

Wirral Mind

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Inspection summary

CQC carried out an inspection of this care service on 20 October 2016 and 21 October 2016. This is a summary of what we found.

Overall rating for this service

Requires Improvement 

Is the service safe?

Requires Improvement 

Is the service effective?

Good 

Is the service caring?

Good 

Is the service responsive?

Good 

Is the service well-led?

Requires Improvement 

The inspection was announced and took place on the 20 and 21 October 2016. At the last inspection in February 2014 the service was found to be meeting all the outcomes inspected.

Wirral Mind is a domiciliary care service that provides care and support to people with learning disabilities and mental health needs. Support is provided in the community and within supported living services to people who live in the Wirral area. At the time of the inspection there were sixteen people being supported by the service.

The manager was registered with the CQC and had been in post since September 2011. 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.

During the inspection we found positive examples relating to the care being provided to people. However we also identified some aspects of the service that needed improvement.

Information relating to the safe recruitment of staff was not available after some of this information had been deleted due to a problem with the IT system. The registered provider had identified 27 staff whose references had been deleted, and we identified an additional one. This impacted upon

the registered provider's ability to demonstrate safe recruitment practices. Whilst efforts had been made to prevent this from occurring again in the future, this also highlighted issues around the safe storage of information.

You can see what action we told the provider to take at the back of the full version of the report.

The registered provider was not always aware of their duties with regards to the Mental Capacity Act 2005 (MCA). Mental capacity assessments had not been completed for people using the service, in accordance with the law. We have made a recommendation around the use of the MCA within the service.

Full-time staff had received training in key areas to ensure that they had the skills and knowledge needed to carry out their roles. This included training in the MCA, safeguarding and first aid. We identified that a system was needed to ensure that bank staff had the necessary skills and knowledge. Bank staff are temporary staff who are used on an 'ad hoc' basis to fill gaps where there is a shortfall in staff. The registered manager confirmed that this would be put in place, and following the inspection we received confirmation to show that this was being done.

People were protected from the risk of abuse. Staff were aware of the different types of abuse and how to report any concerns that they may have. The registered provider had a safeguarding policy and procedure in place which staff were aware of.

A record of accidents and incidents was maintained, and records showed action had been taken to prevent incidents from happening again in the future. For example one person had been referred to the occupational therapist so that the necessary equipment could be put into place to support them. This ensured that people's wellbeing was maintained.

People were supported to take their medicines as prescribed. Staff signed medication administration records (MARs) to show that these had been given as required. Staff had also supported people with accessing support from health professionals when they were unwell. This protected people from the risk of poor health.

People were supported to eat and drink sufficient amounts to meet their dietary requirements. Their care records contained details around any special dietary requirements they may have. Staff were aware of people's dietary needs and ensured that these were provided for.

Staff were kind and caring towards people. People's family members commented they felt their relatives were being well looked after by staff and we saw examples where positive relationships had been developed. Staff worked to promote people's dignity and acted to relieve any discomfort or distress when it arose.

People's care records contained detailed and personalised information regarding their care needs. This was reviewed on a regular basis which ensured that staff had access to up-to-date, relevant information about how they should support people.

People were protected from the risk of social isolation. There were activities available to people and their family members commented that they were "always out". Staff had time to spend with people, and we saw examples of them doing activities such as painting, or sitting and talking to people.

There were audit systems in place to ensure that the quality of the service was being maintained.

Audits of medicines, people's care records, accidents and incidents and people's finances were carried out regularly to ensure that there were no issues. Where issues were identified actions were taken to remedy these and prevent them from occurring again in the future.

You can ask your care service for the full report, or find it on our website at www.cqc.org.uk or by telephoning **03000 616161**