# Overview of the service:
The agency is based at the Moor Allerton sheltered housing with care centre on the outskirts of Leeds. Tenants receive domiciliary care and support in line with their assessed needs. Allocations to the services are made via Leeds City Council's city-wide extra care services.
the Primary Care Trust and are used to provide up to six weeks of intermediate care to service users. 20 provide accommodation for older people living with dementia. The agency's offices are based within the scheme and staff are on duty 24 hours a day to provide care and support to people as set out in their care plans. A senior member of staff is contactable at all times for advice and support.
Summary of our findings
for the essential standards of quality and safety
What we found overall

We found that Moor Allerton Care Centre was meeting all the essential standards of quality and safety we reviewed but, to maintain this, we have suggested that some improvements are made.

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 spoke on the telephone to people who use the service, some staff and health professionals who visit people who use the service. We also asked the provider to make its own assessment of compliance by completing our Provider Compliance Assessments for some outcome areas. We also spoke with people from other agencies that have an interest in the service.

What people told us

People who use the service and their relatives were satisfied with the service they receive. They said their health needs were responded to well by the agency. They also said staff were respectful and involved them in any decisions about their care. Comments included:

“Respond quickly when you need them”
“Staff reassure and prompt Mum well regarding her dementia problems”.

As the service is an extra care housing scheme there is an on site café facility. People said they enjoyed having this. Their comments included:

“Food at the café is good, plenty of choice, have general meetings where we discuss food choices”
“Good food at the café, nice choice”.

People who use the service said they feel safe and would feel comfortable discussing concerns with staff and the manager of the agency. One person said, “Gives me such peace of mind to know Mum is happy and safe”

People who use the service and their relatives said staff maintain a clean environment and wear appropriate clothing when they are working in their home. One said, “Manage her personal care well, always use gloves and aprons”.

People who use the service said they received good support in managing their medication. One person said, “They give Mum her medication, when there was a problem in her not taking it, they listened to me and changed the care plan so that they now stay with her until she has taken it “

People who use the service and their relatives spoke highly of the staff. Their comments included:

“Very nice staff, always enough of them”
“Some carers are better than others but overall I am satisfied with them all”

People who use the service and their relatives also said that staff were well trained to meet people’s needs. One said, “Staff are very ‘genned ‘up on dementia and understanding it, very good in their communication with Mum.” Another said, “Staff are kind and caring and seem well trained”.

People who use the service and their relatives said the manager and care workers check that that they are happy with the care they are receiving. People said they had completed satisfaction surveys.

Other comments included:

“The manager is always around, talk to her most days, she’s lovely”
“The manager occasionally pops in to see if everything is alright”
“I speak to the manager daily, she always asks if everything’s alright for me and Mum”.

People who use the service and their relatives said staff and management are very good at listening to them, and any comments are taken seriously.

What we found about the standards we reviewed and how well Moor Allerton Care Centre 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
The provider has good systems in place to make sure people agree with the care and support they receive from the agency.

- Overall, we found that Moor Allerton Care Centre 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
The provider has good systems in place to make sure people agree with the care and support they receive from the agency.

- Overall, we found that Moor Allerton Care Centre was meeting this essential standard.

Outcome 4: People should get safe and appropriate care that meets their needs and supports their rights
People who use the service experience effective, safe and appropriate care, treatment and support that meets their needs and protects their rights.

- Overall, we found that Moor Allerton Care Centre was meeting this essential standard.

Outcome 5: Food and drink should meet people’s individual dietary needs
People who use the service who need assistance with nutrition and hydration are supported properly.

- Overall, we found that Moor Allerton Care Centre was meeting this essential standard.

Outcome 6: People should get safe and coordinated care when they move between different services
People who use the service receive safe and co-ordinated care, treatment and support where more than one provider is involved.

- Overall, we found that Moor Allerton Care Centre was meeting this essential standard.
Outcome 7: People should be protected from abuse and staff should respect their human rights
This outcome was assessed as a minor concern. The provider has systems in place to make sure people who use the service are protected from abuse, or the risk of abuse. However, our evidence shows that allegations of suspected abuse have not been reported properly to the appropriate authority.

- Overall, we found that Moor Allerton Care Centre was meeting this essential standard but to maintain this, we have suggested that some improvements are made.

Outcome 8: People should be cared for in a clean environment and protected from the risk of infection
People who use services can be confident that systems are in place to manage the prevention and control of infection.

- Overall, we found that Moor Allerton Care Centre was meeting this essential standard.

