

Mercury Care Services Limited

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Inspection report

2.13-2.15 Astra House
23-25 Arklow Road
London
SE14 6EB

Date of inspection visit:
13 September 2017

Date of publication:
16 January 2018

Ratings

Overall rating for this service

Good ●

Is the service safe?

Good ●

Is the service effective?

Good ●

Summary of findings

Overall summary

We conducted a comprehensive inspection of Mercury Care Services Limited on 14 and 16 February 2017. At this inspection we rated the provider good and did not find any breaches of regulations. We conducted a focussed inspection on 13 September 2017 in response to some information of concern that was received prior to the inspection. The information of concern was in relation to the timeliness of care visits, that care workers were not staying for the full length of their calls, the safe management of medicines, care workers right to work in the UK and managing people's nutritional needs.

This report only covers our findings in relation to the information of concern. You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Mercury Care Services Limited Centre on our website at www.cqc.org.uk.

Mercury Care Services Limited is a domiciliary care agency delivering care to older people in their homes. At the time of the inspection the service was providing support to 13 people.

The service had 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.

Medicines care plans did not always contain enough information for care workers to refer to. However, there was sufficient information on people's medicines administration charts to minimise the risk of error.

The provider conducted checks to ensure staff were eligible to work in the UK.

Care workers attended to people on time and stayed for the full length of their calls.

Care records contained sufficient information about people's nutritional needs. However, there was very little information about people's likes and dislikes in relation to food.

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. People told us staff attended to them on time and stayed for the full length of their visit.

The provider conducted checks to ensure staff were eligible to work in the UK.

Medicines administration charts accurately recorded the medicines people were required to take, however, the information in people's care plans did not always fully record this.

Is the service effective?

Good ●

The service was effective. People's care records contained sufficient information about their nutritional needs. However, there was very little recorded information about their likes and dislikes in relation to food.

Mercury 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 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, to look at the overall quality of the service, and to provide a rating for the service under the Care Act 2014.

We undertook a focussed inspection of Mercury Care Services Limited on 13 September 2017. This inspection was completed in response to some information of concern we received about the care of people using the service. The service was inspected against three of the five questions we ask about services. Is the service Safe? Is the service Effective? Is the service Caring? Is the service Well - Led?

The inspection was conducted by a single inspector and was announced. The provider was given 48 hours' advance notice because the location provides a domiciliary care service and we needed to ensure the registered manager and staff were available.

Prior to the inspection we reviewed the information we held about the service, including any notifications about serious incidents and any changes to the service. After the inspection we spoke with three people using the service and two relatives.

We looked at a sample of six people's care records and records related to the management of the service. We spoke with the registered manager and representatives of one local authority that commissioned services from the provider.

Is the service safe?

Our findings

Prior to our inspection we received information of concern in relation to the safe management of medicines. We were informed that medicines care plans did not always contain enough information for care workers to administer medicines safely. At this inspection we found there were issues with medicines care plans not containing enough information. For example in one care plan we reviewed, we found there was not a full list of the medicines the person was supposed to be taking. In another care plan we reviewed, we found the dosage of medicines the person was supposed to be taking was not recorded. This meant there was insufficient information for the care worker to refer to if needed. We raised our concerns with the registered manager during the inspection and they explained that whilst all relevant information was on the medicines administration chart, thus minimising the risk of errors, they would ensure people's care plans were also updated to reflect the full details of what medicines assistance the person needed.

Prior to our inspection we received information of concern in relation to the timeliness of appointments. We were told that care workers were not staying for the full length of their calls and were often late. We spoke with the registered manager about this and she confirmed that there had been some issues regarding the timeliness of care workers due to issues they were experiencing with travelling to certain locations. The registered manager explained that she had assessed the travel times for care workers and ensured that all care workers now had sufficient time to travel to attend to people on time. We spoke with four care workers over the telephone and whilst all care workers confirmed there were no current concerns regarding their ability to attend to people on time, one care worker told us this had been an issue in the past. They told us "This was a problem in the past, but things have been sorted out now." People told us there were generally no concerns with care workers attending to them on time. Their comments included "Carers arrive on time" and "Apart from the odd problem with traffic, it's ok".

Prior to our inspection we received information of concern that care workers were not staying for the full length of their calls. We spoke with people using the service and their relatives. They confirmed that there were no issues about care workers not staying for the full length of their visits. Their comments included "They stay the full time" and "I haven't noticed them leaving early". We spoke with care workers and they also confirmed that they completed their full allotted time. Their comments included "We always stay the full time" and "Even if we're late, we'll stay for the full time. I would never leave early if I was late."

We spoke to the registered manager about what systems they had in place to monitor if care workers were staying for the full length of their visit. We found that care workers completed weekly time sheets that included the start and finish times of their calls. These forms were signed by people using the service prior to submission and then checked by the registered manager on a weekly basis. Where there were discrepancies, the registered manager would follow these up by contacting the person and the care worker involved. If care workers were late in attending to people they were required to contact the office who in turn contacted the person to notify of them of this. If people were concerned about the timeliness of their visit, they were required to contact the office who followed this up.

Prior to our inspection we received information of concern that care workers were not eligible to work in the

UK. We checked records for specific care workers and found that the appropriate checks had been conducted and care workers did have the right to work in the UK. The provider had retained photocopies of care worker's passports and where appropriate, had also taken a copy of care worker's residence permits to demonstrate this.

Is the service effective?

Our findings

Prior to our inspection we received information of concern relating to how one person's nutritional needs were met. At this inspection we found there was sufficient information in people's care records about what assistance they required from care workers with their nutrition. Care records included a specific section entitled 'Dietary requirements and allergies. Include current weight'. This included details of whether people had any specific nutritional needs or allergies and if there were no issues for care workers to be aware of, this was also recorded.

However, we found, there was very little advice within care records about what people's likes and dislikes were in relation to food which would help to ensure that care workers met people's individual needs and preferences.

We spoke with the registered manager about this and they told us that care workers spoke to people at each visit and asked what food they wanted to eat. Care workers confirmed this. One care worker told us "I always ask people what food they want to eat when I see them and I respect their wishes." The registered manager agreed to update people's care records following our visit to include people's preferences in relation to food.