

Review of compliance

Evelyn Grace Limited Harmill House	
Region:	South East
Location address:	Auclum Lane Burghfield Common Reading Berkshire RG7 3DB
Type of service:	Domiciliary care service
Date of Publication:	April 2012
Overview of the service:	Harmill House, Evelyn Grace Limited is a domiciliary care agency situated in Reading. The agency provides a care service to people that have physical disabilities or care needs associated with older age in their own homes.

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

Our current overall judgement

Harmill House was meeting all the essential standards of quality and safety but, to maintain this, we have suggested that some improvements are made.

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, carried out a visit on 1 March 2012, looked at records of people who use services, talked to staff and talked to people who use services.

What people told us

People were highly complimentary about the agency. One person said "I've used other care agencies but none as good as this" another said "I have no hesitation in recommending the agency to my friends, the carers are excellent". People told us the service was provided flexibly to meet their needs. They said staff generally arrived on time and worked for the full amount of time allocated. They told us the staff were "good at their jobs and were always cheerful and kind". People told us that "staff were reliable and punctual and could be relied upon". People were very happy with the quality of care provided. They told us they were involved in the assessment and planning of their care and were able to make choices and decisions about how their care was delivered.

What we found about the standards we reviewed and how well Harmill House 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 were involved in making decisions about their care. People's preferences and choices were respected and were recorded in their individualised care plan.

Overall, we found that Harmill House, Evelyn Grace Limited was meeting this essential standard.

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

and supports their rights

The service involved people in planning their care and support. The person's individual preferences and choices were recorded in their care plan. Care plans were reviewed when necessary to meet people's changing needs. Confidential information was shared only when necessary for the safety and protection of the person using the service. The service ensured that people were contacted if there were any unexpected changes to times of visits or staff visiting. The service responded quickly in case of an emergency.

Overall, we found that Harmill House, Evelyn Grace Limited was meeting this essential standard.

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

The service had systems in place to protect people from abuse and exploitation. Staff understood their roles and responsibilities and were trained and knowledgeable about adult protection. Staff were aware that they must respect people's rights at all times.

Overall, we found that Harmill House, Evelyn Grace Limited was meeting this essential standard.

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

The service had recruitment processes in place which included ensuring that all relevant checks were carried out before a person could start work.

Overall, we found that Harmill House, Evelyn Grace Limited was meeting this essential standard.

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

People that used the service had their needs met by appropriately trained staff. All staff were fully inducted into their roles and had received regular refresher training. However, staff did not have the opportunity to meet with their manager on a one-to-one basis and were not formally supervised.

Overall, we found that Harmill House, Evelyn Grace Limited was meeting this essential standard but to maintain this, improvement was necessary.

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

The service had systems in place to monitor the quality of its services. There was a process for consulting with people, who used services and their carers on a regular basis.

Overall, we found that Harmill House, Evelyn Grace Limited was meeting this essential standard.

Actions we have asked the service to take

We have asked the provider to send us a report within 14 days of them receiving this report, setting out the action they will take to improve. We will check to make sure that the improvements have been made.

Where we have concerns we have a range of enforcement powers we can use to protect the safety and welfare of people who use this service. When we propose to take enforcement action, our decision is open to challenge by a registered person through a variety of internal and external appeal processes. We will publish a further report on any action we have taken.

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 told us they felt the service provided them with the opportunity to say how they wished to be cared for. They said a copy of their care plan was kept in the home and they knew what was written in it. Staff signed the daily records for all care that had been provided. People told us that at their initial assessment, the Registered Manager visited them at home and discussed the services on offer. Personal care could be provided, along with shopping services, laundry and domestic cleaning services. People were complimentary about the staff and said "the staff are excellent; they are ever so kind and helpful". One person said "the staff were so kind to my husband, I have decided to use the agency myself".

People said they felt confident their right to confidentiality was protected by the agency and staff seemed aware of their professional boundaries. People spoken with by telephone told us the staff always followed their care plan. They said they had been involved with planning their care and could have a say in how their care was delivered. People told us the agency was good at letting them know if the staff member was going to be late or if there was a change in worker.

Other evidence

We examined six care plans that were individualised and person-centred. From the

content it was evident people had been provided with the opportunity to say how they wish to be cared for and their personal preferences had been recorded.

We looked at the initial assessments and care plans for people with a wide range of needs. Some of the care plans had been signed by the person using the service or their carer or advocate, but not all. The Registered Manager explained that some of the people that used the service had physical disabilities and/or mental frailty and were unable to sign the plans. Several people did not have someone that could sign the plan on their behalf such as an advocate, friend or family member. People had been provided with a copy of their plan which was kept in their home. The agency reviewed the care plans regularly, to keep them up to date. Any changes in need were clearly documented.

We spoke with staff who confirmed they understood person-centred care. They told us they had received training as part of their induction. The staff understood the need for people to be involved in their care and to make their own decisions. They told us they respected the right of people to say how they wished to be cared for and understood that people had the right to refuse care.

