

St. Hilda's East

Shebadan Domiciliary Care Service (Sonali Gardens)

Inspection report

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Ratings

Overall rating for this service

Good ●

Is the service effective?

Requires Improvement ●

Is the service responsive?

Good ●

Is the service well-led?

Good ●

Summary of findings

Overall summary

We carried out an announced comprehensive inspection of this service on 16 June 2016. Breaches of legal requirements were found regarding consent, person centred care and good governance. After the comprehensive inspection, the provider wrote to us to say what they would do to meet legal requirements in relation to the breaches.

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 Shebadan Domiciliary Care (Sonali Gardens) on our website at www.cqc.org.uk.

There was a registered manager at the service. 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 previous inspection we found that the provider was not acting in line with the Mental Capacity Act (2005) by ensuring that people's capacity was assessed where necessary and that where people lacked capacity staff could demonstrate they were working in people's best interests. At this inspection, we found that the provider had carried out appropriate assessments of people's capacity and there were records of best interests discussions. Staff had received training about mental capacity and this helped to ensure they understood their responsibilities under the law.

At our previous inspection we found that care plans did not accurately reflect people's current care needs and the care that was delivered. At this inspection, we found that care plans had been checked and revised and now accurately reflected the care that people received. Checks were carried out by managers to help ensure that this continued.

At our previous inspection there were not sufficient systems of audit to ensure that high quality care was delivered. At this inspection, we found that managers had carried out audits to ensure the quality of documentation and that people were satisfied with their care. Managers had also implemented an ongoing audit process to help ensure that this improvement continued and was sustained.

The five questions we ask about services and what we found

We always ask the following five questions of services.

Is the service effective?

We found that action had been taken to improve the effectiveness of the service. The provider had taken appropriate measures to assess people's capacity to make decisions in line with the Mental Capacity Act (2005) and provided training for all staff regarding their responsibilities under the Act.

We could not improve the rating for effective from Requires Improvement because to do so requires consistent good practice over time. We will check this during our next planned comprehensive inspection.

Requires Improvement ●

Is the service responsive?

The service was responsive. We found that action had been taken to improve the quality of care plans and ensure that these reflected care that had been carried out.

The provider had implemented a system of audit to ensure that this improvement was sustained.

Good ●

Is the service well-led?

The service was well-led.

We found that action had been taken to implement a suitable system of audits to ensure that standards were improved, and future checks were scheduled to help ensure this was maintained.

Good ●

Shebadan Domiciliary Care Service (Sonali Gardens)

Detailed findings

Background to this inspection

We undertook an announced focused inspection of Shebadan Domiciliary Care (Sonali Gardens) on 11 November 2016. This inspection was done to check that improvements to meet legal requirements planned by the provider after our inspection on 16 and 20 June 2016 had been made. We inspected the service against three of the five questions we ask about services: is the service effective, is the service responsive and is the service well-led? This is because the service was not meeting some legal requirements.

The inspection was undertaken by a single inspector. During our inspection we spoke with the registered manager, the team leader, deputy team leader and three care workers. We reviewed the care records of six people and audits carried out by managers.

Is the service effective?

Our findings

At our last inspection in June 2016 we found that the provider had not taken adequate steps to assess people's capacity to make decisions under the Mental Capacity Act (2005) (MCA) and demonstrate that it was working in people's best interests where they lacked capacity. In some cases consent had not been obtained for care from the appropriate person, and staff lacked an awareness of their responsibilities under the Act.

At this inspection, we saw that the provider was now meeting this requirement.

The Act provides a legal framework for making particular decisions on behalf of people who may lack the mental capacity to do so for themselves. The Act requires that as far as possible people make their own decisions and are helped to do so when needed. When they lack mental capacity to take particular decisions, any made on their behalf must be in their best interests and as least restrictive as possible.

The provider had carried out training for the entire staff team on the MCA. This was delivered by the managers in both English and Bengali. Care workers told us that this helped them better understand their responsibilities. One care worker told us "It's a lot easier for us when you don't need a translator." All care workers we spoke with understood their responsibilities to protect people's rights and obtain consent from people.

The registered manager told us he had identified 14 people where family members had signed on behalf of the person receiving care and had taken steps to address this. We saw that where appropriate people had signed their care plans. Where appropriate, the provider had recorded where they had assessed people's capacity to consent to their care, and records showed that they had had discussions with family members and other professionals to demonstrate they were working in the person's best interests. In one case, the provider had assessed the person's capacity and invited a relative to sign on their behalf. This was not consistent with the MCA, however the provider could demonstrate they had met with the family to ensure they were working in the person's best interests, which meant the provider was still fulfilling its responsibilities under the Act.

Although we found that concerns had been addressed, systems of planned audits did not directly address consent, and sufficient time had not passed to assure us that these improvements could be sustained. Therefore we have been unable to change the rating for this question. A further inspection will be planned to check if improvements have been sustained.

Is the service responsive?

Our findings

At our last inspection in June 2016 we found that the provider was not adequately planning people's care. This was because care plans did not accurately reflect people's current care needs and the care that was being delivered.

At this inspection we found that the provider was now meeting this regulation.

Care files had been revised and old copies of care plans had been archived. Plans had been updated where necessary and logs of care delivered reflected accurately what was required on the care plan. This included whether people needed support with meals, personal care and changing of incontinence pads, and we saw that people's agreed care hours were being provided. Care workers we spoke with told us that the improved plans were helpful for them.

The provider had implemented an audit system for checking that support plans were accurate and that care had been delivered in line with this. Audits had been scheduled quarterly over a 12 month period.

We have improved the rating for this question from requires improvement to good because we found that concerns had been addressed and audit systems were in place to ensure these improvements were sustainable. A further inspection will be planned to check if improvements have been sustained.

Is the service well-led?

Our findings

At our last inspection in June 2016 we found that the provider was not always ensuring high quality care. This was because managers were not carrying out regular audits to ensure care was delivered appropriately.

At this inspection we found that the provider was now meeting this regulation.

Managers had implemented a programme for carrying out checks on the service. These were scheduled to take place quarterly over a 12 month period. As part of this, the manager checked the support plan, risk assessment, task summary, log sheets and medicines records. The manager also verified whether the person had received a home visit, whether there had been any complaints or safeguarding concerns and whether the person had received a user satisfaction survey. Where issues were identified, managers recorded what actions needed to be taken with a clear timescale for improvement. These audits did not check whether appropriate consent had been obtained, but had been effective in bringing about improvement.

Care workers we spoke with told us that the previous inspection report had been discussed in team meetings and supervisions. One care worker told us "They brought a copy of the report and explained what needed to change." Another care worker said "[My line manager] checks regularly, he visits our service user for how we provide the service."

We noted that the provider was not meeting their requirement to display their ratings from their previous inspection; however this was resolved during the course of our inspection.

We have improved the rating for this question from requires improvement to good because we found that concerns had been addressed and measures were in place to ensure that appropriate checks would continue. A further inspection will be planned to check if improvements have been sustained.