Inspection Report

We are the regulator: *Our job is to check whether hospitals, care homes and care services are meeting essential standards.*

Complete Care Services Nelson

13 Market Square, Nelson, BB9 7LP

Tel: 01282447710

Date of Inspections: 15 January 2014
14 January 2014

Date of Publication: February 2014

We inspected the following standards as part of a routine inspection. This is what we found:

Respecting and involving people who use services	✓ Met this standard
Care and welfare of people who use services	✓ Met this standard
Management of medicines	✓ Met this standard
Requirements relating to workers	✓ Met this standard
Complaints	✓ Met this standard

Details about this location

Registered Provider	Mr Alastair Buchanan MacDonald
Overview of the service	Complete Care Services provides a domiciliary care service offering personal care and support for people living in their own homes.
Type of service	Domiciliary care service
Regulated activity	Personal care

Contents

When you read this report, you may find it useful to read the sections towards the back called 'About CQC inspections' and 'How we define our judgements'.

	Page
Summary of this inspection:	
Why we carried out this inspection	4
How we carried out this inspection	4
What people told us and what we found	4
More information about the provider	4
Our judgements for each standard inspected:	
Respecting and involving people who use services	6
Care and welfare of people who use services	7
Management of medicines	9
Requirements relating to workers	10
Complaints	11
About CQC Inspections	12
How we define our judgements	13
Glossary of terms we use in this report	15
Contact us	17

Summary of this inspection

Why we carried out this inspection

This was a routine inspection to check that essential standards of quality and safety referred to on the front page were being met. We sometimes describe this as a scheduled inspection.

This was an unannounced inspection.

How we carried out this inspection

We looked at the personal care or treatment records of people who use the service, carried out a visit on 14 January 2014 and 15 January 2014, checked how people were cared for at each stage of their treatment and care and talked with people who use the service. We talked with carers and / or family members and talked with staff.

What people told us and what we found

Three people using the service and three relatives told us they were satisfied with the way the agency delivered their care and support. People said they had a good relationship with members of staff and confirmed the staff took a flexible approach to their work. One person told us, "They are very good at their job and go out of their way to help".

People were involved in their assessment of needs and the development of their care plan. People's views were taken into account and they were therefore able to influence the delivery of their service.

People were generally satisfied with the support they received with their medication. Appropriate records were maintained of the administration of medication.

Appropriate checks were undertaken when new staff started working for the service.

There were systems in place to monitor and assess the quality of the service. People were given the opportunity to complete an annual customer satisfaction questionnaire. People were aware of how they could raise any concerns and suitable arrangements were in place to respond to any complaints. None of the people spoken with had any concerns about the service.

You can see our judgements on the front page of this report.

More information about the provider

Please see our website www.cqc.org.uk for more information, including our most recent judgements against the essential standards. You can contact us using the telephone number on the back of the report if you have additional questions.

There is a glossary at the back of this report which has definitions for words and phrases we use in the report.

Our judgements for each standard inspected

Respecting and involving people who use services ✓ Met this standard

People should be treated with respect, involved in discussions about their care and treatment and able to influence how the service is run

Our judgement

The provider was meeting this standard.

People's views and experiences were taken into account in the way the service was provided and delivered in relation to their care.

Reasons for our judgement

We spoke with three people using the service and three relatives and listened to their experiences of the care and support provided by the agency. We found all people spoken with were happy with the care they received. One person told us, "I have been very satisfied and pleased with everything, the staff are always so helpful" and another person commented, "They are very helpful, I really look forward to them coming. They are invariably on time and I mostly get the same carers."

People told us they were able to express their views and were involved in decisions about their care. People using the service and their relatives informed us they had fully participated in the assessment and care planning process and they had discussed their care needs at regular intervals. This meant people were directly involved with the provision of their care and support.

People were allocated a staff team to support them and staff were only changed for personal or operational reasons when necessary. This practice ensured staff were familiar with people's needs and they were able to respond flexibly to their needs and preferences on a day to day basis. People spoken with were complimentary about the care workers and said they had a good relationship with them. They also told us the staff were punctual and reliable and they had never missed a visit.