Staff were knowledgeable about the people they cared for and were clear about their needs. They told us they understood the care plans and felt they were easy to follow. They were confident in their role and understood the importance of treating people as individuals and respecting their right to choice and independence. They told us they understood that people had the right to make decisions about their lives.

Our judgement

People were involved in making decisions about their care. People's preferences and choices were respected and were recorded in their individualised care plan.

Overall, we found that Harmill House, Evelyn Grace Limited was meeting this essential standard.

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

All of the people spoken with by telephone told us that the staff always followed the care plan that was kept in their home. One person said "the girls do everything I ask, I couldn't wish for better". The results of the most recent survey in 2011 showed that 95% of people that used the service confirmed that staff were usually on time for their calls. 95% said that the carer's encouraged them to remain independent. 100% of people that used the service said that the agency made a proper assessment of need and assured them their needs would be met.

Other evidence

We looked at six care plans for people that used the agency. The care plans were well documented and provided sufficient detail to enable staff to provide the right care. Care plans were highly individualised. Files contained copies of the person's initial needs assessment, an assessment of mental health needs, personal care needs, risk assessments and details of the duties of staff. Risk assessments had been undertaken on the risks in the environment, manual handling, lone working, pets, falls, use of equipment including hoists, chosen lifestyle, abuse and exploitation and the risk to others. Several people also had a risk assessment for wandering, absconding and drug and/or alcohol misuse. The content of the daily records demonstrated that the service recognised that people needed to have control over their own lives and to take responsible risks. Care plans were reviewed regularly to ensure that information contained in them was accurate and up-to-date. All care plans and reviews were dated.

The records evidenced that the agency co-operates with other health and social care

professionals to ensure continuity of safe care. There were records of the agency's involvement with and/or referral to general practitioners, community nurses, speech and language therapists, community psychiatric nurses, occupational therapists, physiotherapists, the wheelchair clinic and local stroke liaison team. Several people that used the service had been seen regularly by the Community Matron.

Staff told us they usually worked with the same group of people every week and changes to routines were kept to a minimum. Staff told us if they identified issues or changes to the person's needs they contacted the office. The information was then communicated to other health and social care professional's for the safety and protection of the person using the service. Staff were knowledgeable about the needs of people that they worked with on a regular basis. They told us they had been trained to deal with emergencies and knew who to contact out of hours.

Our judgement

The service involved people in planning their care and support. The person's individual preferences and choices were recorded in their care plan. Care plans were reviewed when necessary to meet people's changing needs. Confidential information was shared only when necessary for the safety and protection of the person using the service. The service ensured that people were contacted if there were any unexpected changes to times of visits or staff visiting. The service responded quickly in case of an emergency.

Overall, we found that Harmill House, Evelyn Grace Limited was meeting this essential standard.

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

People told us that they trusted the staff and felt safe in their care. They said that staff from the agency were reliable and approachable. People said that they were able to say if they had a problem or concern and they knew their concerns would be dealt with effectively by the agency.

Other evidence

The service had policies and procedures in place to protect people from abuse or exploitation. The service had a copy of the inter-agency safeguarding procedures and staff knew who to contact if safeguarding issues were raised. There was evidence in the care plans that staff were quick to respond to issues of concern and worked in a collaborative manner with other social and healthcare agencies to protect individuals from harm.

We spoke with staff by telephone who told us they had received training in safeguarding adults. They had a good understanding and knowledge about what constituted abuse and how to report it. They also said that they had received training in the Mental Capacity Act 2005 and Deprivation of Liberty Safeguards and were aware of how the legislation could affect people who used the service. Staff files contained training certificates which confirmed attendance on relevant courses.

Our judgement

The service had systems in place to protect people from abuse and exploitation. Staff understood their roles and responsibilities and were trained and knowledgeable about

adult protection. Staff were aware that they must respect people's rights at all times.

Overall, we found that Harmill House, Evelyn Grace Limited was meeting this essential standard.

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

We did not receive any information from people that use the service about this standard.

Other evidence

We looked at six staff records during our visit to the service. All applicants had completed an application form or provided detailed curriculum vitae with a photograph for their staff file. The service had two written references for each staff member including one from their previous employer and a personal reference. A full employment history had been provided by the applicant. Staff files contained photocopies of passports, driving licences and other proof of identity. Criminal records bureau checks and Independent Safeguarding Authority checks had been undertaken and the records were on file. There were records of formal interviews and letters to confirm job offer and appointment. Each file contained the staff member's terms and conditions of service and contract of employment.

We spoke to staff who described their recruitment process. They said they had not been able to start work until their references had been received and vetting procedures had been fully carried out.

Our judgement

The service had recruitment processes in place which included ensuring that all relevant checks were carried out before a person could start work.

Overall, we found that Harmill House, Evelyn Grace Limited was meeting this essential standard.

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

There are minor concerns with Outcome 14: Supporting staff

Our findings

What people who use the service experienced and told us

People told us they received a good service from the agency. They told us they were satisfied with the quality of care provided and the consistency of the service.

