Inspection Report

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

Home Instead Senior Care

First Floor, 6 Fishergate Court, Preston, PR1 8QF Tel: 01772724111

Date of Inspection: 02 August 2013 Date of Publication: August 2013

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

Care and welfare of people who use services	✓ Met this standard
Safety and suitability of premises	✓ Met this standard
Staffing	✓ Met this standard
Assessing and monitoring the quality of service provision	✓ Met this standard
Complaints	✓ Met this standard

Details about this location

Registered Provider	M.BEKIR LIMITED
Registered Manager	Mrs. Sandra O'Keefe
Overview of the service	Home Instead is an independently owned and operated franchise home care agency. It provides support and companionship for people living in their own homes, who need help with personal care, domestic duties or are just in need of some company. The agency office is conveniently situated in Preston City Centre, adjacent to the railway station and is also easily accessible by bus or car.
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:	
Care and welfare of people who use services	6
Safety and suitability of premises	8
Staffing	9
Assessing and monitoring the quality of service provision	10
Complaints	12
About CQC Inspections	13
How we define our judgements	14
Glossary of terms we use in this report	16
Contact us	18

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 2 August 2013, 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, talked with staff and reviewed information given to us by the provider.

What people told us and what we found

We spoke with the provider, the registered manager, three people using the agency and three members of staff.

People who use the service told us they were very happy with the support they received. People told us they had received a visit from the manager before the service commenced and had frequent contact since then. They told us that they had been involved in planning care and support they wanted and how and when this was to be carried out.

People said that staff always provided the best possible service to them. One person said, "They are always willing to change days or times to fit in with us."

According to the people we spoke with, the same staff provided their care almost all the time. They said staff were competent, arrived on time, stayed for their allotted time and were pleasant and helpful.

People knew how to complain and were confident they would be listened to. They and the staff team told us they felt well supported.

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

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.

People experienced care, treatment and support that met their needs and protected their rights.

Reasons for our judgement

We talked with three people who received care and support from the agency. They were very happy with the service they received. People spoken with said the staff were helpful and friendly and they provided support as the person wanted it. One person said that the staff were the best they had ever had, far better than the support they had received with a previous agency. People said that staff always provided the best possible service to them. One person said, "They are always willing to change days or times to fit in with us." Another person told us, "They are brilliant. Nothing is too much trouble."

The people who received support from the agency are either on direct payments or are private clients who pay for their own support. People spoken with said they felt this had helped them find the best agency. One person said, "I moved from another agency because they just turned up when they wanted. Home Instead staff always turn up and are always on time. Another person said, "I wish I had gone to them sooner, no more worries about who will arrive."

We looked at three people's care records. There was an informative assessment carried out before the agency agreed to provide care and support. This gave staff the information they needed to know if they could meet the person's needs and to start to support the person effectively.

Care plans were in place for each person. A pen picture was provided by the person and their family. This gave staff information about the person's life and their likes and dislikes. This showed that the agency was taking account of individual needs.

There was information about the care and support people wanted and how and when this was to be carried out. People we spoke with said they had copies of their care plans in their home and that staff wrote down the care and support they gave them. They said they were kept in their home for a while and then moved to the agency's office.

There were also risk assessments in place. These related to the individual service user

and to their home environment or place the care and support was carried out. This ensured the safety of the individual service user and of staff.

We saw older visit records which had been returned to the office. People we spoke with confirmed they were fully involved in the decision making about the care and support they received. People also told us that they were able to make changes to this care and support as and when they wanted.

We spoke with several members of staff. They were enthusiastic about providing high quality person centred care and said they were able to do this with Home Instead. They provided examples of where changes in care had been made at the request of the people they were supporting.

Safety and suitability of premises ✓ Met this standard

People should be cared for in safe and accessible surroundings that support their health and welfare

Our judgement

The provider was meeting this standard.

People who used the service, staff and visitors were protected against the risks of unsafe or unsuitable premises.

Reasons for our judgement

The office base was in a building close to Preston town centre and the railway station. The office was situated on the first floor of the building and as such was not accessible to anyone with mobility difficulties. However the manager usually met with service users in their own home. If a service user or member of staff had mobility difficulties the manager told us that they would meet with them at a place convenient to them.

The office space included two large rooms for office and training space, one of which had kitchen space. There was also one disabled access and one other toilet available. Some parking space was available.

The building was comfortable warm, maintained and had appropriate security arrangements making it safe for people who work at or visit the office.

