

Mosaic Care Group Limited

Mosaic Community Care Limited

Inspection report

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Date of inspection visit:
21 December 2016

Date of publication:
14 February 2017

Ratings

Overall rating for this service

Requires Improvement ●

Is the service safe?

Requires Improvement ●

Is the service responsive?

Requires Improvement ●

Is the service well-led?

Requires Improvement ●

Summary of findings

Overall summary

We carried out an announced inspection of Mosaic Community Care Limited on 24 and 26 August and 9 September 2016. We found three breaches of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014 relating to a failure to ensure sufficient staff attended to people as required, a failure to effectively assess, monitor and improve the quality of the service and the management of complaints. We issued a warning notice in relation to the breach relating to staffing, as this was a continued breach from the previous inspection and asked the provider to achieve compliance by 11 November 2016. After the inspection, the provider sent us an action plan detailing what action they would take to meet legal requirements in relation to monitoring and improving the service and the management of complaints. The provider told us that all actions would be completed by 9 December 2016.

We undertook this focused inspection on 21 December 2016 to check whether the provider had made the improvements necessary to meet legal requirements. This report only covers our findings in relation to those requirements. You can read the report from our last comprehensive inspection by selecting the 'all reports' link for Mosaic Community Care Limited on our website at www.cqc.org.uk.

Mosaic Community Care is a domiciliary care agency that provides personal care and support to adults and children with a learning disability living in the community. At the time of our inspection the service was providing support to 23 people.

At the time of our inspection the service did not have a registered manager. 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. There was an acting manager who had been in post for just over two weeks. The managing director of the service had previously been the registered manager but had de-registered on 6 December 2016. The managing director told us she had chosen to de-register as the registered manager of the service, as she felt the service needed a day to day manager who did not also hold the responsibilities of service provider.

During this inspection we found that the provider had made improvements and legal requirements were being met.

Relatives told us that there had been significant improvements at the service since our last inspection. They told us visits were rarely missed and on the infrequent occasions that staff were unable to attend, the service informed them.

We found that concerns and complaints were being addressed appropriately, in line with the service's complaints policy.

Records showed that relatives were asked for feedback about the care being provided to their family

members at care plan reviews and through satisfaction questionnaires. The relatives we spoke with confirmed this to be the case. We found evidence that the feedback received was being used to improve the service.

Staff told us that communication from management had improved. They advised that regular staff meetings took place and they received regular supervision.

We found evidence that the provider was monitoring and improving the service. A service improvement plan was in place and records showed that some actions had been completed. Further actions were planned and timescales were in place for their completion.

The five questions we ask about services and what we found

We always ask the following five questions of services.

Is the service safe?

The service was safe.

Relatives told us there had been significant improvements and they rarely experienced missed visits. When staff were unable to attend, the service contacted relatives to let them know.

Staff told us that management had taken action to address staff sickness and missed visits were much less frequent.

We could not improve the rating for 'safe' from requires improvement because to do so requires evidence of consistent good practice over time. We will review the rating during our next planned comprehensive inspection.

Requires Improvement ●

Is the service responsive?

The service was responsive.

We found evidence that concerns and complaints had been addressed appropriately, in line with the complaints policy.

Relatives had been asked to give feedback about the service at care plan reviews and through satisfaction questionnaires. They told us they were happy with the care being provided to their family members.

We could not improve the rating for 'responsive' from requires improvement because to do so requires evidence of consistent good practice over time. We will review the rating during our next planned comprehensive inspection.

Requires Improvement ●

Is the service well-led?

The service was well-led.

Relatives told us the service had improved significantly since our last inspection.

There was a service improvement plan in place. We found evidence that some improvements had been made and further planned improvements included timescales for completion.

Requires Improvement ●

Staff informed us that communication from management had improved and regular staff meetings and staff supervision sessions were taking place.

We could not improve the rating for 'well led' from requires improvement because to do so requires evidence of consistent good practice over time. We will review the rating during our next planned comprehensive inspection.

