

24/7 Assured Care Services Limited

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Inspection report

13 Chestnut Grove
Wembley
HA0 2LX

Tel: 07506139573

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Ratings

Overall rating for this service

Good ●

Is the service safe?

Good ●

Is the service responsive?

Good ●

Is the service well-led?

Good ●

Summary of findings

Overall summary

About the service:

24/7 Assured Care Services Limited is a domiciliary care agency which provides care to people in their homes. At the time of our inspection the service provided some form of support to a total of 38 people, of which 9 people received personal care support. The Care Quality Commission (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.

People's experience of using this service:

People who received care from the service told us they were well supported by care workers. This was confirmed by relatives we spoke with. They told us people were safe when they were cared for by care workers. There were systems in place to safeguard people from the risk of possible harm. Staff we spoke with understood their responsibilities with regards to safeguarding people. Safe recruitment procedures were in place.

Our previous inspection found the monitoring system for punctuality and attendance was ineffective. However, during this focused inspection we observed that the service had implemented an electronic monitoring system. This enabled the registered manager to continuously monitor staff punctuality and attendance. Feedback obtained indicated that there were no issues with care worker's punctuality and attendance.

Appropriate risk assessments were in place and covered areas such as the environment, mobility, seizures and diabetes.

Our previous inspection found people did not always receive personalised care. Care plans failed to include detailed guidance about people's needs and the support they required. During this focused inspection we found the service had taken appropriate action to address this and had implemented new format care plans. These were person-centred and included clear information about what people's needs were and what support they required.

Medicines were managed safely. Administration of medicines were recorded electronically.

People, relatives and staff spoke positively about the registered manager and felt able to raise concerns and were confident that these would be addressed. Procedures were in place to respond to complaints.

Our previous inspection found that there were some instances where the service failed to effectively check various aspects of the service and we found a breach of regulation. During this focused inspection, we observed that the service had made improvements and had an effective system in place to monitor the quality of the service and enable learning and improvement.

More information is in the full report.

Rating at last inspection:

The last rating for this service was requires improvement (published 13 May 2019).

Why we inspected

We previously carried out a comprehensive inspection of this service in February 2019. One breach of legal requirement was found. The provider completed an action plan after the last inspection to show what they would do and by when to improve governance.

We undertook this focused inspection to check they had followed their action plan and to confirm they now met legal requirements. This report only covers our findings in relation to the Key Questions Safe, Responsive and Well-led.

The ratings from the previous comprehensive inspection for the key questions not looked at on this occasion were used in calculating the overall rating at this inspection. The overall rating for the service has changed from requires improvement to good. This is based on the findings at this inspection.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link 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 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?

Good ●

The service was safe.

Is the service responsive?

Good ●

The service was responsive.

Is the service well-led?

Good ●

The service was well-led.

24/7 Assured Care Services Limited

Detailed findings

Background to this 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. This inspection was planned to check whether the provider was meeting the legal requirements and regulations associated with the Act, to look at the overall quality of the service, and to provide a rating for the service under the Care Act 2014.

Inspection team:

The inspection was carried out by one inspector. Following the inspection, one expert by experience telephoned people who received care from the service and relatives to obtain feedback about their 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:

24/7 Assured Care Services Limited is a domiciliary care agency which is registered to provide personal care and support to people living in their own home.

The service had a manager registered with the Care Quality Commission. This means that they and the provider 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 visit because it is small and the manager is often out of the office supporting staff or providing care. We needed to be sure that they would be in.

What we did:

Before the inspection visit, we reviewed information we had received about the service since the last inspection. This included information about incidents the provider must notify us of, such as any allegations of abuse.

The provider was not asked to complete a provider information return prior to this inspection. This is information we require providers to send us to give some key information about the service, what the service does well and improvements they plan to make. We took this into account when we inspected the service and made the judgements in this report.

We also reviewed the last inspection report and information we had received about improvements made.

During the inspection

We visited the office location on 2 March 2021 to see the registered manager and review a range of records which included care records and staff files in relation to recruitment.

After the inspection

One expert by experience telephoned people who received care from the service and relatives after the inspection. The expert spoke with two people and five relatives about their experiences of the service. The inspector spoke with four care workers. The inspector also had contact with one care professional who had worked closely with the provider.

We continued to seek clarification from the provider to validate evidence found. We looked at care plans and medication records, punctuality and attendance records, policies and quality assurance records.

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 requires improvement. At this inspection this key question has now improved to good. This meant people were safe and protected from avoidable harm.

