

J.C.Michael Groups Ltd

Aquaflo Care Bexley

Inspection report

Suite 26 Thames Innovation Centre Veridon Park, 2 Veridon Way London **DA18 4AL**

Date of inspection visit: 04 January 2018

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Ratings	
Overall rating for this service	Requires Improvement •
Is the service well-led?	Requires Improvement

Summary of findings

Overall summary

We carried out an announced inspection of this service on 05 October 2017 at which we found a number of breaches of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014. We took enforcement action and served a warning notice on the provider because their systems failed to effectively monitor people's medicines, missed or late calls, or accidents and incidents. We also found records relating to complaints, safeguarding and missed visited were not in place, in line with the provider's policy.

We undertook this unannounced focused inspection of Aquaflo Bexley on 04 January 2018. This inspection was carried out to check that the provider had met the requirements of the warning notice. This report only covers our findings in relation to the key question 'Is the service well-led?' You can read the report from our last comprehensive inspection, by selecting the link for Aquaflo Bexley on our website at www.cqc.org.uk.

Aquaflo Bexley is a domiciliary care agency. It provides personal care to people living in their own homes in the community. It provides a service mainly to older adults.

At this inspection we found that the provider had addressed the breach of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014 and had met the warning notice we served. We found that people's medicines were now being monitored in line with the provider's medication policy and procedure. Accidents and incidents were now recorded and monitored. The provider's out-of-hours on-call system was now used by staff appropriately. Records relating to complaints, safeguarding, and missed and late calls were now in place in the office, and these were now being audited on a regular basis.

The service did not have a registered manager in place. 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 2008 and associated Regulations about how the service is run. The provider was in the process of recruiting a new registered manager to run the service. A registered manager from another of the provider's locations had been supporting staff as an acting manager at Aquaflo Bexley since the last inspection. They demonstrated a good understanding of the role and their responsibilities under the Health and Social Care Act 2008. They were aware of the events which they were required to notify CQC about and we found appropriate notifications had been made to the Commission when required.

Following this inspection, the rating for the key question 'Is the service well-led?' has improved from 'Inadequate' to 'Requires Improvement' because the provider's systems for assessing and monitoring the quality and safety of the services provided have improved, but have not been operational for a sufficient amount of time for us to be sure of consistent and sustained good practice.

The five questions we ask about services and what we found

We always ask the following five questions of services.

Is the service well-led?

We found action had been taken to improve leadership.

Systems for monitoring and improving the quality and safety of the service were now being operated effectively.

The provider took into account the views of people through satisfaction surveys, telephone monitoring calls and unannounced spot checks.

The ratings for this key question has improved from 'Inadequate' to 'Requires Improvement' because the provider's systems for assessing and monitoring the quality and safety of the services provided had improved. We could not improve the rating to 'Good' because to do so requires consistent good practice over time. We will check this during our next planned comprehensive inspection.

Requires Improvement





Aquaflo Care Bexley

Detailed findings

Background to this inspection

We undertook an unannounced focused inspection of Aquaflo Bexley on 04 January 2018. This inspection was carried out to check that improvements to meet legal requirements planned by the provider after our inspection on 05 October 2017 had been made. We inspected the service against one of the five questions we ask about services, 'Is the service well-led?'. This is because the service was not meeting legal requirements in relation to this key question which had resulted in enforcement action.

No risks, concerns or significant improvement were identified in the remaining Key Questions through our on-going monitoring, or during our inspection activity so we did not inspect them. The ratings from the previous comprehensive inspection for these Key Questions were included in calculating the overall rating in this inspection.

The inspection was undertaken by one inspector. Before our inspection we reviewed information we held about the service which included the provider's action plan. This set out the actions the provider said they would take to meet legal requirements. We also contacted the local authority responsible for monitoring the quality of the service to obtain their views. We used this information to help inform our inspection.

During this inspection we spoke with the acting manager and looked at records relating to the quality monitoring of the service. We did not speak to any people using the service at this inspection as the breach of our regulations related to systems and processes.

Requires Improvement

Is the service well-led?