Mosaic Community Care Limited

Detailed findings

Background to this inspection

We undertook a focused inspection of Mosaic Community Care Limited on 21 December 2016. The inspection was carried out to check that improvements had been made following our comprehensive inspection on 24 and 26 August and 9 September 2016, and that legal requirements were being met.

The inspection was announced and was undertaken by one adult social care inspector.

We gave the provider 48 hours' notice, as we needed to be sure that the manager would be available to participate in the inspection.

Prior to the inspection we reviewed information we had about Mosaic Community Care Limited, including previous inspection reports, concerns and complaints and safeguarding information. We contacted Lancashire County Council contracts team for feedback about the service.

As part of our inspection we spoke by telephone with the relatives of seven people being supported by the service. During our visit we spoke with four care staff, the engagement and development officer, the acting manager and the managing director of the service. We reviewed a variety of service records including staff recruitment and supervision records, records of complaints, results of customer satisfaction surveys, notes of staff meetings, audits of quality and safety records and service improvement plans.

Is the service safe?

Our findings

During our comprehensive inspection of Mosaic Community Care Limited on 24 and 26 August and 9 September 2016, we found that the provider had failed to ensure sufficient staff attended to people as required. The relatives we spoke with at that time were happy with the care being provided by staff. However, five of the six relatives we spoke with told us that when their usual carer was not available, the visits were often missed.

This was a breach of Regulation 18 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

As this was a continued breach from our inspection in November 2015, we issued the provider with a warning notice, advising that they were required to become compliant with Regulation 18 by 11 November 2016 or we would consider further action.

At this inspection we found that the provider had made improvements and was meeting the requirements of Regulation 18.

Six of the seven relatives we spoke with during this inspection told us there had been significant improvements since our previous inspection. They told us that visits were rarely missed and the service contacted them if there were any problems. One relative told us, "Things have improved. We've only had one missed visit since August and we were told about that in advance". Another relative said, "Things have definitely improved. They're much better than when you inspected last time".

One relative told us that the care staff who visited were 'absolutely fantastic'. However, office staff had explained to them that they were unable to cover all of the visits their family member needed, due to not having the staff available to attend at some of the times needed. The relative told us that new staff who were going to cover those specific visits had been introduced to their family member previously but had subsequently left the service. They told us they had been informed that new staff were being recruited to cover the additional visits but the relative felt frustrated about how long this was taking. The relative told us that the hours being missed were being 'banked' with the service, which meant that the visits would be provided at a later date when the provider had staff available to cover them. However they were considering finding an alternative provider for the visits that Mosaic Community Care Limited had been unable to provide staff for.

The staff we spoke with told us that staffing had improved since our previous inspection. They told us that staff sickness was being dealt with more firmly, which had resulted in fewer staff phoning in sick at short notice and fewer missed visits as a consequence. One staff member told us, "Things are much better. Less staff are phoning in sick. I know of two families who've had one missed visit each since your last inspection due to short notice staff sickness but there haven't been any others". Another member of staff said, "Things are a lot better. Sickness has reduced since our staff meeting in November. There are hardly any missed visits now".

Is the service responsive?

Our findings

During our previous inspection of Mosaic Community Care Limited we found that the provider had failed to respond appropriately to concerns received about the service. The service did not have a clear process for the management of concerns or informal complaints. Concerns received by the service by telephone were recorded on the daily call log and included numerous concerns received from relatives about missed visits. Little information had been recorded about what had been done to address the concerns or any future action that needed to be taken. The relatives we spoke with at that time told us they had raised their concerns about missed visits on a number of occasions but things had not improved.

This was a breach of Regulation 16 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

Following our inspection the provider sent us an action plan detailing the improvements they would make. At this inspection we found that the provider had made improvements and was meeting the requirements of Regulation 16.