Outcome 9: People should be given the medicines they need when they need them, and in a safe way
People who use the service have their medicines at the times they need them and in a safe way.

- Overall, we found that Moor Allerton Care Centre was meeting this essential standard.

Outcome 10: People should be cared for in safe and accessible surroundings that support their health and welfare
Systems are in place to check the safety and suitability of premises.

- Overall, we found that Moor Allerton Care Centre was meeting this essential standard.

Outcome 11: People should be safe from harm from unsafe or unsuitable equipment
People who use the service and staff are not at risk of harm from unsafe or unsuitable equipment.

- Overall, we found that Moor Allerton Care Centre was meeting this essential standard.

Outcome 12: People should be cared for by staff who are properly qualified and able to do their job
People who use the service have their needs met by staff who have been properly recruited.

- Overall, we found that Moor Allerton Care Centre was meeting this essential standard.

**Outcome 13: There should be enough members of staff to keep people safe and meet their health and welfare needs**
People who use services get good continuity of care and their needs are met by sufficient numbers of staff.

- Overall, we found that Moor Allerton Care Centre was meeting this essential standard.

**Outcome 14: Staff should be properly trained and supervised, and have the chance to develop and improve their skills**
People who use the service are safe and their health and welfare needs are met by competent staff.

- Overall, we found that Moor Allerton Care Centre 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 use the service benefit from safe, quality care, treatment and support. The provider monitors the quality of support people receive and identifies and monitors risks to people who use the service.

- Overall, we found that Moor Allerton Care Centre was meeting this essential standard.

**Outcome 17: People should have their complaints listened to and acted on properly**
People who use the service or others acting on their behalf are sure that their comments and complaints are listened to and acted on effectively.

- Overall, we found that Moor Allerton Care Centre was meeting this essential standard.

**Outcome 18: Notification of death of a person who uses the service**
People can now be confident that deaths of people who use the service are reported promptly to the Care Quality Commission so that, where needed, action can be taken.
• Overall, we found that Moor Allerton Care Centre was meeting this essential standard.

Outcome 21: People’s personal records, including medical records, should be accurate and kept safe and confidential
People who use the service can be confident that their personal records are accurate, fit for purpose, held securely and remain confidential. Other records, required to protect people’s safety and wellbeing are maintained properly.

• Overall, we found that Moor Allerton Care Centre was meeting this essential standard.

Action we have asked the service to take

We have not asked the provider to take any action.
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
People who use the service and their relatives were satisfied with the service they receive. They said staff were respectful and involved them in any decisions about their care. Comments included:

“When first came, seen by a very nice lady to see what I wanted”

“Have all the information I need in all the booklets they have given me”

“Good information given at start, explained everything well”

“I feel happy to tell staff straight if I think they have missed something, no problem in speaking my mind”
“I feel they listen to me, I am there every day, I know all the staff, they treat Mum well”

“They see to her well but make sure she has her independence in the safety of the scheme”

“They listen to me about Mum’s care and what she needs”.

Other evidence
At the last visit to the service in August 2009, we said people are provided with good information about the service at the first point of using it.

We did not ask the provider to assess themselves in this outcome area. However they provided us with information on how they are meeting this outcome area within another part of their assessment. In the Provider Compliance Assessment (PCA), the provider told us that people who use the service are fully involved in the assessment and care planning process before they start using the service. They said that staff who carry out assessments are trained to do so and that they also gather information on people’s needs by working with health care and local authority staff.

Also at our last visit to the service, we noted that people’s assessments were out of date and did not reflect their current needs. The manager of the service provided us with information to show how assessments have been improved. She said that people are always offered a visit to the housing complex, where their needs are discussed and assessed by the agency staff.

In the PCA, the provider also said, that they hold meetings with people who use the service to ‘hear and act on their feedback’.

Our judgement
The provider has good systems in place to make sure people agree with the care and support they receive from the agency.
Outcome 2: Consent to care and treatment

What the outcome says

This is what people who use services should expect.

People who use services:
- Where they are able, give valid consent to the examination, care, treatment and support they receive.
- Understand and know how to change any decisions about examination, care, treatment and support that has been previously agreed.
- Can be confident that their human rights are respected and taken into account.

What we found

Our judgement

The provider is compliant with outcome 2: Consent to care and treatment

Our findings

What people who use the service experienced and told us

People said staff were polite and always asked them about their care needs. One said, “They do things very nicely, exactly what I ask them to do”.

