

Nation Care Agency Ltd

Nation Care Agency

Inspection report

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Ratings

Overall rating for this service

Good ●

Is the service well-led?

Requires Improvement ●

Summary of findings

Overall summary

This announced inspection was carried out on 28 February 2017. This announced inspection was carried out on 28 February 2017. We contacted the registered manager one hour prior to the inspection because the location provides a domiciliary care service and we wanted to check the registered manager would be available to meet with us. The last inspection of the service took place on 1, 3 and 8 June 2016. We rated the service as Good overall but identified one breach of Regulation 17 of the Health and Social Care Act 2008 (Regulated Activities) Regulation 2014 as the provider did not always operate systems and processes effectively to monitor and improve the quality and safety of the services provided. These particularly related to a lack of audits of medicine administration records and of daily logs.

At this inspection we checked the auditing being carried out for MARs and daily logs and saw this was taking place and the majority of issues had been followed up and improvements made. This meant that the provider was now meeting legal requirements.

This report only covers our findings in relation to these topics. You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for 'Nation Care Agency' on our website at www.cqc.org.uk.

Nation Care Agency provides a domiciliary care service for adults with a range of needs. The service offers support to people who require help with day to day routines including personal care, meal preparation, light housework, shopping and companionship. At the time of our inspection there were 85 people receiving personal care.

The service is required to have a registered manager and there was one in post. A registered manager is a person who has registered with the Care Quality Commission (CQC) 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.

Improvements had been made in the auditing and monitoring of documentation including MARs and daily records and action taken to address shortfalls identified.

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 the provider had taken action to improve systems for monitoring the service.

Documentation including medicine administration records and daily logs were now being audited and monitored so issues could be identified and addressed.

This meant that the provider was now meeting legal requirements.

While improvements had been made we have not revised the rating for this key question; to improve the rating to 'Good' would require a longer term track record of consistent good practice.

We will review our rating for well-led at the next comprehensive inspection.

Requires Improvement ●

Nation Care Agency

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.

This announced inspection was carried out on 28 February 2017. We contacted the registered manager one hour prior to the inspection because the location provides a domiciliary care service and we wanted to check the registered manager would be available to meet with us. The inspection was carried out by one inspector. This inspection was completed to check that improvements to meet legal requirements planned by the provider after our comprehensive inspection on 1, 3 and 8 June 2016 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 that question.

During the inspection we viewed a variety of records including daily logs for four people using the service, medicines administration record charts for three people using the service, accident and incident reports and complaints and compliments records.

We spoke with the registered manager who was also the nominated individual for the service, the office manager and the training coordinator.

Is the service well-led?

Our findings

During our inspection in June 2016 we found that medicine administration records (MARs) and daily logs were not being monitored effectively, so any shortfalls were not being identified and addressed. At this inspection we saw systems had been introduced to monitor both sets of documents and to address shortfalls identified.

The provider used the MARs provided by the local authority. The auditing tool for the MARs had a checklist to ensure MARs had been correctly completed with all the relevant information and a second sheet to record any issues identified by the audit. For example, we saw where a member of staff had hand written two entries on the MAR and this was because medicine administration labels were not available. This had been picked up by the audit and the registered manager said they were in contact with the local authority and also with the dispensing chemists to remind them to supply labels for the MARs. For one person the MAR had run out over a weekend and a new one was not available until the next week. Staff had recorded medicine administration for the two days in the daily log, however the audits had not picked this up as they had been completed at the end of each MAR cycle. We discussed this with the registered manager and office manager who said they would check the previous month's audits to ensure any cross-over issues from one cycle to the next were picked up.

There was an audit sheet for the daily logs. The training coordinator was responsible for the majority of the auditing and we saw where action had been taken to address any shortfalls identified. For example, where an entry had been missed in the daily log this was checked against the electronic call monitoring system. This was the system used by the care workers to log in and out of each visit they made, to confirm they had attended each call. We saw that the staff had attended the visits for the missed daily log entries that had been identified on the audit forms. In some instances the auditor had recorded the action taken as being to speak with the care workers involved but we saw on one form this had not been recorded. The training coordinator confirmed they had done so and said they would ensure this was always recorded in future.

We viewed the complaints records and saw complaints, however minor, were recorded and the documents included the action that had been taken to address them. Where the provider had needed to contact another service, for example, social services or the GP, this was evidenced in the records. Compliments were also recorded and included the action taken to pass on the praise to the care workers so their contribution was acknowledged.

At our inspection in June 2016 we identified that although accidents and incidents were being reported, they had not always been recorded, which was addressed during that inspection. At this inspection we viewed the accident and incident records and saw they were continuing to be recorded and the action taken to address each one was included. We discussed ensuring these were monitored to look for any trends, for example, for someone who had been found on the floor twice within two months. The office manager explained the action that was being taken to try and address the issue and said they would ensure this was fully recorded to evidence the action they had taken.