

Agincare UK Limited

Agincare Oxford

Inspection report

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Ratings

Overall rating for this service

Inadequate ●

Is the service safe?

Inspected but not rated

Summary of findings

Overall summary

About the service

Agincare is a domiciliary care service providing the regulated activity of personal care. The service provides support to people living in their own homes. At the time of the inspection there were 36 people receiving the regulated activity of personal care.

The service also supports people who are discharged from hospital and require support with rehabilitation for an initial proposed period of six weeks. People receiving this rehabilitation care are referred to by the service as 'reablement care clients.'

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

This was a targeted inspection that followed up the Warning Notice served at the previous inspection around the safety of the service.

We use targeted inspections to follow up on Warning Notices or to check concerns. They do not look at an entire key question, only the part of the key question we are specifically concerned about. Targeted inspections do not change the rating from the previous inspection. This is because they do not assess all areas of a key question.

The provider had worked closely with the local authority's quality team and had made improvements in relation to assessing risk, staff training, guidance and medicine management.

People's care plans had been reviewed in order to assess the risk associated to people's support needs, this included guidance the people required. Incidents and accidents were well documented and investigated, this enabled the correct action to be implemented to further mitigate risk.

Systems to ensure the safe management of medicines were now effective in ensuring good standards of care were delivered. People's medicines support needs had been adequately reviewed and updated since the last inspection.

Documentation to support the safe management of people's skin integrity had now been included to people's support plans and were being updated frequently.

Since the last inspection, the service had ensured; staff competencies were updated, further training was completed, and spot checks carried out in order to ensure safe practice and use of PPE.

For those key questions not inspected, we used the ratings awarded at the last inspection to calculate the overall rating.

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 25 October 2022).

At the last inspection we served a warning notices in respect of safe care and treatment. At this inspection we found improvements had been made, and the provider had met the warning notices in full.

Why we inspected

We undertook this targeted inspection to check whether the warning notices previously served in relation to Regulations 12 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014 had been met. Therefore, the overall rating for the service has not changed following this targeted inspection and remains inadequate.

Enforcement

The provider remains in breach of regulations found at the last inspection. These relate to person centred care, safeguarding people from abuse, receiving and acting on complaints, good governance, duty of candour and staffing.

Special Measures

The overall rating for this service is 'Inadequate' and the service 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.

Follow up

We will meet with the provider following this report being published to discuss how they will make changes to ensure they improve their rating to at least good. We will work with the local authority to monitor progress. We will continue to monitor information we receive about the service, which will help inform when we next inspect.

We will request an action plan from the provider to understand what they will do to improve the standards of quality and safety. We will work alongside the provider and local authority to monitor progress. We will continue to monitor information we receive about the service, which will help inform when we next inspect.

You can read the report from our last comprehensive inspection, on our website at www.cqc.org.uk

The five questions we ask about services and what we found

We always ask the following five questions of services.

Is the service safe?

At our last inspection we rated this key question Inadequate. We have not reviewed the rating as we have not looked at all of the key question at this inspection.

Inspected but not rated

Agincare Oxford

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 Health and Social Care Act 2008.

This was a targeted inspection to check whether the provider had met the requirements of the Warning Notice in relation to Regulation 12 Safe Care and Treatment of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

Inspection team

The inspection was carried out by one inspector.

Service and service type

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

Registered Manager

This provider is required to have a registered manager to oversee the delivery of regulated activities at this location. A registered manager is a person who has registered with the Care Quality Commission to manage the service. Registered managers and providers are legally responsible for how the service is run, for the quality and safety of the care provided and compliance with regulations.

At the time of our inspection there was not a registered manager in post. A new manager had been in post since the last inspection and had submitted an application to register. We are currently assessing this application.

Notice of inspection

We gave the service 48 hours' notice of the inspection. This was because it is a small service and we needed to be sure that the provider or registered manager would be in the office to support the inspection.

What we did before the inspection

We reviewed information we had received about the service since the last inspection. We sought feedback from partner agencies and professionals. On-going monitoring such as information received. We used all this information to plan our inspection.

