



Review of compliance

Mrs Dyanne Elizabeth Bryan
Brown Clee Domiciliary Care Agency

Region:	West Midlands
Location address:	Reaside Neenton Bridgnorth Shropshire WV16 6RL
Type of service:	Domiciliary care service
Date of Publication:	June 2011
Overview of the service:	Brown Clee Care Agency provides a range of personal care and practical support in a person's own home in the South Shropshire area including Bridgnorth, Much Wenlock, Broseley, Highley, Ditton Priors and Claverley

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

Our current overall judgement

Brown Clee Domiciliary Care Agency was meeting all the essential standards of quality and safety.

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, checked the provider's records, talked to staff and talked to people who use services.

What people told us

There were many positive comments and overall people were pleased with the care and support they received. Many comments were made about staff being kind and caring, helpful and very friendly. People received information before they agreed to the service, had their needs assessed and were monitored closely in a discreet manner by the staff involved with their care. People were treated as individuals and any changes to care communicated to the care workers speedily ensuring consistent quality care.

What we found about the standards we reviewed and how well Brown Clee Domiciliary Care Agency was meeting them

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

The agency had a good assessment, care planning and review system in place. This ensured that people received care that was individual to their needs and was reviewed on a regular basis. Staff had the information they needed and a clear understanding of how to offer care to each person, ensuring peoples' health and personal care needs were met in a way that they preferred.

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

Staff received training so that they had an understanding in adult protection to ensure people they supported were protected from abuse, promoting their well being.

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

Effective systems were in place to monitor risks and to review the quality of the service provided to ensure people were well supported. People living at home could express their views and were fully involved in the decisions about their care, treatment and support. Brown clee Agency had arrangements in place to ensure people could make informed decisions about their care and have their views acted upon.

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 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

People told us of the kindness that staff show them and that they felt safe and well looked after.

Other evidence

We reviewed the information we hold about the service and this told us that the service had performed very well since it registered.

People who use services had safe and appropriate care because their individual needs were assessed and established from when they were referred or began to use the service. This assessment was undertaken by trained, experienced and qualified staff. This documentation was developed with them, and/or those acting on their behalf, it reflected their needs, preferences and diversity and identified risks, and said how these risks would be managed and reviewed. Risk assessments conducted have balanced safety with the right of the person to make choices.

We were told that the provider had developed positive working relationships with other agencies in the local community which included healthcare professionals such as the GP and district nurses, in relation to working in the best interests of people who used the service.

We spoke with staff and they shared experiences of how they provided this approach, they told us that the care people received was tailored around their individual assessed needs and that they were very much involved in their care.

Staff discussions showed that they engaged with people in a positive manner and it was clearly evident that good working relationships had been developed between people using the service and care workers.

Our judgement

The agency had a good assessment, care planning and review system in place. This ensured that people received care that was individual to their needs and was reviewed on a regular basis. Staff had the information they needed and a clear understanding of how to offer care to each person, ensuring peoples' health and personal care needs were met in a way that they preferred.

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 we spoke to told us that they considered they were safe in their own homes. They said they were confident in raising any concerns with the staff team or the provider and felt that concerns were listened to and acted upon

Other evidence

The provider told us they had clear policies and guidelines on response to alleged abuse and that any member of staff suspected or accused of abuse was immediately suspended as a neutral act both for the protection of the people using the service and the staff member. Staff we spoke with confirmed that they had received training on safeguarding which showed them how to identify the various forms of abuse, how to respond and whom to report to.

Our judgement

Staff received training so that they had an understanding in adult protection to ensure people they supported were protected from abuse, promoting their well being.

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 we spoke with stated that meetings and discussions were regularly held to provide them with the opportunity to share their views about the service and offer suggestions for improvement. Staff spoke about being involved in planning and reviewing people's care with them.

Other evidence

The provider had systems in place for gathering, recording and evaluating accurate information about the quality and safety of the care, treatment and support the service provided. These included quality assurance systems, risk management, handling of complaints, staff development and encouraging reporting of any incidents thus safeguarding the safety and wellbeing of people who use the service. Regular surveys were circulated to people who use the service and their families in order to gain their views.

Staff told us that they received regular supervision, appraisals, attended team meetings and that their practice was observed and their performance discussed. They also told us that the provider was very much focused on providing a person centred service, ensuring the views of people are paramount in how the service was run.

Our judgement

Effective systems were in place to monitor risks and to review the quality of the service provided to ensure people were well supported. People living at home could express their views and were fully involved in the decisions about their care, treatment and support. Brown clec Agency had arrangements in place to ensure people could make

informed decisions about their care and have their views acted upon.

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
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