

## Allfor Care Alpha Care Recruitment West And Home Care Service Ltd

# Allforcare Trading Alomcare

### Inspection report

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### Ratings

Overall rating for this service

Requires Improvement ●

Is the service safe?

**Requires Improvement** ●

Is the service well-led?

**Requires Improvement** ●

# Summary of findings

## Overall summary

We carried out an announced comprehensive inspection of this Allforcare Trading Alomcare on 19 October 2016 when we found that there were continuing breaches of two regulations of The Health and Social Care Act 2014. We found that the provider had failed to maintain adequate quality assurance systems. They had also failed to ensure that satisfactory pre-employment checks were carried out prior to staff commencing work with people who used the service. Subsequent to this inspection we served warning notices to the provider requiring them to take action to meet the regulations 16 January 2016.

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 this focused inspection on 23 February 2016 to check that the provider 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 Allforcare Trading Alomcare on our website at [www.cqc.org.uk](http://www.cqc.org.uk).

Allforcare Trading Alomcare is a domiciliary care agency that provides a range of care supports to adults and young people living in their own homes. At the time of our inspection the service provided personal care to 24 people.

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 2014 and associated Regulations about how the service is run.

At our focused inspection on the 23 February 2016, we found that the provider had followed their action plan and put in place a range of systems to address the breaches of service identified at our previous inspection. Monitoring of care plans had commenced, and there was evidence that spot checks and reviews of care had taken place for a number of people who used the service. Regular monitoring of the electronic care call system was in place and we were able to see how this corresponded with people's care records.

Although we were satisfied that systems were now in place to ensure that the quality of the service was regularly monitored and reviewed, we noted that further improvements could be made. For example, some people who used the service had chosen not to use the electronic call system, and the provider had not established a means of monitoring their care calls other than through use of manual timesheets.

The procedures for staff recruitment had been updated and we saw that applications for references and criminal records checks had been made for newly recruited staff who had not yet commenced employment with the service. The provider told us that they were delivering training on the care certificate for staff in health and social care prior to new staff commencing work with people, as part of the process of ensuring their suitability for the work that they would be undertaking.

The provider had obtained satisfactory criminal records checks for all staff currently working at the service, and maintained records of these.

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

We always ask the following five questions of services.

### Is the service safe?

Action had been taken to improve the safety of the service.

The provider had introduced a new recruitment system to ensure that staff were suitably vetted and checked prior employment.

Satisfactory criminal records checks had been obtained for all current staff members

This meant that the provider was now meeting legal requirements.

While improvements had been made we have not revised the rating for this key question; to improve the rating to 'Good' would require a longer term track record of consistent good practice.

We will review our rating for safe at the next comprehensive inspection.

**Requires Improvement** ●

### Is the service well-led?

Action had been taken to improve the leadership of the service. systems for monitoring and evaluating the quality of the service had been put in place. This included audits of care plans, spot checks and reviews of care and regular monitoring of the electronic call system.

Policies and procedures had been reviewed and updated.

This meant that the provider was now meeting legal requirements.

While improvements had been made we have not revised the rating for this key question; to improve the rating to 'Good' would require a longer term track record of consistent good practice.

We will review our rating for well-led at the next comprehensive inspection.

**Requires Improvement** ●

# Allforcare Trading Alomcare

## **Detailed findings**

### Background to this inspection

We carried out this focused 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 Allforcare Trading Alomcare on 23 February. This inspection was completed to check that improvements to meet legal requirements planned by the provider after our comprehensive inspection on 19 October 2015 had been made. We inspected the service against two of the five questions we ask about services: is the service safe, and is it well led? This was because the service was not meeting legal requirements in relation to these questions.

The inspection was undertaken by two inspectors.

During our inspection we looked at a range of documents including nine staff files, including three for recently recruited staff members, five care records, quality assurance records and policies and procedures. We also spoke with the provider, a member of the office team responsible for recruitment and the newly appointed deputy manager.

Before our inspection we reviewed the information we held about the home, this included the provider's action plan, which set out the action they would take to meet legal requirements. We also spoke with the local authority quality assurance team.