Staff said that if people refuse care they respect people’s feelings, go back later to people, try different approaches, try to find out what’s wrong. Staff all said they would report the refusal of care to their seniors if they could not persuade someone to accept the care as they wouldn’t want people to be put at risk.

Other evidence

At our last visit to the service in August 2009, we said people were involved with consenting to the care package they receive.

We did not ask the provider to assess themselves in this outcome area. However they provided us with information on how they are meeting this outcome area within another part of their assessment. They told us that people are involved and
consulted in their initial assessment prior to using the service and this remains on-going through the development of care plans and then reviews of these.

Our judgement
The provider has good systems in place to make sure people agree with the care and support they receive from the agency.
**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**

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<td>The provider is compliant with outcome 4: Care and welfare of people who use services</td>
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<tr>
<td>What people who use the service experienced and told us</td>
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<tr>
<td>People who use the service and their relatives said they receive appropriate care and as their needs change the care is reviewed. Their comments included:</td>
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<tr>
<td>“100% happy. Well run organisation”</td>
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<tr>
<td>“Care is top class, like a five star hotel”</td>
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<tr>
<td>“Always answer the pull cord promptly”</td>
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<td>“Carefully looked after”</td>
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<td>“Answer the buzzer immediately”</td>
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<td>“I have a care plan, staff write in it what they have done, they do things very nicely, exactly what I ask them to do”</td>
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“Care is good”

“Staff respect my privacy and do things nicely”

“Always had a response when I have pulled the emergency cord”

“I have a care plan, have a glance in it now and then but rather leave that to the staff, they write in it every day”

“Respond quickly when you need them”

“Staff reassure and prompt Mum well regarding her dementia problems”

People said they felt their health needs were responded to well by the agency. They said,

“They check on Mum regularly”

“They always ring me if Mum is not well”

“Responded well to a recent health issue, called me, called the ambulance”. Staff gave good examples of how they respect people’s privacy and dignity and said it was important to encourage people to be as independent as they could be.

Staff said they found the care plans useful. Their comments included:

“Good care plans and we get chance to read them and are made aware of any updates or changes”

“Care plans are good and show people’s past history which helps you get to know people better”

In January 2010 the provider sent us copies of the ‘Managers Annual Resident Care and Support Review’ for a number of people who use the service. Within this people had commented on the quality of the support they receive. People said their choices were respected and that they were consulted on the care they receive.

As part of this review, the manager sent us an analysis of satisfaction surveys carried out with people who use the service in 2009. (The results from the 2010 survey are not yet available). In this, 90% of people said they were happy with the personal care provided at the service. 100% of people said they would recommend the scheme to others.
Health professionals who visit people who use the service were very positive in their comments about the service. Comments included:

“A brilliant service, really really good”

“Very responsive to people’s health needs.”

“Good care plans in place, good preventative care which reduces hospital admissions for people”

“People who live there seem well cared and are treated well by the staff”

“Staff are always very polite, residents respond well to them”.

Other evidence
At the last visit to the service we said staff were responsive to people's needs and are consistent with the times they provide the service. We noted there had been improvements in the service, in that; care plans contained more person centred information relating to people who use the service. We also said that care plans promoted people's independence.

In the provider compliance assessment (PCA), the provider assessed itself as compliant in all aspects of this outcome area. They did however; note that some care reviews for people who use the service are out of date. They provided an action plan to show how this is going to be addressed. They showed clearly that time has been set aside to make sure people's care needs are reviewed promptly.

In the PCA the provider said they assess people’s needs before offering a service to make sure they can fully meet them. They said that staff who carry out assessments are trained to do so. They said they make sure people’s needs are met through effective care planning, risk management and reviewing systems. They also said that care planning can involve working with other professionals such as mental health practitioners to make sure people who have complex mental health needs have their needs fully met.

They also said that staff are trained in meeting the needs of people at the end of their lives. In the PCA, the provider said, ‘People are asked to consider and share their desired care at the end of life in the document "Final Wishes". This document asks the service user to identify the people close to them when considering care at the end of life. Staff undertake a unique programme of training in MHA called “The Final Lap” which enables them to work sensitively, positively and openly with dying service users, ensuring the person has the care, love and attention they want and need in their last days.’

The provider told us they have systems in place to make sure people’s health needs are monitored. They said they make sure each person who uses the service is
registered with a GP (General Practitioner) of their choice and that there is 24 hour access to the service. They also said that staff are trained to ‘recognise signs of ill-being, poor health or risks which might expose someone to harm.’ And that care plans are designed to maintain and improve the health and well-being of people who use the service.