Staffing and recruitment:

- Staff records showed recruitment and selection processes had been carried out to ensure suitable staff were employed to care for people. A range of checks were completed. These included obtaining references and undertaking a criminal record check to find out whether a prospective employee had been barred from working with vulnerable adults.
- The registered manager confirmed that there were sufficient care workers deployed to keep people safe. This was confirmed by care workers we spoke with.
- Our previous inspection found that the provider's monitoring system for visits was ineffective. We found no late or missed calls had been recorded despite feedback indicating that there had been instances of lateness. During this focused inspection, we observed that the service had made improvements. Since the last inspection, the service had implemented an electronic monitoring system where staff logged when they arrived at a person's home on an app on their phone and when they left. The registered manager explained that this enabled the service to monitor staff punctuality and ensure staff stayed for the duration of the visit. The service was able to monitor real time information about visits. If a member of staff failed to log a call, this was then flagged up on the system so that the office was notified. The registered manager explained that the office would contact the member of staff to ascertain what the situation was and in the majority of circumstances, staff would call the office if they were running late.
- Feedback we received indicated that care workers were mostly on time and there were no issues with regards to care workers' punctuality and attendance. Staff we spoke with told us they were confident using the electronic system and raised no issues. Management also monitored punctuality and attendance through regular telephone calls to people and relatives.

Using medicines safely

- There were systems in place for medicines management. The service had an electronic medication recording and monitoring system. At the time of the inspection, the service provided medicine support to two people.
- We checked a sample of Medicines Administration Records (MARs) between December 2020 and February 2021. We found that these were completed fully with no unexplained gaps.
- Care support plans included information about what medicines were prescribed, the dose and time they should be administered. MARs also clearly listed the medicines prescribed so that medicines were identifiable.
- Medicines management was audited by management monthly and looked at various areas including storage and completion of documentation.

Assessing risk, safety monitoring and management:

- There were systems and processes in place to minimise risks to people. Care plans included risk assessments which were comprehensive and identified potential risks. These covered a range of areas, such as risks arising from the environment, moving and handling and medical conditions such as diabetes and seizures.

Systems and processes to safeguard people from the risk of abuse

- People who used the service told us they felt safe in the presence of care workers. One person said, "Yes, I feel safe with my carers." Relatives we spoke with confirmed this. One relative told us, "Yes, they get the carers they need and that makes them feel safe." Another relative said, "[My relative] is looked after very well."
- The service had relevant policies in place, including safeguarding and whistleblowing policies. These detailed the process in place for reporting concerns.
- Care workers had received safeguarding training. Care workers we spoke with were clear about the importance of their role in safeguarding people and said if they had concerns about people's safety they would report their concerns immediately to the registered manager. They were confident that the registered manager would respond to their concerns immediately.

Learning lessons when things go wrong

- The service had a system in place for recording accidents and incidents. We noted that no accidents or incidents had been documented and queried this with the registered manager. She confirmed that this was correct. Prior to, and during, our inspection we did not see any evidence to suggest that accidents and incidents took place that had not been recorded.
- Staff had an understanding of the action they should take in an emergency, or when a person was feeling unwell.

Preventing and controlling infection:

- There were suitable arrangements in place for the control and prevention of COVID-19 and other infections. Staff had received appropriate training in infection prevention and control and appropriate policies were in place.
- Feedback indicated that care workers wore PPE appropriately and no issues were raised in respect of this. One relative said, "Carers always arrive with a face mask on then put their gloves and apron on. They wash their hands too. Staff also put shoe covers on before they come into the home. They are very good." Another relative told us, "Carers are very good at wearing their face masks when they arrive and immediately put on shoe covers, gloves and aprons. They also sanitise their hands."
- Care workers told us they always had sufficient PPE and had not experienced a shortage during the COVID-19 pandemic. They told us they had sufficient gloves, aprons and masks. One care worker said, "We have always had enough PPE." Another care worker told us, "The manager always checks if we have enough."

Is the service responsive?

Our findings

Responsive-People's needs were met through good organisation and delivery.

At the last inspection this key question was rated as requires improvement. At this inspection this key question has now improved to good. This meant people's needs were met through good organisation and delivery.

Planning personalised care to ensure people have choice and control and to meet their needs and preferences.

- Our previous inspection found that care plans were generic and lacked information and guidance to ensure care was provided in a consistent way. During this focused inspection we found the service had made improvements with this and had implemented new format care support plans. People's care support plans were person-centred and provided staff with guidance on how their needs should be met. Care plans included details of people's preferences, cultural needs, health conditions and the level of support they required which covered areas such as diabetes and moving and handling.
- The registered manager confirmed that new format care support plans had been implemented since the last inspection. We observed that these included comprehensive detail about people's history and interests.

Meeting people's communication needs

Since 2016 onwards all organisations that provide publicly funded adult social care are legally required to follow the Accessible Information Standard (AIS). The standard was introduced to make sure people are given information in a way they can understand. The standard applies to all people with a disability, impairment or sensory loss and in some circumstances to their care workers.

