

# Review of compliance

## Royal Mencap Society Durham Domiciliary Care

<b>Region:</b>	North East
<b>Location address:</b>	Durham Domiciliary Care
<b>Type of service:</b>	Domiciliary care services including those provided for children
<b>Publication date:</b>	April 2011
<b>Overview of the service:</b>	<p>Mencap (Durham) Domiciliary Care Agency provides personal care and support for its service users. The service provides for a range of people, children and adults, with disabilities, including learning disability, physical disability, mental health needs and acquired brain injury.</p> <p>The type of support provided is defined in agreement with the service user and their carer/care manager and set out in the Service User Guide and personal support plan. It may include home care, domestic activities, skills-development, personal care plus social and leisure activities.</p>

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

## What we found overall

**We found that Durham Domiciliary Care was meeting all the essential standards of quality and safety we reviewed.**

The summary below describes why we carried out the 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 and obtained a survey which had recently been carried out by Mencap.

### What people told us

In a survey carried out by Mencap in March 2011 people who used services said that they were supported by the right people, working in a way they wanted them to. They said that if they had any problems they could talk to staff. And that the staff and the manager listened to what they said and helped them when needed. They said they were supported in a way that helped them to feel safe, secure and in control of their money, home and belongings. And that other health and social care providers had been involved in their care.

They said they were supported in a way that helped them feel good about themselves and remain healthy. They said they were very happy with the support they were given. One person said "I have a photo support plan". They said that they were given the information and support they needed to lead a lifestyle that they chose. Two people said that they had been involved in recruiting staff. They said "sometimes I do the interviews" and "I like interviewing new staff and would like to do this more". One person said "I chair the monthly meeting".

## **What we found about the standards we reviewed and how well Durham Domiciliary Care was meeting them**

### **Outcome 1: People should be treated with respect, involved in discussions about their care and treatment and able to influence how the service is run**

People who received services were respected and involved in making decisions. People were put at the centre of their care through the care planning process and with the involvement of advocacy services where this was appropriate.

- Overall, we found that Durham Domiciliary Care was meeting this essential standard.

### **Outcome 2: Before people are given any examination, care, treatment or support, they should be asked if they agree to it**

- We did not review outcome 2.

### **Outcome 4: People should get safe and appropriate care that meets their needs and supports their rights**

People experienced effective, safe and appropriate care and support that met their needs. And the care plans identified risks and how these were managed and reviewed.

- Overall, we found that Durham Domiciliary Care was meeting this essential standard.

### **Outcome 5: Food and drink should meet people's individual dietary needs**

- We did not review outcome 5.

### **Outcome 6: People should get safe and coordinated care when they move between different services**

People who used services received safe and co-ordinated care, where more than one provider was involved, or they moved between services.

- Overall, we found that Durham Domiciliary Care was meeting this essential standard.

### **Outcome 7: People should be protected from abuse and staff should respect their human rights**

People who used this service were protected from abuse.

- Overall, we found that Durham Domiciliary Care was meeting this essential standard.

**Outcome 8: People should be cared for in a clean environment and protected from the risk of infection**

- We did not review outcome 8.

**Outcome 9: People should be given the medicines they need when they need them, and in a safe way**

- We did not review outcome 9.

**Outcome 10: People should be cared for in safe and accessible surroundings that support their health and welfare**

- We did not review outcome 10.

**Outcome 11: People should be safe from harm from unsafe or unsuitable equipment**

- We did not review outcome 11.

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

- We did not review outcome 12.

**Outcome 13: There should be enough members of staff to keep people safe and meet their health and welfare needs**

- We did not review outcome 13.

**Outcome 14: Staff should be properly trained and supervised, and have the chance to develop and improve their skills**

The safety, health and welfare of people who used this service were protected by staff who were fully supported or properly trained.

- Overall, we found that Durham Domiciliary Care was meeting this essential 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**

People who used services were protected by the effective monitoring of their care and welfare.

- Overall, we found that Durham Domiciliary Care was meeting this essential standard.

**Outcome 17: People should have their complaints listened to and acted on properly**

- We did not review outcome 17.

**Outcome 21: People's personal records, including medical records, should be accurate and kept safe and confidential**

- We did not review outcome 21.