The service is an extra care housing setting and therefore a social care programme is provided. In the PCA, the provider told us that this includes activities such as ‘keep fit’ and other opportunities for exercise. They also said, ‘The care and support plans, and delivery of care and support includes a programme of activities which centres around people maintaining their skills and ability, leading fulfilled lives, having fun, achieving dreams such as our Seize the Day initiative, building and maintaining relationships and experiencing well-being.’

**Our judgement**
People who use the service experience effective, safe and appropriate care, treatment and support that meets their needs and protects their rights.
Outcome 5: Meeting nutritional needs

What the outcome says

This is what people who use services should expect.

People who use services:
- Are supported to have adequate nutrition and hydration.

What we found

Our judgement

The provider is compliant with outcome 5: Meeting nutritional needs

Our findings

What people who use the service experienced and told us

People said they appreciated the facility of the café in the scheme. Their comments included:

“Food at the café is good, plenty of choice, have general meetings where we discuss food choices”

“Good food at the café, nice choice”

Others told us that staff assist them with some meals in their flats. One person said, “They do my breakfast for me and always lay it out nice and well presented”.

Staff told us they were trained in food hygiene and got regular updates to this training.

Other evidence

As previously mentioned in this report, the service is an extra care housing setting and provides a catering service. In the PCA, the provider said, ‘Our catering service within the housing with care schemes is designed so that service users can choose to eat with us and adopt a healthy eating and drinking regime with appropriate levels
of nutrition and hydration and follow any medical, cultural or personal diet.’

The manager of the service told us she is currently arranging some new training for staff with a national organisation who provide support for older people. The training will focus on meeting the nutrition and hydration needs of older people.

**Our judgement**
People who use the service who need assistance with nutrition and hydration are supported properly.
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
We have not spoken directly to people who use services in assessing this outcome.

Staff said the agency is very prompt in getting medical attention for people when it is needed.

Health professionals told us that the service communicates well with them and follow any care instructions that they give them well.

Other evidence
We did not ask the provider to assess themselves in this outcome area. However they provided us with information on how they are meeting this outcome area within another part of their assessment.

They said in the PCA, ‘We work with healthcare colleagues in PCTs, Local Authority and other care providers as well as the service user where appropriate in assessing someone’s needs and formulating a plan of care. This will include sharing the care, treatment and support with other agencies and providers as appropriate and continuing with pre-existing care and support arrangements where possible. We will...’
provide the maximum information we can to any other provider with the service user's agreement. In an emergency, we can pass the information quickly to avoid any delays.'

Our judgement
People who use the service receive safe and co-ordinated care, treatment and support where more than one provider is involved.
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

There are minor concerns with outcome 7: Safeguarding people who use services from abuse

Our findings

What people who use the service experienced and told us

People who use the service said they feel safe and would feel comfortable discussing concerns with staff and the manager of the agency. Their comments included:

“Gives me such peace of mind to know Mum is happy and safe”

“She is safe, she is in good hands”.

Staff said they had received training in safeguarding adults. They were able to say what action they would take if they suspected abuse or had an allegation of abuse made to them. They were very clear on their responsibility to report any allegations or suspicions of abuse.

Other evidence

At the last visit to the service in August 2009 we said staff had a good understanding of their role within the safeguarding of adults. We said they had
robust policies and procedures relating to safeguarding.

In the PCA, the provider said, ‘Our Whistleblowing Policy is clear that people who make a disclosure will be believed, listened to and treated with respect and fairness.’

Our review of the records we hold about the service show there have been no incidents reported to us of any safeguarding matters since we last visited the service.

However, during this review, in March 2011, the manager told us they had received a complaint regarding the care of someone who had used the service. The manager supplied us with a copy of the complaint and said they would be investigating the matters. The complaint raised some allegations of neglect, especially around recognising signs of ill health and dehydration. We spoke on the telephone with the manager and found these allegations had not been reported to the local authority as safeguarding matters. The manager had failed to recognise these allegations as suspected abuse.

Through discussion the manager realised that this needed to be reported as there were allegations of neglect made within the complaint. The manager reported this to the correct authorities after this discussion. The matter remains on-going.

Our judgement
This outcome was assessed as a minor concern. The provider has systems in place to make sure people who use the service are protected from abuse, or the risk of abuse. However, our evidence shows that allegations of suspected abuse have not been reported properly to the appropriate authority.
Outcome 8: Cleanliness and infection control

What the outcome says

Providers of services comply with the requirements of regulation 12, with regard to the Code of Practice for health and adult social care on the prevention and control of infections and related guidance.