We found that the complaints procedure had been reviewed and a copy of the updated policy had been sent to the relatives of people being supported by the service. The policy included information about how to make a complaint and timescales for a response. The contact details for the CQC and the Local Government Ombudsman were included. We found that a record had been kept of concerns and complaints received. Four concerns/complaints had been received since our last inspection and we found that they had been investigated and addressed in line with the policy. We noted that an apology had been offered on some occasions and that staff had been disciplined when it was felt to be appropriate.

None of the relatives we spoke with had raised any concerns or made a complaint since our last inspection. One relative told us, "I haven't had any missed visits or concerns since the last inspection. There were previous issues but now things are much improved". Another said, "We've had issues in the past with staff turning up late but our current carers are always on time. We don't have any concerns". Relatives told us they had been asked during recent care plan reviews to give feedback about the care being provided and if they were happy with the service.

We reviewed the results of a customer satisfaction survey issued to relatives in November 2016. We noted that respondents had expressed satisfaction with a number of issues including the reliability of the service, the quality of the personal and social care provided by the service, the helpful and caring attitude of staff and staff competence and training. Comments made by relatives as part of the satisfaction survey included, "The service is much better than it was", "Since the CQC visit there have been no missed visits. New staff have been introduced for consistency. It's going well" and "The care received from the staff is outstanding. I'm happy now that a new member of staff has been introduced. They're very good".

The lowest scoring areas on the questionnaires related to the availability of the manager and the management inspiring confidence in its ability to deliver its services. One relative had commented in their

questionnaire, "The company needs to meet families". The managing director told us she had chosen to de-register as the registered manager of the service, as she felt the service needed a day to day manager who did not also hold the responsibilities of the service provider. She told us that the new manager had been introduced to most of the people being supported by the service and their relatives and she was hopeful that positive relationships would be developed. Many of the relatives we spoke with told us the new manager had visited them at home.

The managing director and the new manager informed us that a family forum was being introduced, the first meetings of which were due to take place in January 2017. We saw evidence that letters had been sent to relatives inviting them to the forum. The manager told us they were keen to use this as a way to involve relatives in the future development of the service.

Is the service well-led?

Our findings

During our inspection of Mosaic Community Care Limited on 24 and 26 August and 9 September 2016, we found that the provider had failed to effectively assess, monitor and improve the quality of the service. Relatives told us they had raised their concerns with the service about missed visits on many occasions but there had not been any improvement.

This was a breach of Regulation 17 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

Following our inspection the provider sent us an action plan detailing the improvements they would make. At this inspection we found that the provider had made improvements and was meeting the requirements of Regulation 17.

We found that complaints and concerns had been addressed appropriately. The details of each complaint investigation were clearly recorded and showed that staff were disciplined when their conduct was inappropriate.

The relatives we spoke with told us they were happy with the service being provided to their family members. They said that they had been asked during recent care plan reviews to give feedback about the care being provided and felt that there had been significant improvements since our last inspection. They told us they rarely experienced missed visits. The relatives we spoke with had not raised any concerns or complaints since our last inspection. Most of the relatives we spoke with had been introduced to the new manager.

Staff told us that communication from management had improved since our previous inspection. They told us that staff meetings had taken place and we noted from staff meeting notes that issues addressed had included staff sickness and lateness, conduct at work, supervisions and appraisals and the protocol for informing the office when they were unable to undertake shifts. Staff told us they had received regular supervision sessions and we saw evidence of this. Most staff had been introduced to the new manager who had started working at the service two weeks prior to our inspection. Staff told us that management had addressed with staff the high levels of staff sickness at the service, which had resulted in a reduction in staff phoning in sick at short notice and a reduction in missed visits. The manager and the managing director told us that staff recruitment was on going and they were looking at ways in which to improve staff recruitment and retention, such as introducing financial incentives.

A service improvement plan was in place and we noted that a number of identified actions had already been completed including the recruitment of a manager, regular staff and management meetings, the completion of regular audits of quality and safety and regular staff supervision sessions. Further planned improvements included regular staff satisfaction questionnaires (the first of which would be issued in January 2017), medication audits, a review of staff training needs and monthly visits to relatives to gain feedback about the care being provided to their family members.