Our findings

At our last inspection we found the provider's systems for assessing and monitoring the quality and safety of the service provided to people were not operated effectively. Medicines were not monitored in line with the provider's medication policy and procedure. Accidents and incidents were not being recorded and monitored. The provider's systems for monitoring late or missed calls were not effective. Their out-of-hours on-call system was not always used by staff to report incidents, complaints, safeguarding concerns and missed visit logs were not in place in the office, in line with the provider's policy.

These issues were in breach of Regulation 17 of the Health and Social Care Act 2008 (Regulated Activities Regulations 2014). We served a warning notice requiring the provider to meet the regulation. Following that inspection, the provider sent us an action plan telling us what actions they had taken to comply with this regulation.

The service did not have a registered manager in place. The operations manager told us they were in the process of recruiting a new registered manager to run the service. A registered manager from another of the provider's locations had been supporting staff as an acting manager two days each week at Aquaflo Bexley since the last inspection. The acting manager told us they would continue to do so until a new manager was appointed. The acting manager demonstrated a good understanding of the role and their responsibilities under the Health and Social Care Act 2008. They were aware of the events which they were required to notify CQC about. We found appropriate notifications had been made to the Commission where required since our last inspection. The operations manager told us they had also been working to support staff at the office three days each week.

At this inspection we found that people's medicines were now being monitored in line with the provider's medication policy and procedure. We saw that medication administration records (MAR's) were now being returned to the office on a monthly basis and audited by the acting manager. For example the audit of one person's MAR found gaps in recording that medicines had been administered. However this was due to the person cancelling visits and the member of staff leaving the MAR's for those days blank. The member of staff concerned was reminded of what code to enter in the MAR when visits were cancelled and the importance of not leaving any blanks on the MAR chart. These audits ensured that people's medicines were now being managed appropriately.

Accidents and incidents had been recorded and we saw records were audited on a monthly basis by the acting manager. Appropriate records had also been maintained by staff with regards to any safeguarding concerns or complaints received by the service. For example a relative raised concerns about staff practice using moving and handling equipment. We saw evidence that the member of staff concerned had received further training on moving and handling and that the manager had followed this up by assessing the member of staff was competent at using the equipment. This helped ensure that appropriate action had been taken in response to each individual concern raised.

There was a system for monitoring late or missed calls. We saw that the acting manager had logged all

missed or late calls since our last inspection. Where people had called about missed calls the log showed that staff attended to them as soon as possible. We saw letters of apology had also been sent to the people concerned. The provider's out-of-hours on-call system was now used by staff to report incidents where these occurred to enable staff to follow up on any issues promptly where required. For example when a member of staff called the out-of-hours on-call system to say they were stuck in traffic and were running late we saw that the person concerned was contacted and was advised that the carer would be late for the call.

We saw that regular meetings were held with staff since the last inspection to discuss the running of the service and to remind staff of the responsibilities of their roles. Areas discussed at these meetings included the CQC inspection report, the out of hours on call system, medicines, safeguarding, staff training, incidents and accident reporting and confidentiality. Records showed that the meetings were well attended by staff. The acting manager told us that the minutes of the meeting were also circulated to staff that had not attended the meeting for their information.

The provider took into account people's views of the service through satisfaction surveys, telephone monitoring calls and unannounced spot checks. The acting manager showed us surveys completed by people in November 2017. They told us they were currently analysing people's responses before completing a report and an action plan to cover any areas for improvement. The manager told us they had taken action already as a response to comments made by people for example some people said they were not always told if staff were going to be late. Action was being taken in that office staff called people to inform them if staff were going to be late. We saw reports from telephone monitoring calls held in people's care records. We also saw records of unannounced spot checks carried out by senior staff to make sure staff turned up on time, wore their uniforms and identification cards and supported people in line with their care plans. The acting manager told us they used feedback from the surveys, telephone calls and spot checks to constantly evaluate and make improvements at the service.

The acting manager told us they had been working closely with local authority commissioners in order to make improvements. An officer from the local authority commissioning and quality assurance team told us they had visited the office in December 2017. They said that improvements had been made and the acting manager was putting together robust processes and systems for both office and care staff.