

Review of compliance

Nayland Care Agency Limited
Nayland Care Agency Limited - 170 Ranelagh Road

Region:	East
Location address:	170 Ranelagh Road Ipswich Suffolk IP2 0AB
Type of service:	Domiciliary care service
Date of Publication:	August 2011
Overview of the service:	Nayland Care Agency is registered to provide a domiciliary service of personal care. The service is mainly provided to older people and those with a learning disability.

Summary of our findings for the essential standards of quality and safety

Our current overall judgement

Nayland Care Agency Limited - 170 Ranelagh Road was meeting all the essential standards of quality and safety.

The summary below describes why we carried out this review, what we found and any action required.

Why we carried out this review

We carried out this review as part of our routine schedule of planned reviews.

How we carried out this review

We reviewed all the information we hold about this provider and reviewed information from stakeholders.

What people told us

People told us that overall they were satisfied with the service provided by the agency. All of them stressed how efficient, friendly and competent the care workers were. One person said they were they were the best care workers they had experienced. Several people would like there to be more continuity of care workers with fewer changes of personnel. A few people commented that the times the care workers arrived did not always fall within the range set in the care plan. They asked to be phoned if there was to be a significant delay. However many more said their carer workers always arrived on time. All the users who replied to the agency's own survey felt that their needs were assessed and reviewed as necessary.

What we found about the standards we reviewed and how well Nayland Care Agency Limited - 170 Ranelagh Road was meeting them

Outcome 01: People should be treated with respect, involved in discussions about their care and treatment and able to influence how the service is run

People who use this service can expect to have their privacy, dignity and independence respected, and have their views taken into account in the way the service is provided and delivered.

Outcome 04: People should get safe and appropriate care that meets their needs and supports their rights

People who use this service can expect to receive effective care and support that meets their needs and protects their rights.

Outcome 07: People should be protected from abuse and staff should respect their human rights

People who use this service can expect to be protected from abuse, or the risk of abuse, and their human rights respected and upheld.

Outcome 12: People should be cared for by staff who are properly qualified and able to do their job

People who use this service can expect to be supported by staff who have been properly recruited and checked to ensure their safety.

Outcome 14: Staff should be properly trained and supervised, and have the chance to develop and improve their skills

People who use this service can expect to be safe and their health and welfare needs met by competent staff.

Outcome 16: The service should have quality checking systems to manage risks and assure the health, welfare and safety of people who receive care

People who use this service can expect the provider to monitor and review the service to ensure it is meeting their needs.

Other information

Please see previous reports for more information about previous reviews.

**What we found
for each essential standard of quality
and safety we reviewed**

The following pages detail our findings and our regulatory judgement for each essential standard and outcome that we reviewed, linked to specific regulated activities where appropriate.

We will have reached one of the following judgements for each essential standard.

Compliant means that people who use services are experiencing the outcomes relating to the essential standard.

A **minor concern** means that people who use services are safe but are not always experiencing the outcomes relating to this essential standard.

A **moderate concern** means that people who use services are safe but are not always experiencing the outcomes relating to this essential standard and there is an impact on their health and wellbeing because of this.

A **major concern** means that people who use services are not experiencing the outcomes relating to this essential standard and are not protected from unsafe or inappropriate care, treatment and support.

Where we identify compliance, no further action is taken. Where we have concerns, the most appropriate action is taken to ensure that the necessary improvements are made. Where there are a number of concerns, we may look at them together to decide the level of action to take.

More information about each of the outcomes can be found in the *Guidance about compliance: Essential standards of quality and safety*

Outcome 01: Respecting and involving people who use services

What the outcome says

This is what people who use services should expect.

People who use services:

- * Understand the care, treatment and support choices available to them.
- * Can express their views, so far as they are able to do so, and are involved in making decisions about their care, treatment and support.
- * Have their privacy, dignity and independence respected.
- * Have their views and experiences taken into account in the way the service is provided and delivered.

What we found

Our judgement

The provider is compliant with Outcome 01: Respecting and involving people who use services

Our findings

What people who use the service experienced and told us

People using the service told us that they were satisfied with the care they received. Responses to the recent agency survey of users confirmed that people using the service were treated with respect and felt involved in the support and care they received. One person would have liked the care workers to be more punctual or would have liked a call from the agency to warn them if the delay was going to be considerable. However the person wished to stress that the care workers were excellent and very friendly. Several others however said their care workers were always on time. One said that their relative 'was very pleased with their care and grateful for the help and support given to them to enable them to remain at home'. All the people we spoke with said that they knew how to contact the agency if anything went wrong or they had a concern. The agency's survey noted that almost all those surveyed felt that office managers and staff always dealt appropriately with their concerns and complaints.

Other evidence

The agency's annual quality monitoring report lists some of the aims and objectives of the service to be to respect the rights of service users and afford them a place as a valued person within their own home and to act in such a way that no service user or care workers were discriminated against, to respect and value every service user and

safeguard their right to confidentiality, and to encourage service users to exercise personal choice and promote their input in the full care planning process.

