Nite Services (Kingston) was carried out on 14 and 15 November 2016. At that time although we rated the service as 'Good' overall, we found the provider to be in breach of fundamental standards and regulations. This was because they had failed to notify us in a timely manner about allegations of abuse involving people receiving a service from the agency, which they are required to do so by law. The provider sent us an action plan in 2017 which stated what they would do to make the necessary improvements.

Since our last inspection we also received information from people using the service, relatives and staff concerned about the way the agency recruited, trained and supported staff. A number of people also expressed concern that staff did not always turn up on time for their scheduled visits.

This report only covers our findings in relation to this inspection. You can read the report from our previous comprehensive and focused inspections, by selecting the 'all reports' link for 'Day and Nite Services (Kingston)' on our website at www.cqc.org.uk.

Day and Nite Services (Kingston) is a domiciliary care agency that provides personal care and support to people living in their own homes mainly in the London Boroughs of Wandsworth, Merton and Sutton. At the time of our inspection 101 people received care and support from this agency. Three of these people had 24 hour live-in care workers and another person who lived in a nursing home regularly received one-to-one support from the agency. People using the service were mainly older adults living with a range of health care needs and conditions, including dementia.

Since our last inspection the service has a new registered manager. A registered manager is a person who has registered with the Care Quality Commission (CQC). Registered managers like registered providers 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. The new manager was registered with us in April 2017, replacing the previous registered manager/owner, who was now the Company Director.

During this focused inspection, we found that the provider had followed their action plan and now met legal requirements and fundamental standards. Specifically, the provider had improved the way they kept the

CQC informed about the occurrence of any incidents and events that adversely affected the health, safety and welfare of people using the service.

We received some mixed comments from people using the service and their relatives regarding staff turning up for their scheduled visits on time, although most people told us they did not have any major concerns about their regular care worker's punctuality. In response to concerns raised by a few people about their care workers' time keeping the provider had introduced a new electronic system that would allow the care coordinators to closely monitor staff punctuality and length of their stay. This would help the provider plan care workers' scheduled visits more effectively.

We saw staff recruitment procedures continued to prevent people from being cared for by unsuitable staff.

Staff also continued to be suitably trained and supported by the providers management team to ensure they had the right knowledge and skills to effectively meet people's needs. Managers monitored staff training to ensure their existing knowledge and skills remained up to date. Managers and senior staff were also in regular contact with the staff team to check they were clear about their duties and responsibilities to the people they cared for.

The five questions we ask about services and what we found

We always ask the following five questions of services.

Is the service safe?

Good ●

The service remains Good.

Is the service effective?

Good ●

The service remains Good.

Is the service well-led?

Requires Improvement ●

We found that appropriate action had been taken by the provider to meet legal requirements.

The provider notified the CQC without delay about any incidents they were legally required to do so.

While we saw improvements had been made to the way the provider immediately notified the CQC about any incidents that adversely affected the people using the service we have not changed the rating for this key question. To improve the rating to 'Good' would require us to see evidence of consistent good practice over a longer period of time in relation to the provider sending us statutory notifications.

Day and Nite Services (Kingston)

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 checked 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.

This focused inspection took place on 25 and 26 July and was announced. We gave the provider 24 hours' notice of the inspection because managers are sometimes out of the office supporting staff or visiting people who use the service. We needed to be sure managers would be available to speak with us on the first day of our inspection. The inspection team consisted of an 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 service.

The inspection was carried out to check all the improvements the provider said they would make to ensure they met their legal requirements had been implemented. We inspected the service against three of the five questions we ask about services: Is the service safe? Is the service effective? and Is the service well-led?

Before our inspection we reviewed the information we held about the service. This included their previous CQC inspection reports, notifications the provider is required to send us by law and their action plan setting out how they intended to meet the regulations they had breached at their last inspection.

On the first day of our inspection we spoke face-to-face with one person who received a service from the agency at their home and two care workers who were on duty at the time. We also visited the agency's offices and spoke with various members of the provider's management team, which included the Company Director, newly registered manager, the deputy manager and a care coordinator. We looked at a range of

records kept in situ at the agency's offices and a person's home. This included five care plans, ten staff files and various documents that related to the overall governance of the service.

On the second day of our inspection we made telephone contact with nine people using the service, eleven relatives and four care workers.



Our findings

At our last inspection of this agency in November 2016 when answering the key question 'Is the service safe?' we rated them a 'Good'. However, in the last six months we have received information from different sources concerned the provider did not always carry out proper pre-employment checks on staff and that staff did not always turn up on time for their scheduled visits.

During this focused inspection we found the provider's recruitment processes continued to be robust. We saw records that showed us all the service's most recently recruited members of staff had their suitability and fitness to work in the adult social care sector checked before they started work. Checks included their right to work in the UK, any criminal records they might have and previous employment and/or character references. Electronic records we looked at also indicated the provider carried out Disclosure and Barring Service checks (DBS) at three yearly intervals on all existing staff, to assess their on-going suitability. A DBS is a criminal records check employers request a registered body to carry out on all prospective new employees. Staff we spoke with also told us they had not been permitted to start working for the agency until they had supplied their new employer with up to date satisfactory DBS checks and professional references. The measures described above helped the provider to assess the suitability of staff and minimise the risk of people being supported by people who were not 'fit' to work in an adult social care setting.

