

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

Enara Community Care Seaford

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

Details about this location

Registered Provider	Enara Limited
Registered Manager	Mrs. Jacqui Gough
Overview of the service	<p>Enara Community Care is a domiciliary care agency based in Seaford which provides personal care to mainly older people living in their own homes in Eastbourne, Seaford and nearby towns in East Sussex.</p> <p>At the time of inspection there were 101 staff looking after over 200 clients.</p>
Type of service	Domiciliary care service
Regulated activity	Personal care

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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 21 November 2012, 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 staff.

What people told us and what we found

People we spoke with were complimentary about the quality of the care and support they received. One person said the staff were "very accommodating" and they would "always make time to do everything that needed doing." Another said "the staff are always cheerful and have time for a chat."

Some of the comments made by relatives in their questionnaires were "the carers are superb, cheerful and smiley," "it's the best domestic care I've ever had" and "staff dealt at all times with my father professionally and in a caring way."

Staff we spoke with felt well supported by the manager and said that the service tried to organise rotas so that people did not have too many different care workers. We saw from staff records that they all had received mandatory training.

There were monitoring systems in place to ensure continuing high standards including client questionnaires and regular staff meetings.

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

People's needs were assessed and care and treatment was planned and delivered in line with their individual care plan. People who received support from the agency were subject to a thorough initial assessment of their needs and requirements. This included an environmental survey to ensure the safety and welfare of both the person and care staff by assessing access, hazards and the person's mobility.

Risk assessments around moving and handling were used to gauge the numbers of care workers required and whether or not equipment such as hoists were required to provide the necessary care safely to the person. This ensured that people's needs were properly evaluated and their welfare and safety were assured. The initial assessment included a detailed and personal input from the person receiving the care in answer to prompts such as "what I need help with," "what I find difficult" and "how my support workers can help me."

We were told that care plans were reviewed during a personal visit to the person's home every six months and this was confirmed by what we saw in care plans we examined. The reviews covered areas such as health and emotional well-being, improved quality of life, economic well-being and monitoring personal dignity and respect.

We were told that when people required the administration of homely remedies, the service required that their doctor had been consulted and a letter from them was kept within the care plan. We saw evidence of this in the care plans we examined. This policy protected people against the risks of receiving unsafe treatment.

There were arrangements in place to deal with foreseeable emergencies. People's allergies were recorded clearly in the care plans in red to prevent care workers unwittingly causing adverse effects. We saw that care plans contained emergency contact numbers for people's next of kin or relatives.

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

Our judgement

The provider was meeting this standard.

People who used 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

People we spoke with said the care staff who visited them in their homes made them feel safe and were complimentary about the support they received. We saw from training records that staff were all trained in the correct methods of moving and handling. This meant that the agency had taken steps to protect people from physical harm through inappropriate manual handling.

There was a robust policy and process in place to deal with safeguarding issues. We saw correspondence and paperwork regarding a recent safeguarding allegation. Action was taken promptly to advise the appropriate bodies and protect the person. The agency suspended the care worker involved without delay and carried out a thorough and transparent investigation of the allegation.

Examination of the papers showed that both the police and social services were kept informed of all aspects of any safeguarding investigation. In this way the agency had shown that they responded appropriately to any allegations of abuse.

Staff we spoke with understood what circumstances constituted abuse in its various forms and should prompt a safeguarding alert and also what actions they should take. They confirmed they had received safeguarding training.

All the staff we spoke with said they had complete confidence that the agency would take the proper steps very quickly if there were any issues. They said they would report their concerns to the local authority if they felt the agency were not taking them seriously.

Requirements relating to workers

✓ Met this standard

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

Our judgement

The provider was meeting this standard.

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

Reasons for our judgement

People told us that care staff were "very capable" and "seemed very experienced." Staff we spoke with told us they had been interviewed about their previous experience and had undergone a period of shadowing experienced staff members as part of their induction into the job.

They also told us they were required to provide proof of their previous employment and qualifications. They told us that their induction included training or a refresher in areas such as moving and handling, safeguarding and hygiene and infection control. We examined staff files and saw that they contained evidence of identity for the person, two references and the results of criminal record checks. This showed that the agency were taking steps to make sure the people they employed had the qualifications, skills and experience necessary and appropriate checks were undertaken before staff began work.

We examined five staff files and saw that they contained evidence of appropriate checks being carried out prior to employing staff. We also saw that no person was employed until a criminal records check had been completed.

There were effective recruitment and selection processes in place.

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

Our judgement

The provider was meeting this standard.

People were cared for by staff who were supported to deliver care and treatment safely and to an appropriate standard.

Reasons for our judgement

Staff received appropriate professional development. All of the staff spoken with told us they felt supported by their manager and would be happy to approach them with any concerns they had. They also said they received full training and were encouraged to develop their skills through extra training. This included training about supporting people with dementia, understanding mental capacity and re-enabling people.

During our inspection we saw that the main office building housed a training room that was used for staff meetings and in-house training. The agency used an efficient training matrix to ensure all staff training requirements were met in good time.

Staff we spoke with said they had regular spot checks at people's homes, supervision meetings and annual appraisals. This showed there were suitable arrangements in place to ensure that care staff were supported in relation to their responsibilities and were enabled to deliver care to people safely and to the appropriate standard.

People we spoke with said there was always the right number of care staff for their particular needs. Staff we spoke with told us they were allocated plenty of time to carry out the tasks they had to and this was confirmed by people we spoke with who used the service. They were also given appropriate time for travel between appointments.

The agency employed an electronic monitoring system to provide care staff some security when working alone and also had a lone working policy in place. This required care staff to carry their mobile phones at all times, and ensure that the office had their correct mobile phone number.

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

People were made aware of the complaints system. They were given details of the service's complaints process as part of their contract but people we spoke with said they felt comfortable speaking directly to the manager or office staff if they had any concerns. They also told us they felt listened to and that the service would deal with their concern if they could.

We saw from the inspection of records that there was a transparent and responsive complaints system in place. Staff told us that all complaints were logged, indexed and investigated. Then, where appropriate a remedy was suggested. In one instance a care worker had missed a visit to somebody receiving support because their staff rota had been changed. As a result we saw evidence that the agency reminded all staff of the need to check for changed rotas and the office staff were instructed to ensure that staff were made aware of all changes to their rotas.

We asked for and received a summary of complaints people had made and the providers' response. We saw that complaints were dealt with promptly and appropriately. In one instance to ensure the safety and support of a person following a concern raised by the person's family, the service acknowledged the problem, met with the person and their family and organised a core of three care-workers to support the person. This allowed for better continuity of care and familiarity for the person while allowing the service a degree of flexibility in managing their staff rotas. This shows that people's complaints were fully investigated and resolved where possible to their satisfaction.

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.

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