In the 12 months to April 2011, the agency received 15 complaints of which 8 were upheld, 6 were part upheld and 2 were not upheld. The topic of the complaints varied from inconsistent visit times to tasks identified in the care plan not being completed. All complaints were responded to promptly.

Our judgement

People who use this service can expect to have their privacy, dignity and independence respected, and have their views taken into account in the way the service is provided and delivered.

Outcome 04: Care and welfare of people who use services

What the outcome says

This is what people who use services should expect.

People who use services:

* Experience effective, safe and appropriate care, treatment and support that meets their needs and protects their rights.

What we found

Our judgement

The provider is compliant with Outcome 04: Care and welfare of people who use services

Our findings

What people who use the service experienced and told us

The people we spoke with said that the care workers always completed the tasks set out in the care plan, and did so with friendly efficiency. In the agency's survey, all those surveyed were generally happy with the service they received and almost all felt that the care plan reflected their needs.

The Area Supervisor visited 23 people who used the service. Home care records were checked. All records, risk assessments, needs assessments and care plans were found to be clear, accurate and up to date. Entries by staff were detailed, legible and appropriate. Overall people using the service felt that the Agency will make reasonable adjustments where there is a change in their care. Most people agreed that their needs were adequately assessed and regularly re-assessed. 3 people felt their assessments were not up to date. This was quickly addressed by the agency.

The annual report told us that "a risk assessment is carried out on every referral for a request of providing personal care. The person carrying out the risk assessment is appropriately trained to do so. The risk and needs assessment is carried out prior to the first visit by the regular worker. In cases where the service is required urgently the person carrying out the assessment may also carry out the personal care following the assessment. If this is the case the person using the service, their family or representative will be informed before the assessment takes place."

Other evidence

The agency's annual report highlighted that a high proportion of respondents did not have an up to date user guide. New ones were sent to all people using the service in June 2011. The report also noted there had been two missed visits since March 2011

among those people surveyed. There had been none before March 2011. Office systems had been tightened up to try to prevent any further occurrences. The report noted that in one area, there were comments about the lack of continuity of care workers. "The care workers are very good but the continuity and sometimes the timing causes concern." The people we spoke to said the same group of care workers usually visited them unless there was holiday or sickness cover. The agency told us it was taking action to improve the retention of staff in one area to maintain continuity of care workers.

Our judgement

People who use this service can expect to receive effective care and support that meets their needs and protects their rights.

Outcome 07: Safeguarding people who use services from abuse

What the outcome says

This is what people who use services should expect.

People who use services:

* Are protected from abuse, or the risk of abuse, and their human rights are respected and upheld.

What we found

Our judgement

The provider is compliant with Outcome 07: Safeguarding people who use services from abuse

Our findings

What people who use the service experienced and told us

The people we spoke with were satisfied with the service they received and knew how to contact the agency about any concern.

The agency had informed us about a safeguarding meeting they attended because of concern for the safety of the person using the service who was refusing to take their medication. The notes of the strategy meeting showed that the agency had used appropriate measures to support this person, and had implemented the action plan agreed by the meeting.

Other evidence

The agency told us that staff were permitted to start work without a full CRB if an Adult First check gave confirmation that the person was not barred from working with vulnerable adults. The worker would be supervised by an experienced member of staff. All other steps of the recruitment procedure have been followed before the person is allowed to work.

The agency told us in their Provider Compliance Assessment that "people who use the service (with the exception of the staff member that accompanies the new worker and the care coordinator) are not made aware if a worker is given clearance to work on the basis of the Adult First check. The staff member working with the new worker is made aware. The people receiving the care service are not made aware. We will implement a policy where people receiving care, their family or representative will be informed in writing or if the referral is urgent we will do this verbally over the telephone."

The agency confirmed that all staff complete the Safeguarding Vulnerable Adults course as part of the new employee's induction programme which follows the Common Induction Standards of Skills for Care.

Our judgement

People who use this service can expect to be protected from abuse, or the risk of abuse, and their human rights respected and upheld.

Outcome 12: Requirements relating to workers

What the outcome says

This is what people who use services should expect.

People who use services:

* Are safe and their health and welfare needs are met by staff who are fit, appropriately qualified and are physically and mentally able to do their job.

What we found

Our judgement

The provider is compliant with Outcome 12: Requirements relating to workers

Our findings

What people who use the service experienced and told us

The people we spoke with told us that the care workers were very friendly. 'They are excellent.'

Other evidence

The agency described in their Provider Compliance Assessment their procedure for recruiting and checking staff. This included following up any gaps in employment history, obtaining previous employer references, a health questionnaire and a CRB/Adult First check. The agency has a policy on dealing with any physical or mental illness that staff might suffer to ensure they are physically and mentally able to do their job.

Our judgement

People who use this service can expect to be supported by staff who have been properly recruited and checked to ensure their safety.

Outcome 14: Supporting staff

What the outcome says

This is what people who use services should expect.

People who use services:

* Are safe and their health and welfare needs are met by competent staff.

