

Review of compliance

Mrs Katrina Lyne Davidson
T.L.C Home Care Services

Region:	West Midlands
Location address:	91 High Street Evesham Worcestershire WR11 4DN
Type of service:	Domiciliary care service
Date of Publication:	June 2012
Overview of the service:	T.L.C Home Care Services provides personal care to adults with varying needs in their own home.

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

Our current overall judgement

T.L.C Home Care Services 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 24 May 2012, looked at records of people who use services, talked to staff and talked to people who use services.

What people told us

We visited the agency office and spoke on the telephone with people who used the agency and their advocates. We found that people were able to express their views and had been involved in making decisions about their care and treatment.

We found that care and treatment had been planned and delivered in a way that met with the essential standards. We talked with a few people about their experience of the care and service they received from the agency. Overall, they were complimentary about the care and support they had received from the agency. People told us the agency was "definitely very good". "I just could not manage without them. They enable X (person's name) to stay at home".

We found that people experienced care, treatment and support that met their needs and protected their rights.

We found that people who used the agency were protected from the risk of abuse. People told us that they felt safe whilst receiving care from the agency and they were aware of how to complain.

People and their advocates told us that overall they received a good standard of care from the staff who worked for the agency. They told us "Some of the carers are excellent. All the rest are very good". "They are very efficient, polite, timing is usually very good. Sometimes they have a 'blip' if someone is taken ill, they always keep you informed. I can't fault them".

We found that staff received appropriate induction and training. We found that staff

received regular supervision and were encouraged and supported to undertake further training to increase their skills and knowledge.

People who used the agency were asked for their views about the care and treatment provided. People we spoke with had been asked to contribute to the annual satisfaction survey. All of the people we spoke with knew how to raise concerns. Overall, we found that the provider had an effective system in place to regularly assess and monitor the quality of service that people received.

What we found about the standards we reviewed and how well T.L.C Home Care Services 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 privacy, dignity and independence were respected. 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 used the agency 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 14: Staff should be properly trained and supervised, and have the chance to develop and improve their skills

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

Overall, the provider had an effective system in place to regularly assess and monitor the quality of 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

We visited the agency office and spoke on the telephone with people who used the agency. We found that people were able to express their views and had been involved in making decisions about their care and treatment. We saw that people who used the agency were involved in initial discussions and ongoing assessments of their care needs. People told us that the staff always respected their privacy and dignity when they assisted them with personal care. This was confirmed in the outcome of the most recent 'Client Questionnaire' completed in December 2011.

We spoke with five staff all of whom showed a very good understanding of the importance of maintaining people's privacy and dignity and supporting people to make decisions about their care. This meant that people's views, choices and independence were being respected by staff that cared for them.

The agency had recently introduced a 'Client Information Sheet'. The registered manager told us they intended to produce this twice a year. This information sheet had been produced to keep people informed about the agency and any new developments. It also included information about services offered by Age UK formally known as Age Concern.

Other evidence

The registered manager showed us a 'Client Information Pack', which she said was given to all clients when they started using the agency. People told us that they had received a copy of this. This contained information about the agency and facilities available to people, including a copy of the Statement of Purpose, complaints procedure, and a complaints and compliments form. The provider may find it useful to note that the information in this guide about the Care Quality Commission (CQC) is not accurate. CQC are not the correct agency for people to go to if they have unresolved complaints with the agency. CQC do not have any powers under the Health and Social Care Act 2008 (Regulated Activities) Regulations 2010 to investigate complaints.

The registered manager told us that the 'Statement of Purpose', was currently available in large and normal print. She told us that they also wanted to produce an audio version of this document for people with visual disabilities. The provider may find it useful to note that the current available versions of the 'Statement of Purpose' may not be suitable for people they cared for who had a dementia related illness.

People's diversity and values were respected. We saw that the people whose care we pathway tracked had a care plan which was marked with their preferred name. The care plans also provided information about people's religion or faith so staff could be aware of any particular needs arising from this.

Our judgement

People's privacy, dignity and independence were respected. 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

We visited the agency office and spoke on the telephone with people who used the agency which included two relatives. We found that care and treatment had been planned and delivered in a way that met with the essential standards.

We talked with a few people about their experience of the care and service they had received from the agency. Overall, they were complimentary about the care and support that they received from the agency. People told us the agency was "definitely very good". "I just could not manage without them. They enable X (person's name) to stay at home".

We saw that the agency had received the following written compliments in April 2012: -
"Many thanks for the assistance that you gave which was of a very high standard".
"How marvellous all the girls are who care for her". "Very happy with everything, everyone is nice and carers are good". "Thank you to all the carer's that helped X (person's name) to live a happy life in their own home to the end, I could not have managed without you all".

Other evidence

We pathway tracked the care of three people and looked at how their care was provided and managed. Pathway tracking looks at the experiences of a sample of people who use a service. This is done by following a person's route through the service to see if their needs are being met.

The care records we looked at were detailed and informative and included relevant risk assessments. We found, however that care records lacked information about the application of prescribed and non-prescribed creams and ointments. For example, it was unclear what creams to use and where to apply them. The registered manager told us that she would make sure this information was added to the relevant care records. Care records had been reviewed and updated to reflect the changes in people's care needs. The registered manager told us that they had recently reviewed the format of the care records to make them person centred as the current care plans were more task orientated. She showed us a copy of the new person centred and outcome focused care records which they had started to use for new clients.