People told us the staff respected their rights to privacy and dignity and helped them maintain their independence. People were asked about the quality of the service on an on-going basis and all people spoken with said they felt comfortable expressing their views. We saw evidence to demonstrate that people had been invited to complete a customer satisfaction questionnaire during our visit.

People were given appropriate information about their care and support. Before people started using the service they were provided with detailed information, which included a service user's guide. This meant people knew what to expect from the service.

Care and welfare of people who use services ✓ Met this standard

People should get safe and appropriate care that meets their needs and supports their rights

Our judgement

The provider was meeting this standard.

Care and treatment was planned and delivered in a way that was intended to ensure people's safety and welfare.

Reasons for our judgement

People using the service told us the help and support provided by the staff was appropriate to meet their needs and in line with their personal preferences. People told us the staff were flexible and asked them how they wished their tasks to be carried out on each visit. One person told us, "They always ask if there is anything else I want doing before they leave". Relatives spoken with were also complimentary about the service, one relative told us, "They have been absolutely great."

People spoken with confirmed they were involved in the initial assessment of needs and received the care and support they needed based on this. The assessment process was designed to consider all aspects of people's needs, individual circumstances and potential risks. This meant staff had access to clear information about people's needs and people using the service had input into the planning of their care. People confirmed they had been consulted about their care needs and staff had discussed their care plan with them. People also told us the staff were knowledgeable about their needs and things they required help with.

People confirmed their care plans were reflective of current needs and they had participated in the review process. This gave people the opportunity to influence the way their care was planned and delivered. Care plans were reviewed every six months or in line with any changing needs. Risk assessments had been carried out to cover environmental and individual risks, in order to help staff reduce any potential risks to people's safety. We saw completed copies of this documentation on people's files.

We looked at three care plans in detail. We saw that each person had a plan of care which was designed to provide staff with guidance about how best to meet their individual needs and preferences. The plans were written in plain language, were easy to understand and incorporated all areas of people's lives. We also noted the plans included information about people's preferences and how they wished their care to be delivered.

The care staff completed daily records, which provided information about people's changing needs and any recurring difficulties. These were kept with the care plan in the person's own home to ensure staff had access to up to date information. A duplicate copy

of the person's plan was also stored securely at the agency's office.

Management of medicines ✓ Met this standard

People should be given the medicines they need when they need them, and in a safe way

Our judgement

The provider was meeting this standard.

People were protected against the risks associated with medicines because the provider had appropriate arrangements in place to manage medicines.

Reasons for our judgement

People told us they were generally satisfied with the support they received with their prescribed medication and confirmed the care staff were competent at this task.

There were policies and procedures relating to medication, which identified the role of the carer and circumstances for assisting with medicines.

From looking at people's care plan documentation we noted there was a full list of people's medication and appropriate records had been maintained for the administration of medication, including the application of external preparations. All records were checked by senior staff when they were returned to the office and during spot checks in people's houses. The records and care plan documentation had been designed to enable staff to access relevant information quickly and included details about the side effects of medication.

Individual risk assessments had been carried out to identify any potential risks in managing people's medication. Risk management strategies had also been drawn up to help staff manage or minimise any risks.

From looking at the staff training records, we could see that all staff completed training on medication and this was updated at regular intervals.

Requirements relating to workers ✓ Met this standard

People should be cared for by staff who are properly qualified and able to do their job

Our judgement

The provider was meeting this standard.

People were cared for, or supported by, suitably qualified, skilled and experienced staff.

Reasons for our judgement

People spoken with made complimentary comments about the staff team and confirmed they carried out their role well and were good at their job. One person told us "They are all helpful, caring and thoughtful" and another person commented, "They are very efficient in their work and appear to be well trained".

There were policies and procedures in place to cover the selection and recruitment of new staff, which included an equal opportunities policy.During the inspection, we looked in detail at staff files and from this we could see that the recruitment process included the completion of an application form and an interview. The staff had provided a full employment history and a satisfactory explanation of gaps in employment. Relevant checks such as the Disclosure and Barring Service (DBS) and two written references were received before the staff commenced working with people using the service. There were appropriate arrangements in place for the induction of new staff which included shadowing an experienced member of staff for a minimum number of hours. This enabled the staff member to meet some of the people using the service and become familiar with the agency's policies and procedures. New starters also completed a training programme which included all mandatory training for care workers.