**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 1: 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 1: Respecting and involving people who use services

### Our findings

**What people who use the service experienced and told us**  
In a survey carried out by Mencap in March 2011 people who used services said that they were given the information and support to lead a lifestyle that they chose. Two people said that they had been involved in recruiting staff. They said "sometimes I do the interviews" and "I like interviewing new staff and would like to do this more". One person said "I chair the monthly meeting".

**Other evidence**  
The Care Quality Commission's quality and risk profile suggested that there was no level of concern and no recent change to the risk of non-compliance.  
The manager told us that the support plans, assessments and risk assessment process provided evidence to demonstrate that people who used services had their care, treatment and support needs met. For example, communication plans provided information about how people who used services communicate so that they could be fully involved in the decision making process.

We asked the manager about how the privacy and dignity of people who used services was promoted. She told us that people who required help with their personal care were supported sensitively and that support plans were in place that encouraged people to do as much for themselves as possible whilst ensuring that privacy was maintained.

The manager said that people who used services were encouraged to take part in the running of the service through monthly meetings.

We were told by the manager that people who used services were supported to use advocacy services and other professionals. And that Mencap produced a Statement of Purpose and Service User Guide which described the support and services available to people. This information helped people to make choices and decisions.

### **Our judgement**

People who received services were respected and involved in making decisions. People were put at the centre of their care through the care planning process and with the involvement of advocacy services where this was appropriate.

# Outcome 4: 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 4: Care and welfare of people who use services

### Our findings

**What people who use the service experienced and told us**  
In a survey carried out by Mencap in March 2011 people who used services said that they were supported in a way that helped them feel good about themselves and remain healthy. They said they were very happy with the support they were given. One person said "I have a photo support plan".

**Other evidence**  
The Care Quality Commission's quality and risk profile suggested that there was no level of concern and no recent change to the risk of non-compliance.  
The manager told us that there were original needs assessments in place for people who used services as well as Mencap's own needs assesment. The manager told us that all plans were completed using knowledge of the person from other professionals such as care managers, families and circles of support. She told us they were signed and owned by the person or their representative and were regularly reviewed. She told us that the support plans demonstrated who had been involved in writing them and included likes, dislikes, aspirations and expected outcomes.  
She told us that risk assessments were in place based on wants and needs of the people they supported, that they were sufficiently detailed to deliver the service and

were frequently reviewed, live and up-to-date. We were told by the manager that Mencap adopted a proactive and enabling approach to managing risks. She told us that other plans were in place such as behavioural, communication, finance, medication and health action plans to make sure that people who used services were supported to get the care and treatment they needed.

**Our judgement**

People experienced effective, safe and appropriate care and support that met their needs. And the care plans identified risks and how these would be managed and reviewed.

# Outcome 6: Cooperating with other providers

## What the outcome says

This is what people who use services should expect.

People who use services:

- Receive safe and coordinated care, treatment and support where more than one provider is involved, or they are moved between services.

## What we found

### Our judgement

**The provider is compliant** with outcome 6: Cooperating with other providers

### Our findings

**What people who use the service experienced and told us**  
In a survey carried out by Mencap in March 2011 people who used services told Mencap staff how other health and social care providers had been involved in their care.

**Other evidence**  
The Care Quality Commission’s quality and risk profile suggested that there was no level of concern and no recent change to the risk of non-compliance.  
The manager told us that they work in partnership with the people who fund the service to ensure a joint working approach. This included involvement in 6 monthly review meetings held with the Local Authority Care Manager and Mencap staff and managers. She told us they had many examples of other professional involvement ranging from the Forensic team, Emergency Duty Team, Clinical Psychologist, and Community/Dementia Nurses.  
The manager told us that the support plans provided evidence of the involvement of other professionals where appropriate. They also contained information about how/where the Mental Capacity Act applied and how this had been managed, for example, with best interest meetings.  
She also told us that risk assessments provided evidence of the involvement of other professionals where appropriate.

We were told by the manager that Mencap implemented a keyworker system. It was the role of the keyworker to work alongside the individual to ensure that all support plans, risk assessments, etc, were continually reviewed and up-dated.