# Is the service safe?

## Our findings

At our last inspection of 19 October 2015 we found that the service was in breach of Regulation 19 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014. Evidence that criminal records checks had been made for new staff members was not available, and an unsatisfactory reference and a full employment history had not been followed prior to a staff member being employed by the service. The provider's recruitment procedures did not set out adequately how they would ensure that persons employed were of good character and suitable for the work they were asked to provide.

We served a warning notice requiring the provider to take action to meet Regulation 19 by 16 January 2016. Following the inspection the provider sent us an action plan setting out the action they had taken to improve the service. We used this action plan when we reviewed progress on meeting the regulation during our inspection.

We found that the provider's policies and procedures had all been reviewed and updated. A more robust system had been put in place to ensure that appropriate checks of people's suitability were obtained prior to commencing work with people who used the service. Although no new staff had commenced work since our previous inspection we saw records for three recently recruited staff members, and these showed that criminal records checks and references had been requested, and evidence of eligibility to work in the UK had been received.

Although references and criminal records checks had not yet been received for all the newly recruited staff members, we noted that they were currently undertaking training that met the requirements of the care certificate for staff working in health and social care. The provider told us that a decision had been made to ensure that new staff undertook this training prior to working with people as part of their efforts to ensure suitability for the work that they would be undertaking. We noted, however, that the service's policy on staff induction training which was dated January 15 2016 had not been updated to reflect this. We discussed this with the provider who told us that they would ensure that it was reviewed and updated to reflect current practice.

We looked at six further records for staff currently employed by the service and the provider showed us a folder that contained copies of criminal records checks for all staff employed by the service. These showed that the provider had obtained evidence of satisfactory criminal records checks for all current staff members.

## Is the service well-led?

### Our findings

At our last inspection of 19 October 2015 we found that the service was in breach of Regulation 17 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014. Spot checks of the care provided were not being carried out regularly, the electronic call monitoring system was not effective, action had not been taken to address identified underperformance and there were no records of a care plan audit. Notifiable incidents had not been reported to CQC as is required and care records were missing from some people's files.

We served a warning notice requiring the provider to take action to meet Regulation 17 by 16 January 2016. Following the inspection the provider sent us an action plan setting out the action they had taken to improve the service. We used this action plan when we reviewed progress on meeting the regulation during our inspection.

We found that the provider's policies and procedures had all been reviewed and updated. This included the quality assurance and monitoring procedure which covered the use of timesheets and the electronic call monitoring system. Care plan audits were being carried out monthly and we saw records of these. We were shown the quality monitoring folder which contained a quality assurance service review carried out on 12 January 2016 as well as records of spot checks. We saw that actions had been put in place to address concerns that had been identified through the quality assurance review. We were shown records of guidance to staff as to what incidents and events must be reported to CQC.

We saw that 17 spot checks had been carried out in January 2016 and 10 reviews in February 2016. We saw records of these. The care plan audits were detailed and we cross checked the audits with a sample of five care records of people using the service. The office staff showed us how they used the electronic call monitoring system and we cross checked the records against people's care records. The quality assurance service review provided evidence that the system for checking the quality of the service had been re-designed and that there were regular checks. We were satisfied that these actions meant that the provider now had systems in place which allowed them to assess, monitor and improve the quality of the services provided. In addition, a new deputy manager had been appointed to support the registered manager with the day-to-day running of the service and a consultant had been engaged to work on the quality checks and care plan audits.

However, we noted that there were still some areas where the systems could be improved further. The electronic call monitoring system was not being used by all people using the service by choice, meaning there was reliance on manual timesheets for information. Although the time sheets were reviewed when they were brought to the office, the provider had not yet developed a formal system for monitoring daily calls for people who did not use the electronic system. The quality assurance service review was completed on a form more suitable for care homes rather than a domiciliary care service and the spot check records had not been clearly filed. This meant that the provider was not able to quickly show us that the work planned had been carried out. However, they were able to provide us with the information that we requested during our inspection. We brought these matters to the provider's attention and we will check

progress when we carry out our next comprehensive inspection.