

Carewatch Care Services Limited

Carewatch (Blackpool)

Inspection report

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24 February 2017

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Ratings

Overall rating for this service

Good ●

Is the service safe?

Good ●

Summary of findings

Overall summary

We carried out an unannounced comprehensive inspection of this service on 09 and 10 March 2016. A breach of legal requirements was found. After the comprehensive inspection, the provider wrote to us to say what they would do to meet legal requirements in relation to staff not always following policies and procedures on the administration of medicines. The provider did not have an effective system to monitor the safe documentation of medicines. We undertook this focused inspection to check that they had followed their plan and to confirm that they now met 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 (Carewatch Blackpool) on our website at www.cqc.org.uk

Carewatch (Blackpool) provides personal care and support to people living in their own homes. The agency is situated in the south of Blackpool close to the airport. The office is on the ground floor and is accessible to people with restricted mobility. At the time of our inspection there were 445 people receiving a service from Carewatch (Blackpool).

The service had a registered manager in place. However, the registered manager was not present during our focused 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 2008 and associated Regulations about how the service is run.

At our focused inspection visit on the 24 February 2017, we found improvements had been made. We found the provider had a system to monitor the administration of medicines. The registered manager had a clear procedure to follow with staff members should the medicine administration policy not be followed.

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 ●

We found action had been taken to improve people's safety by the provider.

Medicine protocols were safe. The provider had policies and procedures on the administration of medicines. They had an effective system to monitor the documentation of medicines.

Carewatch (Blackpool)

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. We undertook an unannounced focused inspection of Carewatch (Blackpool) on 24 February 2017. This inspection was planned to check that improvements to meet legal requirements planned by the provider after our March 2016 comprehensive inspection had been made. We inspected the service against one of the five questions we ask about services: is the service safe. This is because the service was not meeting one legal requirement.

The inspection team consisted of an adult social care inspector.

Prior to this inspection visit, we reviewed all the information we held about the service, including data about safeguarding and statutory notifications. Statutory notifications are submitted to the Care Quality Commission and tell us about important events that the provider is required to inform us. This helped us to gain a balanced overview of what people experienced accessing the service.

We spoke with a range of people about the service. This included four people who received a service from Carewatch (Blackpool), the senior co-ordinator, staff trainer and three staff responsible for providing direct care. We spoke with the registered manager after the inspection had taken place. We looked at documentation related to the administration of medicines for twelve people.

Is the service safe?

Our findings

At our comprehensive inspection of Carewatch (Blackpool) on 09 and 10 March 2016, we found staff did not always follow policies and procedures on the administration of medicines. We noted missed signatures on medicine administration recording forms. There was no additional information recorded that indicated staff had actively chosen not to administer the prescribed creams and medicines.

This was a breach of Regulation 12 Health and Social Care Act 2008 (Regulated Activities) Regulations 2014 because staff did not always follow policies and procedures on the administration of medicines.

We used this inspection visit, carried out on 24 February 2017 to ensure the required improvements had been made. On the day of inspection, we visited the office base. We noted induction training for new employees was taking place. We spoke with two staff who attended the training about the administration of medicines. Both members of staff told us they had received training on administering medicines and had shadowed a more experienced member of staff before administering medicines. One staff member commented, "After the training and shadowing, I felt more competent about administering medicines." A second staff member told us, "I know I can get guidance from the office or the on call, (about the administration of medicines). They know the service users."

Staff were offered additional support from senior management when required. The trainer told us all new staff have the email address of registered manager and trainer given to them when they start their employment. This allowed staff the opportunity to seek guidance when they had any concerns. We spoke with the staff trainer who told us each staff member received a copy of the Carewatch medicine administration policy at induction and refresher training. This allowed them to refresh their knowledge about systems and processes when required.

We looked at training provided. The medicine training at induction included administration of medicines, seeking advice, as and when required medicines and controlled drugs. The trainer said quality officers observe staff administer medicines to assess their competency. We saw completed competency sign off sheets that indicated the observations had taken place. This showed the service had a system in place to ensure staff had the knowledge and sustained skills to administer medicines safely.

Whilst at the office base we requested and looked at a random selection of medication administration recording forms for eight people. We noted the forms were fully completed and there were no missed signatures. This indicated all prescribed medicines had been administered as directed.

We asked the senior co-ordinator about medicine errors such as missed signatures. They shared Carewatch (Blackpool)'s step-by-step auditing procedure. A member of the office staff had the role of monitoring medicine administration recording forms. Any missed signatures were documented and shared with the registered manager. When at the office we saw the current and historic auditing records related to medicine errors.

We saw evidence when medicines errors had occurred action had been taken. Staff were invited to disciplinary hearings to discuss the situation. Action was taken upon assessing each case. Staff were offered further training when deemed necessary to avoid any further errors. Competency checks also took place. When we spoke with the registered manager they told us since they had introduced the new procedures, staff performance had improved. This showed the service had effective governance systems to promote high quality care.

As part of the inspection visit, we undertook a visit to a supported living complex managed by the service. Carewatch (Blackpool) delivered 24-hour support to eight adults who lived on a gated complex. Each person lived alone in a purpose built bungalow. Staff who worked within the complex shared their time between the eight people. We spoke with four people who lived on the complex about the administration of their medicines. One person told us, "The staff are good." When asked if staff were suitably trained to administer their medicines a second person joked, "I think so, I'm still here." They further commented they self-administered their inhalers and staff were good at prompting them.

Whilst visiting people we looked at medicine records and how medicines were stored. Records were consistently completed and when staff had not administered medicines, we were able to read additional notes as to the reason why. We observed medicines were safely stored and saw documentation to indicate stock checks of each medicine took place. This showed the provider had systems to protect people from the unsafe storage and unsafe administration of medicines.