In relation to confidentiality the manager told us that records were kept and shared in a way agreed with the person they supported. And done so in a way that met with the requirements of the Data Protection Act.

The manager told us that they had contingency planning in place and that plans were available which demonstrated that they could respond to a major incident. She told us that they had individual fire evacuation/emergency plans in place for each service user.

**Our judgement**

People who used services received safe and co-ordinated care, where more than one provider was involved, or they moved between services.

# Outcome 7: 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 7: Safeguarding people who use services from abuse

### Our findings

**What people who use the service experienced and told us**  
In a survey carried out by Mencap in March 2011 people who used services said they were supported in a way that helped them to feel safe, secure and in control of their money, home and belongings.

**Other evidence**  
The Care Quality Commission’s quality and risk profile suggested that there was no level of concern and no recent change to the risk of non-compliance.  
The manager told us that Mencap provided Protection of Vulnerable Adults (POVA) training during the new employees induction period, within the first twelve weeks of their employment. They then completed the Local Authority POVA training, which is renewed every 3 years.  
We asked the manager how she made sure that the POVA training was put into practise. She said that all Mencap training was followed by a feedback and evaluation questionnaire which was used to assess the employees understanding of the training programme. Staff were also encouraged to discuss any training they had completed within their team meetings and supervisions. The manager told us that Team Managers spent approximately 50% of their time observing staff practices to make sure that people who used services were protected from abuse.

We were told by the manager that Mencap has an easy read Compliant policy which had been distributed to all people who used services. There was also an easy to understand booklet called "What is abuse" and this had been provided to everyone.

We asked the manager how she monitored incidents. She told us that all accidents or incidents were recorded and entered onto a special database. The database highlighted any repeat incidents/accidents and trends. Any patterns were then responded to. She told us that any critical incidents were reported to Senior Managers within 24 hours.

**Our judgement**

People who used this service were protected from abuse.

# Outcome 14: Supporting 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 competent staff.

## What we found

### Our judgement

**The provider is compliant** with outcome 14: Supporting workers

### Our findings

**What people who use the service experienced and told us**  
In a survey carried out by Mencap in March 2011 people who used services said that they were supported by the right people, working in a way they wanted them to. They said that if they had any problems they could talk to staff. And that the staff and the manager listened to what they said and helped them when needed.

**Other evidence**  
The Care Quality Commission's quality and risk profile suggested that there was no level of concern and no recent change to the risk of non-compliance.  
The manager told us that all new employees are required to complete a thorough induction programme within the first 12 weeks of employment. There were 9 modules to the induction programme. She told us that mandatory training was completed within weeks 1 and 2 and that each topic was supported with the completion of a workbook. The final module "Develop as a Worker" was completed within the first 12 weeks. In addition to this specialist training, for example epilepsy and autism, was provided if required.  
We were told by the manager that they had team meetings every month, supervisions every 6 weeks. She told us that Mencap had a new appraisal process involving quarterly review meetings to discuss performance and key roles. Team Managers also completed regular observations of staff to assess their performance.

**Our judgement**

The safety, health and welfare of people who used this service were protected by staff who were fully supported or properly trained.

## 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

In a survey carried out by Mencap in March 2011 people who used services said that the staff and the manager listened to what they said and helped them when needed.

##### Other evidence

The Care Quality Commission's quality and risk profile suggested that there was no level of concern and no recent change to the risk of non-compliance.

The manager told us that all managers are required to complete a monthly Compliance Compilation Tool. This provided information to ensure that reviews had been completed on time and that all aspects of the service including assessments, support plans, risk assessments were completed appropriately and kept up-to-date. Any areas that required an update or action were identified within the Continuous Improvement plan. This was looked at by Mencap's Monitoring Manager to make sure that actions had been addressed in a timely manner.

We were told by the manager that annual service user and stakeholder satisfaction surveys were distributed. And that all feedback was collated and any ideas for change or improvement were added to the Continuous Improvement Plan and acted

upon immediately.

**Our judgement**

People who used services were protected by the effective monitoring of their care and welfare.

# 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

<b>Document purpose</b>	Review of compliance report
<b>Author</b>	Care Quality Commission
<b>Audience</b>	The general public
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