What we found

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<th>Our judgement</th>
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<tr>
<td><strong>The provider is compliant</strong> with outcome 8: Cleanliness and infection control</td>
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<th>Our findings</th>
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| **What people who use the service experienced and told us**
People who use the service and their carers said staff maintain a clean environment and wear appropriate clothing when they are working in their home. One person said, “Manage her personal care well, always use gloves and aprons”.

**Other evidence**
Staff said they were trained in infection control. They said they had good supplies of gloves and aprons for when providing personal care.

**Our judgement**
People who use services can be confident that systems are in place to manage the prevention and control of infection.
Outcome 9: Management of medicines

What the outcome says

This is what people who use services should expect.

People who use services:
- Will have their medicines at the times they need them, and in a safe way.
- Wherever possible will have information about the medicine being prescribed made available to them or others acting on their behalf.

What we found

Our judgement

The provider is compliant with outcome 9: Management of medicines

Our findings

What people who use the service experienced and told us

People who use the service or their relatives said they received good support in managing their medication. One person said, “They give Mum her medication, when there was a problem in her not taking it, they listened to me and changed the care plan so that they now stay with her until she has taken it. “

Staff said, “We are trained to administer medication, feel confident “.

Other evidence

At our last visit to the service in August 2009 we said people were assisted to take medication by a staff group that has received training in this area.

Since that time we have received no information to indicate non-compliance in this outcome.

In the PCA, the provider said they carry out checks on medication administration and take prompt action on any issues they find.

Our judgement
People who use the service have their medicines at the times they need them and in a safe way.
Outcome 10: Safety and suitability of premises

What the outcome says

This is what people should expect.

People who use services and people who work in or visit the premises:
- Are in safe, accessible surroundings that promote their wellbeing.

What we found

Our judgement

The provider is compliant with outcome 10: Safety and suitability of premises

Our findings

What people who use the service experienced and told us

We have not spoken directly to people who use services in assessing this outcome.

Other evidence

At our last visit to the service in August 2009 we said the facilities in the office support the agency to provide a good service.

Since that time we have received no information to indicate non-compliance in this outcome.

Our judgement

Systems are in place to check the safety and suitability of premises.
Outcome 11: Safety, availability and suitability of equipment

What the outcome says

This is what people should expect.

People who use services and people who work in or visit the premises:
- Are not at risk of harm from unsafe or unsuitable equipment (medical and non-medical equipment, furnishings or fittings).
- Benefit from equipment that is comfortable and meets their needs.

What we found

Our judgement

The provider is compliant with outcome 11: Safety, availability and suitability of equipment

Our findings

What people who use the service experienced and told us

We have not spoken directly to people who use services in assessing this outcome.

Staff said they are trained to use equipment such as hoists for assisting people with moving and handling needs.

Other evidence

In the PCA, the provider told us they have procedures in place to assess any risks associated with equipment used.

We have received no information to indicate non-compliance in this outcome.

Our judgement

People who use the service and staff are not at risk of harm from unsafe or unsuitable equipment.
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

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<tr>
<td>The provider is compliant with outcome 12: Requirements relating to workers</td>
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<td>What people who use the service experienced and told us</td>
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<tr>
<td>Other evidence</td>
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<tr>
<td>At our last visit to the service in August 2009 we said, there were robust recruitment procedures in place. This helps protect people who use the service.</td>
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<tr>
<td>Since that time we have received no information to indicate non-compliance in this outcome.</td>
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<tr>
<td>People who use the service have their needs met by staff who have been properly recruited.</td>
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Outcome 13: Staffing

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 sufficient numbers of appropriate staff.

What we found

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<tr>
<td>The provider is compliant with outcome 13: Staffing</td>
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<tr>
<td>“Staff are kind and caring and seem well trained”</td>
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<tr>
<td>“Everyone’s so helpful”</td>
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<tr>
<td>“Very nice staff, always enough of them”</td>
</tr>
<tr>
<td>“Some carers are better than others but overall I am satisfied with them all”</td>
</tr>
<tr>
<td>“Staff are brilliant, I get on with all of them”.</td>
</tr>
<tr>
<td>Staff said they felt they had enough time to meet people’s needs during their visits. One said, “Enough time, everything is well organised”</td>
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</table>
At the last visit to the service in August 2009 people who use the service told us that staff were respectful and helpful.

