

Chosen Services UK Limited

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Inspection report

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22 March 2021

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Ratings

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

Summary of findings

Overall summary

About the service

Chosen Services UK Limited is a domiciliary care agency. It provides personal care to people living in their own houses or flats. The service provided support to children, younger adults and older people with learning disabilities, physical disabilities, mental health needs and sensory impairment. 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. At the time of the inspection 12 people were using the service.

People's experience of the service and what we found.

At this inspection we found the provider's medicine policy did not reflect the needs of people who are using the service, and, medicine administration record (MAR) charts were inconsistent. We made recommendations in these areas.

People received support with their medicines from staff who were trained.

There were enough staff to meet people's needs.

There were procedures in place for responding to accidents and incidents.

The registered manager knew when to notify the Care Quality Commission of significant events in the service.

People described staff as, "Professional and kind."

Telephone monitoring surveys were in place to monitor the running of the service.

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

Rating at last inspection

The last rating for this service was good (published 01 June 2020)

Why we inspected

We undertook this targeted inspection to check a specific concern we had about medicine management. A decision was made for us to inspect and examine those risks. The inspection was prompted in part by notification of a specific incident, following which a person using the service died. This incident is subject to a criminal investigation. As a result, this inspection did not examine the circumstances of the incident.

We found no evidence during this inspection that people were at risk of harm from this concern.

The overall rating for the service has not changed following this targeted inspection and remains good.

CQC have introduced targeted inspections to follow up on specific 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.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' links for Chosen Services UK Limited on our website at www.cqc.org.uk.

Follow up

We will continue to monitor information we receive about the service until we return to visit as per our reinspection programme. If we receive any concerning information we may inspect sooner.

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 good. We have not reviewed the rating at this inspection. This is because we only looked at the parts of this key question we had specific concerns about.

Inspected but not rated

Is the service well-led?

At our last inspection we rated this key question good. We have not reviewed the rating at this inspection. This is because we only looked at the parts of this key question we had specific concerns about

Inspected but not rated

Chosen Services UK 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.

This was a targeted inspection on a specific concern we had about the management of medicines.

Inspection Team

The inspection was carried out by two inspectors and supported by a medicine 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. The service had a manager registered with the Care Quality Commission, who is also the nominated individual. This means that they and are legally responsible for how the service is run and for the quality and safety of the care provided.

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 registered manager would be in the office to support the inspection. Inspection activity began on 22 March 2021, and, ended on date 23 March 2021. We visited the office location on 22 March 2021.

What we did before inspection

We reviewed information we held about the service. This included previous inspection reports and any notifications of significant incidents the provider had sent us. We sought feedback from the local authority who work with the service. This information helps support our inspections. We used all of this information to plan our inspection.

During the inspection

We reviewed a range of records such as accidents and incidents records, medicine training and assessment

records and the medicine policy. We looked at two people's care plans relating to medicines and Medicine Administration Records (MAR) charts.

After the inspection

We continued to seek clarification from the provider to validate evidence found, such as actions plans. We spoke with three care staff who supported people with medicines. We spoke with two people who used the service. We also looked a telephone monitoring survey.

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 as good. We have not changed the rating of this key question, as we have only looked at the part of the key question we had specific concerns about. The purpose of this inspection was to check a specific concern we had about medicine management and staffing. As part of this inspection we also looked at staffing and accident and incident. We will assess all of the key question at the next comprehensive inspection of the service.

Using medicines safely

- Where required, records showed people received their prescribed medicines by trained staff. Staff completed medicines administration competency assessment. However, people's Medication Administration Record (MAR) charts had not always been fully completed in line with current best practice. For example, the specific dosage of people's medicine had not always been recorded on the MAR chart, nor were staff signing the MAR with their initials when medicines were administered. We found the staff weren't completing this which had not been identified in the registered manager's monthly audits. We found no one placed at risk, however this wasn't aligned with NICE guidance.

We recommend the provider consider current guidance on medicines administration and recording and take action to update their practice accordingly and clarify responsibilities.

- We reviewed the provider's medicine policy and found that they were not aligned with the service and with NICE guidance. For example, the policy includes information about checking expiry dates of medicines every 28 days. It was not clear who was responsible for this and how this would be recorded.

We recommend the provider to update medication policy aligning with NICE guidance. Provider to take action to update their practice accordingly.

- People using the service had no concerns about medicines. One person told us, "They make sure I take my medicines. They're very professional and kind"
- The provider supported one person with PRN medicines, which are taken as and when needed. Records showed there was information for staff for when to administer PRN medicines, particularly medicines for pain relief. Medicines staff were supported by consistent guidance for the person's PRN medicine.

Learning lessons when things go wrong

- Where incidents had taken place, these were reviewed so that learning could take place to prevent them from happening again. For example, a person passed away while using the service. This incident is still being investigated by the police. The registered manager was reviewing the incident so that further help and guidance could be sought as appropriate.

Staffing and recruitment

- There were enough staff available to meet people's needs. Staff timesheets showed there had been no missed calls. Staff told us they did not have any concerns about staffing levels. There were no concerns about the time management of people's visits and people told us staff were punctual. One person said, "They always come on time".
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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 good. We have not changed the rating of this key question, as we have only looked at the part of the key question we have specific concerns. The purpose of this inspection was to check specific concern we had about duty of candour and continuous learning. We will assess all of the key question at the next comprehensive inspection of the service.

Continuous learning and improving care

- Surveys were carried out by the provider to ensure people's needs were met. Telephone monitoring surveys were completed to ensure that care staff carried out their duties. The provider oversaw all customer surveys, this included service users and relatives who used their service. Feedback from people was acted on. The service contacted people and their relatives to seek their views on the service. One person told us, "They phone me and asked me few questions. They ask me if everything is okay, and, do I need any additional support".
- Regular audits were carried out by the registered manager to ensure the service was being delivered safely. They regularly reviewed care plans, risk assessments, and, daily records. The service worked towards completion of an action plan when shortcomings had been identified.

Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements

- The registered manager was aware of their responsibilities and of their duty to notify the Care Quality Commission (CQC) of significant events. The registered manager submitted notification in a timely manner.
- The service had a clear management structure and staff were aware of who to contact regarding issues or concerns. One staff member said "Any issues, I will contact the office and ask for their advice".
- Staff told us they felt the culture of the service was open and it was well-led. Staff comments included, "We have a good relationship and understanding with our manager and care coordinator", and, "I really like our manager, she is very nice".
- All the staff we spoke with told us they were happy in their job roles and had received required training to do their job effectively.