

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

Longbow Professional Centre

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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	Bethphage
Registered Managers	Mrs. Susan Benson Mr. Richard Hallewell
Overview of the service	Longbow Professional Centre is the registered head office for Bethphage. Bethphage provides personal care and support services for people with learning and physical disabilities 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	4
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	8
Requirements relating to workers	9
Complaints	10
About CQC Inspections	11
How we define our judgements	12
Glossary of terms we use in this report	14
Contact us	16

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 24 January 2013, 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

People told us that they were very happy with the service they received. They described it as, "Fantastic" and, "Really good". They also told us that the staff were, "Fantastic".

Relatives of people using the service were also complimentary about it. They told us that the staff were, "Really knowledgeable", "Very reliable" and, "As good as you can get".

We found that people's views and choices were listened to and respected. People were actively encouraged to participate in the planning and delivery of their support packages.

We found that care plans were person centred and that they contained lots of up to date information to help staff deliver good consistent care.

The provider had effective policies and procedures in place to keep people safe. The Staff we spoke with were confident in describing what they would do if they suspected that abuse was occurring.

We found that the provider carried out all the necessary checks on new staff before employing them.

We also found that the provider had an appropriate complaints policy and procedure in place.

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 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

People told us that the staff actively sought their views and acted upon them. The staff we spoke with told us that people using the service were in charge.

We saw that the provider used a survey to collect the views of people using the service. The survey was written in an easy to read format to help people understand it. The provider also sent a separate survey to relatives of the people it supported.

We also saw that a team of people who used the service audited the service that other people received. The team, known as the Q Checkers, interviewed people about their experiences and fed back their observations to the provider's senior managers. We saw action plans based on the surveys and Q Checker reports.

We found that where the provider supported a group of people living at the same address, there were regular tenant meetings which gave people the opportunity to discuss the service they were receiving with the provider.

We saw that respect was a specific topic discussed by the Q Checkers with other people using the service as part of their internal audit. We also saw that care plans contained a section called, 'What's important to me'. Staff told us that they always respected the things that people had said were important to them.

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

Not everyone receiving a service was able or willing to talk to us. However those that did were very happy with the service. People were particularly complimentary about the staff supporting them. They described them as, "Fantastic" and "Very good". One person told us, "I do want I want. I enjoy myself".

We also spoke to some relatives of people receiving a service. They were also happy with the service their relatives received. One relative told us that the staff, "Really understand my daughter". We were also told that one person's relative, "Thoroughly enjoys the support they get".

We found that staff completed a comprehensive initial assessment of need before developing a personalised care and support plan for each person. We saw that people were involved in their own assessments as far as they were able. We saw that relatives had also contributed extensively to the assessments and care plans.

We saw that each care plan contained personalised risk assessments based on each person's particular needs. The care plans noted where the person did not have the capacity to understand and agree the risk reduction measures put in place to help keep them safe. The risk assessments recorded who had been involved in making the decisions on the person's behalf.

Care plans were person centred, comprehensive and up to date. We saw that one person's religious beliefs and practices were recorded in their plan with guidance to staff to help the person observe the requirements of their faith.

The care plans recorded each person's choices and preferences. For one person for whom routine was important, we saw very detailed guidance for staff to follow during each outing and activity.

We saw that care plans also contained detailed guidance to staff about each person's medical conditions and how to deal with any resulting problems on a day to day basis.

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 told us that they felt safe with the provider's staff. Relatives told us that they had no concerns about their family member's safety.

We saw that the provider had an appropriate internal safeguarding policy and procedure in place. We also saw that a one page summary of the policy was readily available to staff. In addition, the provider subscribed to the local multi agency safeguarding process.

One of the provider's senior managers had recently attended a local multi agency workshop on safeguarding and was in the process of communicating some changes to the local authority procedures to colleagues and staff.

We also saw that the provider had policies and procedures in place to protect people's finances.

The provider had a whistle blowing policy in place and staff we spoke with were aware of it.

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

There were effective recruitment and selection processes in place and appropriate checks were undertaken before staff began work.

We looked at four staff files and found that all had been recruited in line with the provider's recruitment policy. References had been taken up and Criminal Records Bureau checks had been completed before staff were able to start work. We saw that where CRB checks revealed any caution or conviction, the manager carried out an additional interview with the person concerned before making a decision on whether or not to offer employment.

We also saw that adequate checks had been made to ensure that staff were legally entitled to work in the United Kingdom.

People should have their complaints listened to and acted on properly

Our judgement

The provider was meeting this standard.

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

Reasons for our judgement

We found that the provider had a suitable complaints procedure in place. People and their families or representatives had been made aware of the complaints system.

The complaints procedure was available in an easy to read format. A copy of the procedure and the form was included in each person's care plan.

The complaints procedure had been sent to all relatives of people using the service. It included information about external agencies that might be able to support anyone who was unhappy about the way in which their complaint had been handled.

The provider had not received any serious complaints in the last twelve months. We saw a record of the most recent complaint. The provider used a complaints form which recorded the outcome of the investigation into the complaint.

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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