Staffing ✓ Met this standard

There should be enough members of staff to keep people safe and meet their health and welfare needs

Our judgement

The provider was meeting this standard.

There were enough qualified, skilled and experienced staff to meet people's needs.

Reasons for our judgement

We talked with the manager and provider about staffing. They told us that they always tried to match staff with the service user, so that the support was pleasant and enjoyable for people. They told us that they made sure that care visits were long enough to give staff sufficient time to support people without rushing through tasks.

We talked with people using the agency and they all said that staff had enough time to support them well. We also talked with staff who confirmed that they had time to carry out care and support safely and without undue haste. Through these conversations and the care logs we saw there were enough staff to assist people as they wanted.

We asked if people had the same staff supporting them. People said that they had the same staff unless there was an emergency and even then they would know the person.

People told us that staff arrived on time and stayed for their allotted time. One person said, "On the rare occasion that staff might be a few minutes late, she lets me know." People also told us that staff were polite, kind and considerate and dressed appropriately for the activity.

Service users felt that staff were skilled and knowledgeable and provided excellent care. Staff told us that the induction and training they received was well thought out and provided them with new skills.

Assessing and monitoring the quality of service provision ✓ Met this standard

The service should have quality checking systems to manage risks and assure the health, welfare and safety of people who receive care

Our judgement

The provider was meeting this standard.

Systems were in place for monitoring the quality of the service people receive.

Reasons for our judgement

Senior staff told us that systems were in place for quality assurance to help determine the quality of the service offered. Records reviewed showed that there were frequent, formal, recorded audits of the home. These were carried out by the manager and provider of the franchise as well as by the national representatives of the Home Instead Company. These included audits of care, health and safety checks, record keeping, and management.

The management team met regularly to discuss how well the minuted meeting to discuss these plans and to evaluate the manager's performance. The manager carried out regular formal supervision and appraisal with the staff team.

Senior staff said they talked with people using the agency and their families regularly. They told us they checked if they were satisfied with the care provided and if they had ideas for any changes. People spoken with said that staff listened to them and would make changes if they wanted them.

The manager visited service users when staff were supporting them. She carried out these visits unannounced to observe how well staff were supporting people. People using the agency and their families were also asked to complete satisfaction surveys. These measures helped gain the views of people about the service provided.

People told us they were well supported by Home Instead managers and staff. They said they could speak to any of the staff and they would listen and take appropriate action. They said the manager was always helpful. One person said, "I could contact her anytime and she would help." Another person said, "The manager checks with me that everything is going alright."

The manager told us that where there had been an incident or accident this was monitored and responded to. The team reflected on whether it could have been managed more effectively or if lessons could be learnt.

Members of staff spoken with told us that the manager was approachable and listened to them. They told us that if they had any concerns about the people they were supporting or needed advice, senior staff were always available to help. One member of staff said of the

manager, "She always makes time to listen to you and talk through things."

Complaints ✓ Met this standard

People should have their complaints listened to and acted on properly

Our judgement

The provider was meeting this standard.

There was an effective complaints system available. Comments and complaints people made were responded to appropriately.

Reasons for our judgement

We looked at the complaint policy and procedure and checked if people had access to it. The procedure was up to date and clearly set out how to manage any complaints. We asked people if they knew how to complain to if they were unhappy with their care. The people we spoke with said they knew how to make a complaint if they wanted to, One person told us "I would speak to the manager if I wasn't happy with anything, but I have no reason to. 'Home Instead' are marvellous." Another person said, "There was something and I told the manager. She sorted it out quickly. I am very happy with them. "

The manager informed us that there had been one complaint since the last inspection. This was a recent complaint. She showed us the documentation relating to this. It had related to a possible safeguarding concern. On being told, the manager had immediately alerted the local authority safeguarding team. She suspended the member of staff the complaint related to. The allegation was investigated and appropriate action taken. All actions were documented and the service user was supported throughout the process. The service user was kept informed of relevant information. When talking with us the service user told us that they were satisfied with how the complaint was dealt with.

Although the manager had acted quickly and appropriately to safeguard the service user and to inform the local authority safeguarding team, she had not notified CQC of the issue. This was the first time she had dealt with such a situation and misunderstood the process for informing CQC. This issue had occurred shortly before the inspection. The manager sent a notification regarding the concern to CQC during the inspection.

The manager told us that she had frequent contact with service users and regularly checked with them that they were satisfied with their care and support. She said they were encouraged to discuss any issues as they occurred. This was borne out during the inspection as she received some calls from service users. This meant any minor concerns or support changes were quickly resolved.

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

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