

OAA Care Limited

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Inspection report

13-14 Orchard Street

Bristol

BS1 5EH

Tel: 0117 905 5128

Website: outandaboutandaway.co.uk

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Overall summary

OAA Care Limited (Out and About and Away) is a small agency providing personal care to a small number of people in their own homes in Bristol. They support both adults and children with a variety of social and personal care needs.

This inspection was carried out on 24 and 31 March 2015. The first day was unannounced as we had received concerns about the management of the service. The second day was announced as we needed to ensure that staff were available in the office.

We inspected OOA Care Limited in February 2014 and during this inspection we found a number of breaches regulations relating to the following issues:-

- Records
- Supporting workers
- Assessing and monitoring the quality of service provision

Following our inspection in February 2014, we used our enforcement powers to place a condition on the provider to prevent any new care packages for people being undertaken without the agreement of the Commission.

OAA Care Limited was inspected again in July 2014. We found that although some improvements had been made to the service, sufficient improvements to ensure the care and welfare of people who used the service had not been made. There were also further and continued breaches of regulations at that time relating to the following issues:-

- Care and welfare of people who use services

- Assessing and monitoring the quality of service provision
- Complaints

This inspection does not carry a rating; a rating can only be applied to an inspection following a previously rated comprehensive inspection. The last comprehensive inspection of this service took place before the new approach methodology of inspecting and applying ratings. This service will therefore receive a rating at their next comprehensive inspection.

You can read the report from our last full inspection under the previous inspection methodology, by selecting the 'all reports' link for OOA Care Limited on our website at www.cqc.org.uk

A registered manager was in post at the time of inspection. 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 and associated Regulations about how the service is run.

The provider had not made appropriate arrangements to identify and respond to allegations of abuse. Staff were not aware of the provider's safeguarding policy and how to respond to actual or suspected abuse to keep people safe. The provider had also failed to act appropriately in reporting potential abuse to the local authority safeguarding team.

Summary of findings

When a risk to people was identified, the provider had not undertaken a risk assessment process to mitigate any foreseeable risk.

The provider did not operate safe and effective recruitment procedures to ensure only suitable staff were employed at the service.

The provider did not systematically monitor the quality of the service provision and care or have effective systems in place to obtain the views of people who used the service.

Staff appraisals and supervisions were not undertaken as planned and the service failed to monitor and feedback on staff performance.

We saw that appropriate action was not taken in response to unsafe incidents, including steps to reduce the risk of their reoccurring.

The provider did not have a system to monitor records made by staff or records that related to the management of the service. Records were not kept securely.

We found multiple breaches of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2010. You can see what action we told the provider to take at the back of the full version of this report.

Summary of findings

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 provider had failed to respond appropriately to incidents involving potential abuse.

Staff were not aware of how to identify and report abuse in line with the provider's policy.

People's risks were not appropriately assessed with plans formulated for their care to be delivered safely.

The provider did not operate safe and effective recruitment procedures to ensure only suitable staff were employed by the service.

Is the service effective?

Not inspected

Is the service caring?

Not inspected

Is the service responsive?

Not inspected

Is the service well-led?

Monitoring systems were not used effectively to ensure that the service was running safely and to a good standard.

The quality assurance systems in place for people and staff to express their views and opinions were inadequate.

Staff appraisals and supervisions were not undertaken as planned and the service failed to monitor and feedback on staff performance

Incidents and accidents were not assessed to aid prevention or reduce reoccurrence.

Records were not monitored or kept securely.

OAA Care Limited

Detailed findings

Background to this inspection

We carried out this inspection under Section 60 of the Health and Social Care Act 2008 as part of our regulatory functions. This inspection was planned to check whether the provider is meeting the legal requirements and regulations associated with the Health and Social Care Act 2008 and to look at the overall quality of the service.

When OOA Care Limited was last inspected in July 2014 we found breaches of the legal requirements in relation to the care and welfare of people who use services, assessing and monitoring the quality of service provision and complaints. The provider wrote to us in October 2014 to tell us how they would achieve compliance with the regulations. During this inspection, we found that the service was still not meeting all of the legal requirements.

Before our inspection of 24 and 31 March 2015 we reviewed the information that we had about the service including statutory notifications. Notifications are information about specific important events the service is legally required to send to us. We also contacted the local authority and they provided us with information they held about the service.

This inspection was carried out by two inspectors. On the days of the inspection we spoke with two people employed by the service. This did not include the registered manager who was unavailable for both inspection days.

We looked at records relating to peoples personal care and the management of the service such as the policies, incident and accident records, staff recruitment, staff supervision, and quality assurance reports.

Is the service safe?

Our findings

The provider had not made appropriate arrangements to identify and respond to the risk of abuse. Staff we spoke with were not aware of, or have access to, current procedures and guidance for raising and responding to concerns of abuse in the absence of the registered manager.

The registered manager had not referred incidents which met safeguarding criteria to the local authority safeguarding team or notified the CQC of possible abuse. We saw examples of this in relation to incidents which involved the restraint of a person. The registered manager had failed to recognise potential abuse, respond appropriately and according to their own safeguarding procedures.