Copies of staffs' training certificates were seen on file and the manager maintained a training matrix in order to monitor and plan future training.

Complaints ✓ Met this standard

People should have their complaints listened to and acted on properly

Our judgement

The provider was meeting this standard.

Comments and complaints people made were responded to appropriately.

Reasons for our judgement

People told us they felt comfortable and safe using the service and they were aware of what to do and who to speak to in the event of a query, concern or complaint. Information about the complaints procedure was included in people's care plan documentation and the service user guide. All people spoken with said they had never had any reason to make a complaint and any queries were responded to immediately when they contacted the manager or office staff.

We saw the agency had a policy about how to deal with complaints and there was a recording system in place for any complaints received, which included details of the investigation, correspondence and the outcome.

An overall log of complaints was maintained so the manager could readily identify any trends or patterns as part of the quality monitoring processes.

About CQC inspections

We are the regulator of health and social care in England.

All providers of regulated health and social care services have a legal responsibility to make sure they are meeting essential standards of quality and safety. These are the standards everyone should be able to expect when they receive care.

The essential standards are described in the Health and Social Care Act 2008 (Regulated Activities) Regulations 2010 and the Care Quality Commission (Registration) Regulations 2009. We regulate against these standards, which we sometimes describe as "government standards".

We carry out unannounced inspections of all care homes, acute hospitals and domiciliary care services in England at least once a year to judge whether or not the essential standards are being met. We carry out inspections of other services less often. All of our inspections are unannounced unless there is a good reason to let the provider know we are coming.

There are 16 essential standards that relate most directly to the quality and safety of care and these are grouped into five key areas. When we inspect we could check all or part of any of the 16 standards at any time depending on the individual circumstances of the service. Because of this we often check different standards at different times.

When we inspect, we always visit and we do things like observe how people are cared for, and we talk to people who use the service, to their carers and to staff. We also review information we have gathered about the provider, check the service's records and check whether the right systems and processes are in place.

We focus on whether or not the provider is meeting the standards and we are guided by whether people are experiencing the outcomes they should be able to expect when the standards are being met. By outcomes we mean the impact care has on the health, safety and welfare of people who use the service, and the experience they have whilst receiving it.

Our inspectors judge if any action is required by the provider of the service to improve the standard of care being provided. Where providers are non-compliant with the regulations, we take enforcement action against them. If we require a service to take action, or if we take enforcement action, we re-inspect it before its next routine inspection was due. This could mean we re-inspect a service several times in one year. We also might decide to re-inspect a service if new concerns emerge about it before the next routine inspection.

In between inspections we continually monitor information we have about providers. The information comes from the public, the provider, other organisations, and from care workers.

You can tell us about your experience of this provider on our website.

How we define our judgements

The following pages show our findings and regulatory judgement for each essential standard or part of the standard that we inspected. Our judgements are based on the ongoing review and analysis of the information gathered by CQC about this provider and the evidence collected during this inspection.

We reach one of the following judgements for each essential standard inspected.

✓ **Met this standard**	This means that the standard was being met in that the provider was compliant with the regulation. If we find that standards were met, we take no regulatory action but we may make comments that may be useful to the provider and to the public about minor improvements that could be made.
✖ **Action needed**	This means that the standard was not being met in that the provider was non-compliant with the regulation. We may have set a compliance action requiring the provider to produce a report setting out how and by when changes will be made to make sure they comply with the standard. We monitor the implementation of action plans in these reports and, if necessary, take further action. We may have identified a breach of a regulation which is more serious, and we will make sure action is taken. We will report on this when it is complete.
✖ **Enforcement action taken**	If the breach of the regulation was more serious, or there have been several or continual breaches, we have a range of actions we take using the criminal and/or civil procedures in the Health and Social Care Act 2008 and relevant regulations. These enforcement powers include issuing a warning notice; restricting or suspending the services a provider can offer, or the number of people it can care for; issuing fines and formal cautions; in extreme cases, cancelling a provider or managers registration or prosecuting a manager or provider. These enforcement powers are set out in law and mean that we can take swift, targeted action where services are failing people.

