Inspection Report

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

Abacus Homecare

16 Shelley Rise, Dukinfield, SK16 5EF

Tel: 01613388250

Date of Inspection: 06 December 2012

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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
Safeguarding people who use services from abuse	✓ Met this standard
Requirements relating to workers	✓ Met this standard
Complaints	✓ Met this standard

Details about this location

Registered Provider	Mr Lee Sheridan and Mrs Michelle Sheridan
Registered Manager	Mrs. Michelle Sheridan
Overview of the service	Abacus Homecare is registered with us (the Care Quality Commission) to provide personal care to people 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	5
Our judgements for each standard inspected:	
Respecting and involving people who use services	6
Care and welfare of people who use services	7
Safeguarding people who use services from abuse	9
Requirements relating to workers	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 6 December 2012, talked with people who use the service and talked with carers and / or family members. We talked with staff.

What people told us and what we found

We spoke with people who used the agency. Comments made by people included:

"Abacas is a lovely caring service. I always get the same carer except if there is a very good reason. The staff really help me with anything that is important to me. When they come, they are always on time and do over and above what is required of them. I have noticed that the manager or one of her staff visit to ask if I am happy with the service and to check that the girls (staff) are working well."

"I am very satisfied. I have the same carers. I really feel involved, they leave the care book here and I can see what they have been writing."

One relative of a person receiving care told us, "They (the staff) keep us involved and contact us if there is a change in care needs. We work well together and I have full confidence in the care staff and the agency. I would have no hesitation in contacting the office if I had a problem, I know they would do their best to sort out any problems quickly. Luckily this has not been necessary so far."

We saw that systems were in place to carry out 'spot checks' on staff to monitor their performance. We saw that staff training was prioritised by the agency and all the staff we spoke with told us there were plenty of training and development opportunities. This means that the provider was taking appropriate steps to ensure that staff were suitably qualified and had the right skill to meet the needs of the people they provided care and support to.

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 privacy, dignity and independence were respected. 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

When we spoke with people who used the services of Abacus Homecare all the comments were consistent about the high quality of care and support they received from care staff.

People told us that before their care was provided they were visited by the manager or a senior member of staff and they were given the opportunity to discuss their care, treatment and support options.

The local authority commissioning the care package provided the service with a detailed assessment of care needs and the required intervention to meet those needs. The manager told us that this information was used together with the person's prefered requirements to develop a care support plan.

People told us that they felt very involved with their care and support plan. One person told us, "The care staff are brilliant. They are always the same girls (staff) and they really do listen to me. I know do their best to help me in a way that suits my needs. I can't imagine being without the carers."

When we spoke with carers they told us that they had been trained to provide care and support to people in a way that matched individual choices and preferences. They said that they had been made aware of people's right to make choices about how they wanted their care and treatment provided.

There was a range of information available for people to view which told them about the care agency and what they could expect to receive from them. The information was comprehensive and provided people with information about staff and the training they received and information on how to raise a concern or a complaint. People were also informed about the key person to contact if they needed to speak with someone about their support package.

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

All the people we spoke with told us they were very happy with the care and support they received from the service. Comments from people included:

"The service is very flexible and fits in with my needs. I feel confident with the staff and they always seem to know what they are doing."

"They always involve me by asking me what I want and if there's anything else I think I need."

"The girls(staff) really know me. I think this is because I always have the same carers coming in, there's none of this chopping and changing."

"There is a care plan in my home. The staff look at it and write in it every time they come. If they think there's a problem, they phone the office to report it. This makes me feel safe, knowing people are making sure I am alright."

We looked at some care/support plans when we visited the offices of the agency. Records contained all relevant documentation including a copy of the local authority's care need assessment and care plan. Records contained the relevant information to assist staff in providing appropriate care and support to the individual.

We noted that some care plans contained more detail than others, and we were told that all plans were currently under review. We saw a sample of the new formats, which were in greater detail and focused on a person centred approach which showed the consultation process and how the individual had been encouraged to make a contribution to the care planning. This documentation was gradually being introduced for all people who use the service. This will mean that there should be greater consistency in the quality of care plans.

There was evidence to show that care plans were regularly reviewed and when changes in need were identified, the care plan was amended accordingly. There was evidence to show that the views of people using the service were sought and demonstrated that the agency prioritised this process in order to gain the feedback from people to further develop

service delivery.