Where the service had completed people's assessments and it was identified there was a risk or staff intervention was required, a support plan had not been created. This meant that people may receive inappropriate or unsafe care. For example, one person experienced behaviour that challenged themselves and others. Although this behaviour was recorded there was no documented support and guidance for staff on how to assist the person in managing their behaviour or associated risks.

We found evidence of a breach of Regulation 11 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2010 (now Regulation 13 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014).

Staff files showed that safe recruitment procedures were not followed before new staff were appointed. We looked at the three most recent staff files and found the following; gaps in employment which were detailed on application forms and CVs had not been addressed. There were not any records of how candidate competency and suitability had been assessed. A Disclosure and Barring Service (DBS) check had not been completed for all staff; DBS checks ensure that people barred from working with certain groups such as vulnerable adults and children would be identified. One member of staff had information on their DBS check which may have precluded them from working with people supported by the service; this information had not been considered or any rationale for employment recorded prior to that staff member's employment. References had not been obtained or other checks on previous employment conduct for the same member of staff. The provider had not ensured that staff were of good character and suitably competent for the positions applied for.

We found evidence of a breach of Regulation 21 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2010 (now Regulation 19 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014).

Is the service effective?

Our findings

Not inspected

Is the service caring?

Our findings

Not inspected

Is the service responsive?

Our findings

Not inspected

Is the service well-led?

Our findings

The provider did not have appropriate system to monitor the views of people, their relatives and staff. The provider used an internet based survey which could not be used by all people who used the service

The survey results for November 2014 to February 2015 indicated that staff and some people felt that the service was disorganised. Staff also commented on the lack of supervision meetings and availability of the registered manager to respond to communication. One person had stated; 'Organisation, it seems very disorganised at times'. The registered manager had collated these concerns; there was not however a full action plan in place to address the concerns with given timescales.

The provider did not have an effective system to monitor the quality of people's care records and ensure the service held current and accurate records about people. Records did not always contain proper information about people to protect them from inappropriate care. Records for people and staff were not stored securely so they were only accessible to authorised people, such as the registered manager. We saw examples of this in relation to staff

personal documents and wage records stored on an open shelf. The provider had not identified failings in the security of records or the lack of recording of information about people through their own quality assurance processes.

Staff supervisions had not taken place as planned by the provider and there was no appraisal system or competence checks in place. One member of staff had not received supervision for over two years. This meant that the provider did not provide staff with support, ensure staff competence and gain feedback to improve the service.

The provider required staff to report incidents and accidents but there was no assessment of these incidents by the registered manager to aid prevention or reduce reoccurrence. There were not any supporting records which showed that incidents and accidents had been reviewed to establish any trends and to see if any action could be taken to reduce the risk of reoccurrence. The provider was unable to provide us with any analysis of incidents.

We found evidence of a breach of Regulation 10 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2010 (now Regulation 17 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014).

Action we have told the provider to take

The table below shows where legal requirements were not being met and we have asked the provider to send us a report that says what action they are going to take. We did not take formal enforcement action at this stage. We will check that this action is taken by the provider.

Regulated activity	Regulation
Personal care	<p>Regulation 10 HSCA 2008 (Regulated Activities) Regulations 2010 Assessing and monitoring the quality of service provision</p> <p>Regulation 10 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2010 (now Regulation 17 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014).</p> <p>How the regulation was not being met:</p> <p>There were no appropriate systems to identify and assess risks to people who used the service.</p> <p>There were no appropriate systems to assess, monitor and improve the quality and safety of the services provided in the carrying on of the regulated activity.</p> <p>The provider had failed to maintain accurate records for service users</p> <p>The provider had failed to seek and act on feedback from staff for the purposes of continually evaluating and improving the service.</p> <p>The provider had failed to securely maintain records for service users and staff.</p>

This section is primarily information for the provider

Enforcement actions

The table below shows where legal requirements were not being met and we have taken enforcement action.

Regulated activity	Regulation
Personal care	<p>Regulation 11 HSCA 2008 (Regulated Activities) Regulations 2010 Safeguarding people who use services from abuse</p> <p>Regulation 11 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2010 (now Regulation 13 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014).</p> <p>How the regulation was not being met:</p> <p>The provider had not made appropriate arrangements to identify and respond to allegations of abuse.</p> <p>The provider had also failed to act appropriately in reporting potential abuse to the local authority safeguarding team.</p> <p>When a risk to people was identified, the provider had not undertaken a risk assessment process to mitigate any foreseeable risk.</p>

The enforcement action we took:

Warning notice

Regulated activity	Regulation
Personal care	<p>Regulation 21 HSCA 2008 (Regulated Activities) Regulations 2010 Requirements relating to workers</p> <p>Regulation 21 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2010 (now Regulation 19 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014).</p> <p>How the regulation was not being met:</p> <p>The provider did not operate safe and effective recruitment procedures to ensure only suitable staff were employed by the service.</p>

The enforcement action we took:

Warning notice