We spoke with staff in relation to their understanding of the care needs of the people whose care we had tracked. It was evident that staff knew what guidance they had available, where to find it, what to record and where, and the overall care needs of each person. This meant that people received a consistent level of care that met their individual needs.

The agency had procedures in place for dealing with emergencies and all staff were given training about this subject. There was an 'on call' manager available seven days a week. This was confirmed by staff.

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

We found that people who used the agency were protected from the risk of abuse. People told us that they felt safe whilst receiving care from the agency and they were aware of how to complain. All of the people we spoke with told us that if they raised a concern they felt it would be listened to.

The 'Client Information Pack' contained a copy of a local authority leaflet that gave guidance to people about what they could do to protect themselves from abuse. This pack also contained a copy of the agency's complaints procedure and a complaints and compliments form.

Other evidence

Staff told us that they had received safeguarding training and this was confirmed by records that we looked at. Staff had a good understanding of what abuse was and what they would do if they had any concerns.

We had not received any complaints or concerns about the agency. We looked at recruitment records for two staff which showed that a thorough process had been followed by the registered provider. This meant that only fit and suitable staff had been employed to make sure that people were protected from any potential abuse.

Our judgement

People who used the agency 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 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 and their advocates told us that overall they received a good standard of care from the staff who worked for the agency. They told us "Some of the carers are excellent. All the rest are very good". "They are very efficient, polite, timing is usually very good. Sometimes they have a 'blip' if someone is taken ill, they always keep you informed. I can't fault them".

Other evidence

We found that staff received appropriate induction and training. The registered manager told us that they used the Common Induction Standards for induction of care staff. She told us the initial induction period was a minimum of three weeks, and this included all core mandatory training which was done by the training manager, e.g. moving and handling and infection control. The registered manager said that new care staff 'shadowed' other staff as part of their practical induction. New carers also worked with Team Leaders. Then if the agency considered them competent, they would be scheduled to provide care for people on their own, but these would only be people who did not have any complex care needs. They would then have a session of supervision. This induction procedure was confirmed by staff.

We saw the induction records for a new carer, which showed that staff undertook a programme of induction that was in line with the Skills for Care Common Induction Standards. We saw that this person had undertaken the following training when they started work at the agency; safeguarding people, medication, manual handling, infection control, fire, dementia awareness, food hygiene, catheter care and Percutaneous endoscopic gastrostomy (PEG) feeding.

Staff told us that working for T.L.C Home Care Service was "99% alright. I would recommend the agency to work for". "They look after you, if you have any problems there is always someone at the end of the phone, There is support there all the time". "Working for a care agency is one of the most satisfying jobs you can do". "Training is very good, and the access to outside training is also very good". "I would recommend TLC to provide care". "Standard of care is superb". "I really enjoy the job, a really good company to work for". "Training is very good and interesting". "I love it, it's absolutely great". This meant that the staff had the skills needed to meet the care needs of the people who used the agency.

We found that staff received regular supervision and were encouraged and supported to undertake further training to increase their skills and knowledge. We looked at two staff records which showed they had received regular supervision. We spoke to five staff who confirmed this. This meant that the providers monitored the standards of care that people received.

Our judgement

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

People who used the agency were asked for their views about the care and treatment provided. People we spoke with had been asked to contribute to the annual satisfaction survey. All of the people we spoke with knew how to raise concerns.

We saw the following comments had been received by the agency as part of the annual survey response from people: - "Carers are genuinely helpful and caring". "Everyone is so helpful and cheerful". "I am very pleased with the regularity and ability of all the carers". "We are very pleased with TLC agency and would recommend it to others". "I am extremely impressed with the standards maintained by the agency".

People and their advocates told us that the agency "are very very professional. A very good agency". "I have every confidence in TLC. No agency is absolutely perfect. They are here to do the best they can". "The consistency of carers is pretty good".

Other evidence

The registered manager told us that a staff satisfaction questionnaire was sent out in April 2012. This was confirmed by staff. The registered manager told us that she was currently evaluating the results of the staff survey, but initial findings were that the agency had improved in the last year. The registered manager told us that she intended to publish the results from the surveys undertaken in order to provide feedback to people who used the agency and staff.

We found that the agency had an audit system in place for monitoring the quality of the

service. For example, we saw audits had taken place for missed calls, complaints and compliments, training and supervision. The registered manager told us that the Team Leaders audited the medication charts and daily records when they were returned to the office, although they did not have any evidence available to support this. This meant that the provider was regularly assessing and monitoring the quality of the services provided to make sure that people received appropriate care and treatment.

We found that there were shortfalls in the audit trail in some areas to show what action had been taken. For example, messages were recorded in a message log and there was a space to show the action taken, but this was not being completed. There were no recorded action points following meetings with staff. Two complaints records both in March 2012 had no outcome recorded. The registered manager acknowledged that this could be improved and that there was a need for a more thorough audit trail to make sure all action plans were created and followed up as required.

The registered manager showed us their self assessments against the 28 essential standards of quality and safety and the changes that had been made following a review of the standards. For example for safeguarding people from abuse they had now included a leaflet in the 'Client Information Pack' produced by the local authority about 'Keeping Safe'.

Our judgement

Overall, the provider had an effective system in place to regularly assess and monitor the quality of 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

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