Other evidence

We looked at staff records for six of the 23 staff that worked for the agency. There was evidence that new staff completed a comprehensive induction programme linked to the Skills for Care common induction standards. Staff had worked through the induction over a three month period. The induction training programme included training in safeguarding, manual handling, fire safety, food hygiene, health and safety, infection control, equality and diversity, person-centred care, managing medication, first aid, confidentiality and record keeping. It also covered what staff should do in emergency situations. The initial induction lasted a minimum of three days but would be extended as necessary depending on the staff member's previous experience. A period of shadowing more experienced staff followed. All new staff were provided with a copy of the services handbook which contained a code of conduct, it also contained copies of the agency's policies and procedures.

We were told by staff that they regularly attended training courses. Training was provided by e-learning and external training courses. The agency had recently purchased a certificated distance learning package which included training in mandatory subjects and other topics. The package included training in diet and nutrition, risk assessment, dementia awareness, coping with aggression in the workplace, death, dying and bereavement, equality, diversity and inclusion, stroke awareness, mental health matters, epilepsy, diabetes, falls prevention, use of bed rails

and person-centred approaches. Staff also told us they had attended training in the Mental Capacity Act 2005 and Deprivation of Liberty Safeguards. Certificates were on file for the various training courses, in addition to mandatory training and induction. Records were up-to-date and accurately documented.

We spoke with staff by phone. They confirmed that they enjoyed working for the agency. They said the Registered Manager was supportive and they felt valued. Several staff told us they had achieved National Vocational Qualifications at levels 2 and/or 3 to further enhance their knowledge and skills.

Staff told us the Registered Manager was very approachable and would discuss any issues of concern as they arose. However, there were no up-to-date records of supervision to support staff in their work role. The manager acknowledged there had been recent slippage in the frequency of one-to-one meetings. They told us there were plans to appraise all staff in April 2012 and to start recording ad-hoc meetings in the office as part of a programme of regular supervision.

Our judgement

People that used the service had their needs met by appropriately trained staff. All staff were fully inducted into their roles and had received regular refresher training. However, staff did not have the opportunity to meet with their manager on a one-to-one basis and were not formally supervised.

Overall, we found that Harmill House, Evelyn Grace Limited was meeting this essential standard but to maintain this, improvement was necessary.

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 told us that they were regularly asked about their views on the quality of service provided by the agency. They said managers carried out regular checks on staff to ensure that their care was provided effectively. They said staff were friendly and caring and always did what they were asked.

Other evidence

The agency regularly asked the person receiving services, their family, advocates and other stakeholders how well the care was being provided. Questionnaires were sent to people that used services on an annual basis, to monitor quality and to identify where improvements in service could be made. The most recent survey in 2011 showed that overall, people were happy with the service they received. The results of the survey confirmed that 100% of the people that used the service thought staff were friendly and courteous and they felt staff treated them with respect. 100% of people that used the service said that staff showed them kindness and understanding and would know what to do if they required medical assistance.

The agency had policies and procedures in place about dealing with complaints. Information was provided to people that used the service and other stakeholders in a user-friendly format. We looked at the record of complaints at the agency and saw that there had been no formal complaints about the service in the past 12 months. Additionally, no information about complaints had been reported to the CQC.

The staff we spoke with said that they reported any changes in a person's health or

well-being to a senior member of staff. They said that the managers were quick to respond and would talk to other health or social care professional's for further advice or support if necessary. Staff said that a review would be carried out and changes made to the person's care plan when necessary.

Our judgement

The service had systems in place to monitor the quality of its services. There was a process for consulting with people, who used services and their carers on a regular basis.

Overall, we found that Harmill House, Evelyn Grace Limited was meeting this essential standard.

Action we have asked the provider to take

Improvement actions

The table below shows where improvements should be made so that the service provider **maintains** compliance with the essential standards of quality and safety.

Regulated activity	Regulation	Outcome
Personal care	Regulation 23 HSCA 2008 (Regulated Activities) Regulations 2010	Outcome 14: Supporting staff
	<p>Why we have concerns:</p> <p>People that used the service had their needs met by appropriately trained staff. All staff were fully inducted into their roles and had received regular refresher training. However, staff did not have the opportunity to meet with their manager on a one-to-one basis and were not formally supervised.</p> <p>Overall, we found that Harmill House, Evelyn Grace Limited was meeting this essential standard but to maintain this improvement was necessary.</p>	

The provider must send CQC a report about how they are going to maintain compliance with these essential standards.

This report is requested under regulation 10(3) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2010.

The provider's report should be sent to us within 14 days of the date that the final review of compliance report is sent to them.

CQC should be informed in writing when these improvement actions are complete.

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
Audience	The general public
Further copies from	03000 616161 / www.cqc.org.uk
Copyright	Copyright © (2010) 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.

Care Quality Commission

Website	www.cqc.org.uk
Telephone	03000 616161
Email address	enquiries@cqc.org.uk
Postal address	Care Quality Commission Citygate Gallowgate Newcastle upon Tyne NE1 4PA