

Independent People Homecare Limited

Independent People Homecare Services Limited

Inspection report

26 High Street
Great Baddow
Chelmsford
Essex
CM2 7HQ

Tel: 08082528099
Website: www.iphomecare.co.uk

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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 effective?

Inspected but not rated

Summary of findings

Overall summary

About the service

Independent People Home Care Limited is a domiciliary care agency providing personal care to people in their own home. This included a nationwide, 24-hour live-in care service. At the time of the inspection there were 115 people using the service.

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

We inspected the service to see how care was being provided. During the inspection we found staff had a disclosure and barring service (DBS) check retained on file and that the registered provider was in the process of updating their records and applying for new DBS checks.

Generally, people received their medicine in the right way, and staff had personal protective equipment (PPE.) People told us they followed the latest guidance.

The registered provider was working towards taking the required action needed to ensure they had a competent and skilled workforce to meet people's individual needs. Some staff had not been trained in specialist topics, and had not been given practical moving and handling training.

Rating at last inspection

The last rating for this service at the previous premises was Inadequate (published 8 December 2020). The provider completed an action plan after the last inspection to show what they would do and by when to improve.

Why we inspected

The inspection was prompted in part due to concerns received in relation to lack of training and recruitment checks, the management of medicines, access to personal protective equipment (PPE.) A decision was made for us to inspect and examine those risks.

We have found evidence that the provider needs to make improvements. Please see the safe and effective sections of this report.

The registered provider has provided plans that show full improvements should be made to the service before the next inspection.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Independent People Home Care on our website at www.cqc.org.uk.

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

CQC have introduced targeted inspections to follow up on Warning Notices or to check 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.

Follow up

We will continue to monitor information we receive about the service until we return to visit as per our re-inspection 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 Inadequate. 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 effective?

At our last inspection we rated this key question Inadequate. 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

Independent People Homecare Services 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. We looked at the overall quality of the service and provided a rating for the service under the Care Act 2014.

This was a targeted inspection to check on specific concerns we had about recruitment checks, management of people's medicine, personal protective equipment and staff training.

Inspection team

This inspection was undertaken by two inspectors, 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 care service.

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 did not have a manager registered with the Care Quality Commission and were recruiting for this role.

Notice of inspection

This inspection was unannounced.

What we did before inspection

We reviewed information we had received about the service since the last inspection. We sought feedback from the local authority and professionals who work with the service. We used the information the provider

sent us in the provider information return. This is information providers are required to send us with key information about their service, what they do well, and improvements they plan to make. This information helps support our inspections. We used all of this information to plan our inspection. We had requested information from the provider prior to the inspection and this information was used as part of the inspection plan.

During the inspection

We spoke with twelve members of staff including the operational manager and nominated individual. The nominated individual is responsible for supervising the management of the service on behalf of the provider. We also spoke with one person who used the service and fourteen relatives.

After the inspection

We continued to seek clarification from the provider to validate evidence found.

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 inadequate. 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 safe recruitment, management of medicines and staff having lack of access to Personal Protective Equipment (PPE.) We will assess all of the key question at the next comprehensive inspection of the service.

Using medicines safely

- We received concerns that staff were not competent to support people to take their medicine in the right way and at the right time.
- With the exception of one, people's relatives told us they got their medicine in the right way and at the right time. A relative said, "Yes, medicine is given on time. I'm not aware any were missed."
- Staff had been given medicine administration training, and since the last inspection, the registered provider was working through to make sure a medicine competency assessment was carried out on each staff member. One staff member said, "No, I haven't had a medicine competency assessment yet, because of COVID-19, and reducing the spread of infection. My care coordinator is planning a visit to do this soon."
- The registered provider carried out audits on medicines administration records (MARs) and recorded when these checks had been carried out. This system helped to demonstrate that people's medicine administration was effectively managed.

Staffing and recruitment

- We received information that staff had started work without having had appropriate recruitment checks carried out.
- Some staff had started work using a disclosure and barring service (DBS) check from a previous employer, for these people the registered provider told us they were making new DBS applications.
- We inspected eight staff file's and found the registered provider had effective recruitment and selection procedures in place.
- We spoke with 12 members of staff and they all confirmed that appropriate checks had been carried out before they had started work. One staff member said, "I had a DBS check, I have had this every year. They did an application when I started." Another staff member said, "My DBS is online, and the company checked it before I started work."
- People told us there were enough staff available to provide care to meet people's needs safely.

Preventing and controlling infection

- We received information that staff did not have enough personal protective equipment (PPE) and were not given access to regular testing for COVID-19.
- All of the staff said they had enough PPE and had access to regular testing. One staff member said, "They are more careful about making sure you have enough PPE stock. They always send this out and always call

to ask if you have enough. My house is full of PPE and I have access to regular testing."

- People told us staff had enough PPE and wore it appropriately. One relative said, "The staff have more PPE than they need, it turns up regularly they are never lacking."

Is the service effective?

Our findings

Effective – this means we looked for evidence that people's care, treatment and support achieved good outcomes and promoted a good quality of life, based on best available evidence.

At the last inspection this key question was rated as Inadequate. 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 about.

The purpose of this inspection was to check a specific concern we had about staff training. We will assess all of the key question at the next comprehensive inspection of the service.

Staff support: induction, training, skills and experience

- We received information that staff were not always trained to deliver care to people. We found staff had been given training in mandatory subjects. However, not all staff had been given practical manual handling training.
- Staff told us they had been given mandatory training, but some needed additional training so they could meet people's individual care needs. For example, one staff member supported a person with a Percutaneous endoscopic gastrostomy. This is an endoscopic medical procedure in which a tube is passed into a patient's stomach through the abdominal wall, most commonly to provide a means of feeding when oral intake is not adequate. Whilst the staff member said they felt confident to provide this support, the registered provider had failed to ensure they were trained and assessed as being competent to carry out this type of care.
- People provided mixed feedback. One person's relative said, "Some staff are not as readily trained as they could have been." Another person's relative said, "One staff member had online training but couldn't use a hoist."
- The registered provider showed us they had plans in place to ensure each staff member were trained and assessed as competent within agreed time scales.
- We did not look at staff induction on this targeted inspection. However, previous inspections had identified this as needing improvement. We will assess all the key questions at the next inspection of the service.
- We did not look at staff supervision on this targeted inspection. However, previous inspections had identified this as needing improvement. We will assess all the key question at the next comprehensive inspection of the service.