Staff we spoke with told us that the care plans provided sufficient information to enable them to support people appropriately and that any concerns they raised with managers about a person using the service were responded to appropriately and in a timely way.

Safeguarding people who use services from abuse ✓ Met this standard

People should be protected from abuse and staff should respect their human rights

Our judgement

The provider was meeting this standard.

People who use the service were protected from the risk of abuse, because the provider had taken reasonable steps to identify the possibility of abuse and prevent abuse from happening.

Reasons for our judgement

The service had systems in place for recording financial transactions which were undertaken on behalf of people using the service. When we spoke with staff they demonstrated a good understanding of safeguarding procedures and were able to tell us the correct procedure to follow in the event of any allegation of abuse.

We saw evidence that staff had received Safeguarding Adults training and we were told that they received refresher training on this topic annually.

When we spoke to people using the service they told us they felt safe and confident in the abilities of their carer. They also told us that if they had any concerns they felt confident in ringing the office to raise these concerns with the management.

The service had access to the local authority procedures and guidelines for Safeguarding Adults. The service had a record of all safeguarding incidents which detailed the concern and provided information about how it had been managed. We saw from the information available that the service had followed local procedures appropriately and referred incidents to the local authority safeguarding team. The service was aware that all incidents of safeguarding must be reported to the Care Quality Commission.

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

We spoke with a number of people using the services of Abacus homecare and all of them were positive about the staff team and the way in which staff provided support and care. One person said, "The staff are really caring. nothing is too much trouble for them. I can't say enough about how well they treat me".

We randomly selected three staff files to check that the appropriate documentation was on file and to look at training records. All files contained the relevant documentation which included a Criminal Record Bureau (CRB) check, two written references, an employment history and interview records. We could see from the information that all staff had received an induction prior to commencing work and had spent time 'shadowing' a more experienced member of staff before working alone. Training records showed that staff had received training relevant to their role.

The manager told us that part of her role was to deliver some 'in house' training. Staff were able to access both external and internal training.The manager told us that they had just appointed a training officer who will have responsibility for the induction of all new staff, the 'spot' monitoring of staff performance and 'shadowing' all new carers to ensure they work in line with company policy and procedures and in accordance with the care plan. There are plans that this training officer will attend a 'train the trainer' course and that she will eventually deliver some of the 'in house training'.

When we spoke with staff they told us that they had received a full induction and that their training and development needs were discussed in one to one supervision sessions and through staff appraisals. One member of staff told us that if she felt she had a training need, she would discuss this with the manager. She went on to say that the manager was very receptive to any requests for training and responded in a timely manner to arrange courses and training for staff.

There were records in place to show that 'spot checks' took place. This is when a manager visits a member of staff whilst they are carrying out their duties and assesses their work performance. This was verified by people using the service and the staff themselves. One person using the service said, It's good to know the staff get support and that checks take place to make sure standards stay high."

The 'spot checks' covered an audit of service delivery including key aspects of care practice such as communication, quality of care plan recordings, using equipment and time keeping.

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

When we contacted people who use the services of Abacus homecare they told us that they felt confident to raise any issues of concern. People told us they had been given information about the service and this included details about how to raise an issue of concern. They also told us that the manager of the service spoke with them regularly to seek their views about how their care was being delivered, and whether they were happy with the care and support they received.

We looked at the information provided to people using the service. This included a service user guide which provided clear information on how to make a complaint, how it would be dealt with and the timescales for providing a response. It also gave people information about other services who could provide assistance if they were not happy with the service provided by Abacus Homecare.

The information stated that all minor complaints would be dealt with and resolved immediately if possible. It stated that all other complaints would be resolved within 10 working days.

The staff we spoke with were very clear about what to do if a person raised an issue or concern. They told us they would report it to the manager or senior staff.

We looked at the complaints record and none of the complaints recorded were of a major concern. The recordings made by the agency included an in depth record of the nature of the complaint and the response to the concern. This showed us that all concerns and complaints were taken seriously and appropriate action was taken.

At the time of this inspection the Care Quality Commission had not received any complaints about this service.

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 dentists and other services at least once every two years. 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 but we always inspect at least one standard from each of the five key areas every year. We may check fewer key areas in the case of dentists and some other services.

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. We make a judgement about the level of impact on people who use the service (and others, if appropriate to the regulation) from the breach. 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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