People told us the agency always informed them who their care worker would be and what time to expect them. However, we received some mixed comments from people about staff punctuality. One in five people we spoke with told us their care workers always, usually or sometimes turned up late for their scheduled visits, although the vast majority of people said they had no major concerns about care workers turning up late or missing a scheduled visit. Typical feedback we received about staff time keeping included, "Our carer's time keeping can be a bit erratic. They are usually late. Can be up to an hour sometimes", "Carers are usually on time these days, although we did have a shaky start with carers always being late at first" and "My carers are more or less prompt. If they are going to be very late they will let me know".

Staff told us they felt their scheduled visits were well coordinated by senior staff who ensured they had enough time to complete all their designated tasks and meet the needs of the people they were supporting. One member of staff said, "We have enough time between visits so we usually aren't running late".

In response to concerns raised by people about staff punctuality the provider told us they were in the process of introducing a centralised electronic system. A mobile phone application would be available to staff that would allow them to electronically log the exact time they started and finished their scheduled visits. This

system would enable the care coordinators to look at staff punctuality and length of their stay, which helped them plan care workers' scheduled visits more effectively. Managers told us the new staff monitoring system would be fully operational by August 2017. Progress made by the service to achieve this stated aim will be assessed at their next inspection.



Our findings

At our last inspection of this agency in November 2016 when answering the key question 'Is the service effective?' we rated them a 'Good'. However, in the last six months we have received information from different sources concerned that not all staff were suitably trained and supported to effectively perform their roles and responsibilities.

At this focused inspection we found the provider continued to ensure staff were suitably trained and supported. People told us they felt staff were competent and good at their job. Typical feedback included, "Very much so. The staff are very able", "Oh yes- my regular carers are very skilled" and "I have no problems with their [staff] skills. I think they all do a pretty good job".

New care workers received a thorough induction that included shadowing experienced senior members of staff on scheduled visits. Systems were in place to ensure staff stayed up to date with all the training considered mandatory by the provider. Records indicated staff had completed up to date training in dementia awareness, moving and handling, safeguarding adults, the safe management of medicines, the Mental Capacity Act 2005 (MCA) and Deprivation of Liberty Safeguards, person centred care planning, privacy and dignity, fire safety, food hygiene, equality and diversity, basic life support, and infection prevention and control. We saw there was a separate training room at the agency's offices which we saw was well equipped with a mobile hoist and a bed for all staff to practice their moving and handling techniques on. The provider used an electronic system to monitor staff training which automatically flagged up when staff training needed to be refreshed.

Staff spoke positively about the training they had received and most said they had access to all the training they needed to do their job well. One member of staff told us, "The training is good. There's plenty of it", while another said, "We have to go on moving and handling training twice a year to keep our techniques up to scratch. Recently I got to practice on the mobile hoist in the training room, which I found useful." Managers also told us all new staff had to complete the Care Certificate. The Care Certificate is a set of identified minimum standards that health and social care workers must achieve so they have the same introductory skills and knowledge.

Staff had sufficient opportunities to review and develop their working practices. There was a group supervision and work performance appraisal framework in place through which staff had regular contact and meetings with managers and senior staff. Records indicated staff attended quarterly group supervision meetings with approximately half a dozen of their fellow co-workers where they could discuss work related

issues. In addition, managers and senior staff carried out direct observations of staff performing their work during scheduled visits three times a year. Staff overall work performance during the previous 12 months was also appraised annually by their line manager.

Staff told us they felt they got all the support they needed from their managers and care coordinators. Typical comments made by staff included, "We have regular group supervision meetings and the senior staff often turn up unannounced when you're on a visit to see how you're getting on", "There's always someone available in the office if you need some advice" and "The office staff are pretty supportive of us".



Our findings

At our last inspection of the agency in November 2016 we rated them 'requires improvement' when answering the key question 'is the service well-led?' This was because the provider had failed to notify the CQC in a timely manner about allegations of abuse involving people using the service. This meant the CQC did not have any up to date or accurate information about this safeguarding incident so that where needed, we could check that the provider had responded appropriately to it.

At this focused inspection we found the provider had taken appropriate steps to follow the action plan they had sent us. The provider's records of safeguarding incidents involving people using the agency which had occurred since our last inspection matched the information we held about Day and Nite Services (Kingston). For example, our records showed the provider had immediately notified us about a medicines handling error and an allegation of material theft. These statutory notifications provide us with details about important events which the service is required to send us by law. Records also showed that as part of the provider's routine quality monitoring audits, managers regularly checked incidents involving people who use the service to determine whether or not they were legally obliged to notify the CQC.

This was confirmed by discussions we had with the newly registered manager and deputy manager who both demonstrated a good understanding of their legal responsibilities to notify the CQC without delay about the occurrence of significant incidents and events that adversely affect the people using the service.