How we define our judgements (continued)

Where we find non-compliance with a regulation (or part of a regulation), we state which part of the regulation has been breached. Only where there is non compliance with one or more of Regulations 9-24 of the Regulated Activity Regulations, will our report include a judgement about the level of impact on people who use the service (and others, if appropriate to the regulation). This could be a minor, moderate or major impact.

Minor impact - people who use the service experienced poor care that had an impact on their health, safety or welfare or there was a risk of this happening. The impact was not significant and the matter could be managed or resolved quickly.

Moderate impact - people who use the service experienced poor care that had a significant effect on their health, safety or welfare or there was a risk of this happening. The matter may need to be resolved quickly.

Major impact - people who use the service experienced poor care that had a serious current or long term impact on their health, safety and welfare, or there was a risk of this happening. The matter needs to be resolved quickly

We decide the most appropriate action to take to ensure that the necessary changes are made. We always follow up to check whether action has been taken to meet the standards.

Glossary of terms we use in this report

Essential standard

The essential standards of quality and safety are described in our *Guidance about compliance: Essential standards of quality and safety*. They consist of a significant number of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2010 and the Care Quality Commission (Registration) Regulations 2009. These regulations describe the essential standards of quality and safety that people who use health and adult social care services have a right to expect. A full list of the standards can be found within the *Guidance about compliance*. The 16 essential standards are:

Respecting and involving people who use services - Outcome 1 (Regulation 17)
Consent to care and treatment - Outcome 2 (Regulation 18)
Care and welfare of people who use services - Outcome 4 (Regulation 9)
Meeting Nutritional Needs - Outcome 5 (Regulation 14)
Cooperating with other providers - Outcome 6 (Regulation 24)
Safeguarding people who use services from abuse - Outcome 7 (Regulation 11)
Cleanliness and infection control - Outcome 8 (Regulation 12)
Management of medicines - Outcome 9 (Regulation 13)
Safety and suitability of premises - Outcome 10 (Regulation 15)
Safety, availability and suitability of equipment - Outcome 11 (Regulation 16)
Requirements relating to workers - Outcome 12 (Regulation 21)
Staffing - Outcome 13 (Regulation 22)
Supporting Staff - Outcome 14 (Regulation 23)
Assessing and monitoring the quality of service provision - Outcome 16 (Regulation 10)
Complaints - Outcome 17 (Regulation 19)
Records - Outcome 21 (Regulation 20)

Regulated activity

These are prescribed activities related to care and treatment that require registration with CQC. These are set out in legislation, and reflect the services provided.

Glossary of terms we use in this report (continued)

(Registered) Provider

There are several legal terms relating to the providers of services. These include registered person, service provider and registered manager. The term 'provider' means anyone with a legal responsibility for ensuring that the requirements of the law are carried out. On our website we often refer to providers as a 'service'.

Regulations

We regulate against the Health and Social Care Act 2008 (Regulated Activities) Regulations 2010 and the Care Quality Commission (Registration) Regulations 2009.

Responsive inspection

This is carried out at any time in relation to identified concerns.

Routine inspection

This is planned and could occur at any time. We sometimes describe this as a scheduled inspection.

Themed inspection

This is targeted to look at specific standards, sectors or types of care.

Contact us

Phone:	03000 616161
Email:	enquiries@cqc.org.uk
Write to us at:	Care Quality Commission Citygate Gallowgate Newcastle upon Tyne NE1 4PA
Website:	www.cqc.org.uk

Copyright Copyright © (2011) Care Quality Commission (CQC). This publication may be reproduced in whole or in part, free of charge, in any format or medium provided that it is not used for commercial gain. This consent is subject to the material being reproduced accurately and on proviso that it is not used in a derogatory manner or misleading context. The material should be acknowledged as CQC copyright, with the title and date of publication of the document specified.