

Review of compliance

Culture Dementia UK Ltd Culture Dementia UK	
Region:	London
Location address:	Unit 47A Park Royal Business Centre 9-17 Park Royal Road London NW10 7LQ
Type of service:	Domiciliary care service
Date of Publication:	September 2012
Overview of the service:	Culture Dementia UK Ltd is registered to provide the regulated activity personal care.

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

Our current overall judgement

Culture Dementia UK was meeting all the essential standards of quality and safety inspected.

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 22 August 2012, checked the provider's records, talked to staff, reviewed information from stakeholders and talked to people who use services.

What people told us

We used a number of different methods to help us understand the experiences of people using the service. This was because the people using the service had complex needs which meant not all of them were able to tell us their experiences. We spoke with four relatives, one health care professional and two members of staff, which included the manager.

All four relatives told us the staff were kind, caring and understood people's needs very well. One relative said "it's nice to go out, I'm so glad they support me", another said "all the ladies are respectful and polite"

Relatives we spoke with told us that carers arrived on time and if there was a delay the carer would call them or the manager would contact them informing them of the delay. One relative said "I am able to ring them up; if there are any changes they let me know". Another said staff were "very good", "very nice" and "very helpful".

Relatives told us that they could raise any concerns with the care staff and manager of the service at anytime. They also told us that they were able to provide feedback on the quality of the services provided either through completing an annual satisfaction survey or directly through face to face contact with the manager. A health care professional working with the service told us "I would not use their service if I was not confident about what they do".

What we found about the standards we reviewed and how well Culture Dementia UK 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's views and experiences were taken into account in the way the service was provided and delivered in relation to their care.

The provider was meeting this standard.

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

People experienced care, treatment and support that met their needs and protected their rights.

The provider was meeting this standard.

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

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

The provider was meeting this standard.

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

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

The provider was meeting this standard.

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 provider had an effective system to regularly assess and monitor the quality of the service that people received.

The provider was meeting this standard.

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.

Where we judge that a provider is non-compliant with a standard, we make a judgement about whether the impact on people who use the service (or others) is minor, moderate or major:

A minor impact means that 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.

A moderate impact means that 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.

A major impact means that 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.

Where we identify compliance, no further action is taken. Where we have concerns, the most appropriate action is taken to ensure that the necessary changes are made.

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

The four relatives we spoke with said they were happy with the care provided by the service. They told us the staff were kind, caring and understood people's needs very well. One relative said "it's nice to go out, I'm so glad they support me", another said "all the ladies are respectful and polite"

All four relatives told us they had direct contact with the manager to ensure that they were happy with the way that care was delivered. They also told us that the service kept them well informed about the service and all aspects of the support provided.

Other evidence

People expressed their views and were involved in making decisions about their care and treatment. We viewed two sets of care records during the inspection. These detailed the support that people and their relatives required and how often this was to be provided. Records were available of regular phone and email contact with people and their relatives. Care plans had been signed by relatives and this also showed us that people were involved in decisions about the care and support they required.

Our judgement

People's views and experiences were taken into account in the way the service was provided and delivered in relation to their care.

The provider was meeting this 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 four relatives we spoke with told us that carers arrived on time and if there was a delay the carer would call them or the manager would contact them to inform them of the delay. They also said that they were contacted in advance if the service had to send an alternative member of the care staff due to staff absence.

Relatives told us they could contact the office at anytime if they required additional support. One relative said "I am able to ring them up; if there are any changes they let me know". Another said staff were "very good", "very nice" and very helpful".

Other evidence

Peoples' needs were assessed and care and treatment was planned and delivered in line with their individual care plans.

We viewed two sets of care records. Both detailed the initial assessment and home visit that had been carried out prior to people receiving care from the service. This provided staff with the information they needed to meet people's care and support needs effectively.

The manager confirmed that she was in frequent contact with people and their relatives to ensure the changing needs of people using the service were discussed and action identified to ensure those needs were met. These actions included referrals to relevant professionals as well as providing updated information to care staff who were providing support. We spoke with one professional who worked closely with the service and they confirmed that they were kept up to date with a person's changing needs.

We saw that assessments of the risks involved in providing care to individual people had been carried out to ensure that people received care safely.

Our judgement

People experienced care, treatment and support that met their needs and protected their rights.

The provider was meeting this 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

The four relatives we spoke with said they had no concerns about the care and support provided by the care staff. They all said they could raise any concerns with the care staff or the manager of the service at anytime. One relative said "I would feel confident to raise any concerns". Another said "I would speak up if I saw something" and "I don't worry when I am out".

Other evidence

People who use the service were protected from the risk of abuse, because the provider had taken reasonable steps to identify the possibility of abuse and prevent abuse from happening. The manager told us that staff received regular, updated training in safeguarding vulnerable adults. We viewed training records which confirmed this. A member of the care staff we spoke with confirmed that they knew how to report safeguarding concerns to the manager and the local authority safeguarding team.

Our judgement

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

The provider was meeting this 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 spoke to people using the service but their feedback did not relate to this standard.

Other evidence

Appropriate checks were undertaken before staff began work. The provider undertook all relevant checks and appropriate recruitment procedures before care staff began work at the service. We viewed two staff files which confirmed that these practices were being followed; this ensured that staff recruited by the service were suitable for their role.

During the inspection we viewed training records which demonstrated that staff had been trained in health and safety, moving and handling and safeguarding. Training that had been planned and booked for staff included communication and engagement with people with dementia, communication and mental capacity training. This ensured that care staff had the skills needed to support people.

We spoke with one member of staff who confirmed that they had received a comprehensive induction when they joined the service. They also told us that weekly meetings were held where they were able to discuss how best to support people they were looking after.

Our judgement

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

The provider was meeting this standard.

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

All four relatives confirmed that they had completed the annual satisfaction survey. We viewed four completed questionnaires and these indicated that the staff were very good or excellent. Relatives told us they were able to provide feedback directly to the manager either on the telephone or in face to face meetings. The professional told us that "I would not use their service If I was not confident about what they do" and "I have never had any complaints".

Other evidence

There were systems in place to assess and monitor the quality of the service provided. Monthly carer meetings were being held. The minutes we viewed recorded the feedback that representatives had provided on the service. Where issues or concerns were raised the manager responded quickly to remedy problems and ensure the continuity of care appropriate to people's individual needs.

The manager told us that contract monitoring information was also collated and submitted to the social services and health commissioners who used the service. An annual satisfaction survey was sent out to people using the service and their relatives to obtain feedback from people using the service. Where shortfalls had been identified the manager said that plans would be put in place to address these.

Our judgement

The provider had an effective system to regularly assess and monitor the quality of the service that people received.

The provider was meeting this standard.

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.

Where we judge that providers are not meeting essential standards, we may set compliance actions or take enforcement action:

Compliance actions: These are actions a provider must take so that they **achieve** compliance with the essential standards. 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
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