During the inspection

We spoke with the manager, we reviewed care plans and a range of records related to the management of the service including policies and procedures, audits, and risk assessments.

Is the service safe?

Our findings

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

At our last inspection this key question was rated inadequate. We have not changed the rating as we have not looked at all of the safe key question at this inspection.

The purpose of this inspection was to check if the provider had met the requirements of the warning notice we previously served. We will assess the whole key question at the next comprehensive inspection of the service.

At our last inspection systems were not established to assess, monitor and mitigate risks to the health, safety and welfare of people using the service placing them at risk of harm. This was a breach of regulation 12 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

We served a warning notice and told the provider to meet Regulation 12 within three months of the last inspection. We went back to check that the warning notice had been met.

Assessing risk, safety monitoring and management

- At the last inspection, accidents and incidents were not documented, therefore action taken to assess the risk was not effective to ensure service users were kept safe. At this inspection we found that the service has implemented a risk tracker. Accidents and incidents and their detail were documented, with the outcome, the lessons learned and the action that had taken place to ensure people using the service are kept safe.
- During the last inspection people who received reablement care (short-term care after hospital stays) did not have risk assessment in place, this included general risk assessments and mobility risk assessment. Due to the nature of support people receiving reablement care required, Commissioners of the reablement service confirmed these would be expected. At this inspection reablement clients now had detailed risk assessments and care plans in place. These assessments were reviewed weekly in order to monitor people's risk and their progress.
- At the last inspection, we found limited documentation around the management and understanding of skin integrity concerns. During this inspection we saw that initial assessments now contained questions around skin integrity for a more comprehensive assessment. Risk mitigation plans were in place to support people with ongoing pressure concerns, safeguarding's had been raised and communication with professionals documented. We saw staff were updated of changes or new concerns around skin integrity via team meeting and use of the systems messaging app.
- At the last inspection, systems to ensure risk assessment and mitigation around falls were not in place. Since the last inspection, all unwitnessed or witnessed falls had been detailed on the risk tracker. We saw care plans were adequately updated following falls, and guidance had been updated with people's support needs in order to mitigate the risk of falls.
- At the last inspection, systems to ensure risks relating to people's health needs had not been implemented. For two people, information relating to their health care needs were not included within their care plan. At this inspection risk assessments were in place and staff had completed the relevant training.

Following the last inspection, client's information had been reassessed and the relevant changes made. We saw that assessment review reminders, if they had not already been updated, had been diarised to update within 6 months. Although improvements had been made, we saw that for one person, information about their needs was not always consistent through their care plan. The manager told us they would take direct action to rectify this.

Using medicines safely

- At the last inspection, People's documents contained limited information regarding application, timings and placement of their topical creams. At this inspection, body assessments were now in place for those that required them. We saw that body maps were in place; these highlighted the areas in which creams needed to be applied. Medication administration records (MARs) now detailed when, where and how often to apply the creams. Risk assessments had also been updated to reflect people's needs and their medicines, and further training had been implemented. Senior staff also carried out daily medicine chart and daily note checks and to ensure the continued safe administration of medicines and highlight any concerns with the relevant professionals.
- During the last inspection one person's care plan contained conflicting information regarding the support they required with their medicines, this put them at risk of missing or receiving too much of their medicines. At this inspection, we saw this had been investigated in full, the correct assessment and risk mitigation put in place in order to ensure the care plan contained clear information about the support required. We also saw that this was communicated with staff and a safeguarding raised. Due to the risk associated with this person's medicines, the service felt they were unable to provide their care.

Preventing and controlling infection

- At the last inspection, the service was not following Government guidance in relation to COVID-19 testing. Since this inspection, Government guidance has changed. We saw this had been communicated to staff via team meetings, as well as sent via email and was displayed within posters in the office.
- At the last inspection we were told by one person using the service that topical medicines were not always applied with the correct use of PPE. Since the last inspection, all staff had been retrained in PPE use, this was also added as a discussion point at every staff meeting. The importance of this was also discussed at supervisions. Spot checks had been carried out to ensure staff were using the correct PPE when delivering care.

The warning notice has been met in full and will now be removed from services registration. The service is no longer in breach of regulation 12(1) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.