What we found

Our judgement

The provider is compliant with Outcome 14: Supporting staff

Our findings

What people who use the service experienced and told us

People using the service told us that they believed the care workers who supported them were very competent - "the best carers I have had from all the agencies I have dealt with".

Other evidence

The agency told us that new staff received induction before starting work. The Induction programme followed the Common Induction Standards of Skills for Care. All staff had an individual training record. All mandatory training was recorded, monitored and reviewed to ensure that staff kept up to date with skills and knowledge. It was the agency policy that all new workers, even if they were coming from similar work, undergo their own Moving and Handling and medication training due to variations in providers' policies and procedures. Supervision and appraisal were scheduled on a regular basis. Training needs and opportunities were discussed at these meetings. All staff had a regular opportunity to discuss how to meet their personal aspirations and fill any training gaps identified. The Training Manager was suitably qualified to deliver training courses at the agency's training centre which was accredited by the NCFE in all subjects related to social care. Most of the training was delivered by the Training Manager and this was her sole role. 'All training we deliver is subject to audit and inspection from Healthcare Safety Services as part of our accreditation'.

Courses include: Moving and Positioning, Health and Safety, Food Hygiene, Nutrition and Wellbeing, Challenging Behaviour (which includes a dementia module), Infection Control, Emergency First Aid at Work (this course is accredited by Qualsafe, a HSE approved course), Fire Safety, Risk Assessment, Administration of Medication,

Safeguarding Vulnerable Adults. 'We also use training resources from the UKHCA (United Kingdom Home Care Association) in Dementia to offer a more extensive training course for dementia and end of life care'.

In the annual survey all staff strongly agreed that their training needs were met. Out of 44 care staff, 23 have completed NVQ Level 2 with 12 enrolled on it, and six staff with NVQ Level 3 and two staff enrolled on it.

Our judgement

People who use this service can expect to be safe and their health and welfare needs met by competent staff.

Outcome 16: Assessing and monitoring the quality of service provision

What the outcome says

This is what people who use services should expect.

People who use services:

* Benefit from safe quality care, treatment and support, due to effective decision making and the management of risks to their health, welfare and safety.

What we found

Our judgement

The provider is compliant with Outcome 16: Assessing and monitoring the quality of service provision

Our findings

What people who use the service experienced and told us

People who use the service told us that they were satisfied with the service and that if they had any concerns or questions, they knew who to phone.

Other evidence

The agency produces an annual quality monitoring report which includes sending questionnaires to people using the service and to care staff. A sample of people using the service is also visited by a senior manager, who checks that home care records, risk assessments, needs assessments and care plans are clear, accurate and up to date. The survey of June 2011 found that a high proportion of people using the service did not have an up to date service user guide. The agency told us that this has been rectified. There was also one area where staff turnover was higher than other areas which reduced the continuity of care workers to people. The agency described how they were trying to tackle this issue.

As well as issuing a questionnaire, the annual report also looks at complaints and the promptness of action taken on them, an audit of staff records, an audit of care plans, and user files, an audit of the safety and suitability of their premises, and targets for improvements with timescales.

Our judgement

People who use this service can expect the provider to monitor and review the service to ensure it is meeting their needs.

What is a review of compliance?

By law, providers of certain adult social care and health 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 Care Quality Commission (CQC) has written guidance about what people who use services should experience when providers are meeting essential standards, called *Guidance about compliance: Essential standards of quality and safety*.

CQC licenses services if they meet essential standards and will constantly monitor whether they continue to do so. We formally review services when we receive information that is of concern and as a result decide we need to check whether a service is still meeting one or more of the essential standards. We also formally review them at least every two years to check whether a service is meeting all of the essential standards in each of their locations. Our reviews include checking all available information and intelligence we hold about a provider. We may seek further information by contacting people who use services, public representative groups and organisations such as other regulators. We may also ask for further information from the provider and carry out a visit with direct observations of care.

When making our judgements about whether services are meeting essential standards, we decide whether we need to take further regulatory action. This might include discussions with the provider about how they could improve. We only use this approach where issues can be resolved quickly, easily and where there is no immediate risk of serious harm to people.

Where we have concerns that providers are not meeting essential standards, or where we judge that they are not going to keep meeting them, we may also set improvement actions or compliance actions, or take enforcement action:

Improvement actions: These are actions a provider should take so that they **maintain** continuous compliance with essential standards. Where a provider is complying with essential standards, but we are concerned that they will not be able to maintain this, we ask them to send us a report describing the improvements they will make to enable them to do so.

Compliance actions: These are actions a provider must take so that they **achieve** compliance with the essential standards. Where a provider is not meeting the essential standards but people are not at immediate risk of serious harm, we ask them to send us a report that says what they will do to make sure they comply. We monitor the implementation of action plans in these reports and, if necessary, take further action to make sure that essential standards are met.

Enforcement action: These are actions we take using the criminal and/or civil procedures in the Health and Social Care Act 2008 and relevant regulations. These enforcement powers are set out in the law and mean that we can take swift, targeted action where services are failing people.

Information for the reader

Document purpose	Review of compliance report
Author	Care Quality Commission
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