- Our previous inspection found that the service had not taken all steps to meet AIS requirements. Care plans had failed to reflect differences in people's abilities, and we made a recommendation in respect of this. During this focused inspection we noted that care plans now included clear assessment information and guidance about people's individual communication needs and how they should be supported. Guidance was provided for staff on how to communicate with people.
- The registered manager confirmed that they were able to tailor information in accordance with people's individual needs and in different formats if needed. Documents such as care plans and policies could be offered in larger print or braille and could be translated into different languages.

Improving care quality in response to complaints or concerns

- There were procedures for receiving, handling and responding to comments and complaints.
- People and relatives we spoke with said that they felt able to raise concerns. Feedback obtained indicated that complaints raised in the past had been dealt with. One person said, "I would just ask [my relative] to get in touch, but I'm happy with it so far." One relative said, "If we needed to make a complaint, we would go through the manager first, but we've never needed to make a complaint." Another relative said, "I would contact the manager and discuss any problems I had. We have no complaints though."
- Records showed the service had not received any formal complaints since the last inspection and this was

confirmed by the registered manager.

End of life care and support

- At the time of the inspection, the service was not supporting anyone at the end of their lives. The registered manager told us, where required they would work with people, family members and other healthcare professionals to ensure people's end of life wishes were identified and measures put in place to ensure they were met.

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 requires improvement. At this inspection this key question has now improved to good. This meant that the service was well managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

At our last inspection the provider had failed to ensure their auditing systems were robust enough to assess and improve the quality and safety of the services provided to people. This was a breach of Regulation 17 (Good Governance) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014. During this focused inspection we found that these shortfalls had been addressed and the provider was no longer in breach of regulation.

Engaging and involving people using the service, the public and staff, fully considering their equality characteristics; Continuous learning and improving care

- Our previous inspection found that the service had checks in place but these were not sufficiently robust to identify shortfalls we found. We previously noted there was a lack of systems to enable learning and improvement of performance. During this focused inspection we found the service had made improvements in respect of this and had implemented various monitoring systems. This included the electronic visit monitoring system which enabled the registered manager to have clear oversight of staff punctuality and attendance. The service had also implemented new format person centred care plans and an electronic medicines management system.
- Audits had been conducted by management which covered various aspects of the service including medicines management, care support plans, staff training, punctuality, attendance and staff spot checks. These showed actions had been followed up and documented as completed.
- The provider asked people and relatives for their feedback through quarterly service users' satisfaction surveys and regular telephone calls. Management had conversations with people and their relatives about the care they received.
- Staff meetings provided staff with the opportunity to feedback about the service and to discuss any concerns and best practice. During the pandemic, these meetings were held virtually. Staff said they were able to have open discussions and share their opinions and feedback.
- Where required, the service communicated and worked in partnership with external parties which included local authorities and healthcare professionals and we saw documented evidence of this.

Planning and promoting person-centred, high-quality care and support; and how the provider understands and acts on duty of candour responsibility:

- Feedback indicated that people received personalised care that met their needs and they were involved in their care. One relative said, "Yes, we were both involved in putting together the care plan. We told them what we needed and they put it in the plan." Another relative told us, "Yes, I was involved in the initial care plan. We asked them to do the tasks we needed and that was included in the plan. They regularly ring up to

ask how things are going and ask if anything needs to be changed."

- The registered manager understood her responsibility under the duty of candour and were open, honest and took responsibility when things went wrong and notified relevant professionals and CQC of any significant events at the service.

Promoting a positive culture that is person-centred, open, inclusive and empowering, which achieves good outcomes for people

- People and relatives were complimentary about the management of the service and said communication was good. They told us that staff were responsive, and they all would recommend the agency to others. One relative told us, "I know who [the registered manager] is and she is very approachable. The service is well-managed, and staff are easy to talk to. I get calls from [the registered manager] from time to time to check that everything is going okay." Another relative said, "I would recommend this company. It's a very personal service, it's easy to get problems sorted out and they are very responsive." Another relative told us, "I would recommend them to others. They are good at communication and they listen to us. The manager is good at communication and gives out advice. They have a good rapport with [my relative]."
- Staff we spoke with told us they felt well supported by the registered manager. They confirmed that the registered manager was approachable and provided guidance and direction whenever they needed it. One care worker said, "I feel supported by the manager. We get a lot of support." Another care worker told us, "I get excellent support from the manager. I can talk to her about anything."

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

- Care workers we spoke with told us that staff morale was positive and they enjoyed working at the agency. They told us they felt supported and valued. They also told us that the service was organised and managed well. Feedback from staff was also positive in respect of communication between management, office staff and care workers. One care worker told us, "Communication is good. It is brilliant. I am sent the information I need from the manager." Another care worker said, "My experience it is running well. So far everything has been running brilliantly."
- Care workers were provided with information on what was expected from them and this was detailed in their job descriptions.