

## Naswell Care LTD

# Adamson House Business Centre

### **Inspection report**

9 School Lane Quedgeley Gloucester Gloucestershire GL2 4PJ

Tel: 01452722791

Website: www.naswellcare.co.uk

Date of inspection visit: 08 June 2017

Date of publication: 21 July 2017

#### Ratings

Overall rating for this service	Inspected but not rated
Is the service well-led?	Good

# Summary of findings

#### Overall summary

We carried out an unannounced comprehensive inspection of this service on 10 November 2016 at which one breach of legal requirements was found. This was because there were not sufficient quality assurance systems in place at Adamson House.

After the comprehensive inspection, the provider wrote to us to say what they would do to meet legal requirements in relation to the breaches. We undertook a focused inspection on 7 June 2017 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 this. You can read the report from our last comprehensive inspection by selecting the 'all reports' link for 'Adamson House Business Centre' on our website at www.cqc.org.uk.

Adamson House Business Centre also known as Naswell Care is a small domiciliary care agency that offers support to people living with attention deficit hyperactivity disorder (ADHD), learning and physical disability and autism who are being supported in their own homes. At the time of our inspection, there were 16 people using the service.

There was no registered manager at the service. 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. The provider told us they had recruited a manager who would be commencing their post in July. The provider told us the new manager would be submitting their application for registration to CQC. The previous registered manager had left their post one month prior to the inspection. The directors of the service and the deputy manager were managing the service in the absence of a registered manager.

At our focused inspection on 7 June 2017 we found the provider had followed their action plan and legal requirements had been met. The provider had implemented quality assurance systems across the service to ensure the care and support provided to people was of good quality and met their needs.

### The five questions we ask about services and what we found

We always ask the following five questions of services.

#### Is the service well-led?

Good •



The service was well-led.

The Provider had implemented quality assurance systems to ensure the service provided to people was of good quality and met their needs.

A new manager had been recruited to fill the vacant registered manager post.



# Adamson House Business Centre

**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 a focused inspection of Adamson House on 7 June 2017. The inspection was undertaken by one adult social care inspector and was announced. The provider was given 48 hours' notice of the inspection because the service provided was domiciliary care in people's own homes and we wanted to make arrangements to contact people. At the time of the inspection, there were 16 people using the service. This inspection was completed to check that improvements to meet legal requirements planned by the provider after our comprehensive inspection on 10 November 2016 had been made. We inspected the service against one of the five questions we ask about services: is the service well-led? This is because the service was not meeting legal requirements in relation to this question.

Before our inspection we reviewed the information we held about the service.. This included the provider's action plan, which set out the action they would take to meet legal requirements, and notifications submitted by the provider. Providers tell us about important events relating to the service they provide using a notification.

During the visit we spoke with two members of staff, the deputy manager and directors of the service.



# Is the service well-led?

## Our findings

At our comprehensive inspection of Adamson House Business Centre on 10 November 2016 we found the registered manager and provider had not implemented sufficient quality assurance systems across the service. For example, there were no records of any audits having taken place. This meant the provider or the registered manager was unable to assess the quality of the service provided to people. This was a breach of Regulation 17 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014 Good Governance.

At our focused inspection on 7 June 2017 we found the provider had followed their action plan and improvements had been made. Systems had been implemented to check on the standards within the service. For example, a number of monthly audits had been introduced to assess the quality of the service. These included spot checks of individual supported living properties to ensure they were maintained to a good standard, audits of the medication records and audits of the records made by staff relating to the support provided to people. The directors also told us how they carried out random spot checks of staff practices whilst they were providing care and support to people. This was to ensure the standard of care being given was of good quality. The directors told us that where actions had been identified as needed, these would be implemented into an action plan which would be followed up on a monthly basis or sooner if required. When looking at the action plan, we saw evidence that where issues had been identified, action had been taken to address the shortfalls found. For example, one audit had identified the cleanliness in one of the properties was poor. We saw evidence that this had been raised with the staff and subsequent audits identified improvements in this area.

The directors also told us they were planning on sending out surveys to people using the service and their relatives once the new manager commenced their post. They told us they would be doing this to enable them to gather the views of the people using the service and use the feedback to improve the service provided to people.

There was no registered manager at the service at the time of the inspection. The directors told us they had recruited a new manager who would be commencing their post in July. The provider told us the new manager would be submitting their application for registration to CQC. The previous registered manager had left their post one month prior to the inspection. The directors of the service and the deputy manager were managing the service in the absence of a registered manager. The staff we spoke with told us that although there was no registered manager in post, they continued to receive good levels of support from the directors and the deputy manager. Staff told us somebody was always available to speak to and this reassured them that they were well supported .