As part of this review, the manager sent us an analysis of satisfaction surveys carried out with people who use the service in 2009. (The results from the 2010 survey are not yet available). In this, 88% of people said they were satisfied with the staff and how the staff responded to them. Most comments were positive and people spoke highly of the staff. For example, ‘Most of the carers are excellent’ and ‘All staff are very pleasant and helpful’. Four people had commented that they felt the scheme was short staffed at times. Two said there were delays in staff attending to them when they pulled the cord and needed attention such as help to the toilet.

**Other evidence**

The provider told us in the PCA that they try to make sure that regular staff supplied to people who use the service can build up relationships and get to know people’s needs well. This ensures continuity of care. They said, ‘Our aim is that no service user will receive personal care by anyone they do not know. In an emergency, where a different carer is used, we make careful introductions before they deliver care.’ They also said, ‘Each care staff member’s role includes getting to know the person well and to try to make sure the person knows the staff team. They may also develop a relationship with the families and others who are important to the service user.’

**Our judgement**

People who use services get good continuity of care and overall their needs are met by sufficient numbers of staff.
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

People who use the service and their relatives said that staff were well trained to meet people's needs. One said, “Staff are very ‘genned ‘up on dementia and understanding it, very good in their communication with Mum.” Another said, “Staff are kind and caring and seem well trained”.

Staff spoke highly of their training and support. They said their training included end of life care, first aid, dementia, nutrition and infection control. They said they had regular meetings with their manager or senior to discuss their job roles. They also said they are directly observed by senior staff when carrying out their job, to make sure they are ‘doing a good job’.

One staff member said, “Lovely organisation to work for”.

Other evidence

In the provider compliance assessment (PCA), the provider assessed itself as compliant in all aspects of this outcome area. However they said they are currently introducing a new individual training plan for staff and some staff do not yet have these in place. They said they are working towards all staff having these plans in place by the end of March 2011.
At the last visit to the service in August 2009 we said, staff were provided with a good standard of training that helps them fulfil their roles. In the PCA, the provider said they deliver an induction programme for staff that is based on the Skills for Care common induction standards. They said, ‘Staff are inducted and trained to enable them to provide a caring, efficient and safe care service.’

We also said at our last visit to the service that staff must be provided with a structured supervision programme. In the PCA, the provider said that staff have supervision with their line manager every eight weeks. This gives them opportunity to discuss their job roles and responsibilities and highlight any training needs.

Within the PCA, the provider told us of the current training that is given to staff. This included, safe medication handling, safeguarding vulnerable adults, dementia awareness, safe moving and handling, health and safety, end of life care, food safety and first aid. They also said they aim to have at least 70% of their staff qualified with a nationally recognised qualification.

**Our judgement**
People who use the service are safe and their health and welfare needs are met by competent staff.
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

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<th>Our judgement</th>
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<td>The provider is compliant with outcome 16: Assessing and monitoring the quality of service provision</td>
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<td>What people who use the service experienced and told us</td>
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People who use the service and their relatives said they are very satisfied with the service received. They said the manager and care workers check that they are happy with the care they are receiving. People said they have completed satisfaction surveys.

Other comments included:

“No grumbles”

“The manager is always around, talk to her most days, she’s lovely”

“The manager occasionally pops in to see if everything is alright”

“I speak to the manager daily, she always asks if everything’s alright for me and Mum”.
Other evidence
In the provider compliance assessment (PCA), the provider assessed itself as compliant in all aspects of this outcome area.

In the PCA the provider told us they had systems in place to make sure they monitor the standard of the service provided. They said they send annual satisfaction surveys to all people who use the service and they analyse any information received to see how improvements can be made to the service. They said, ‘We are part of a national organisation which follows a comprehensive and sophisticated quality assurance programme. This centres around gathering information from service users on their experience and satisfaction as well as analysing a variety of outcomes and measures.’ They also said, ‘We also seek to learn when things go wrong. We act on individual complaints and analyse trends to signal where things need improving. We also take action when accidents and incidents happen.’

In the PCA, the provider told us they have regular meetings with people who use the service and their families in order to gain feedback on the service. They also told us that their satisfaction surveys are analysed independently and that they meet personally with people who use the service to give feedback and updates on any action taken.

Information in the PCA also told us that the provider has systems in place to analyse accidents and incidents. They said, ‘Accidents and incidents are also analysed thoroughly within our management review process, and nationally at Board level, and any lessons learned, improved systems or practice etc transmitted to this service via Services Managers.’

The provider also told us they check the standard of care being given to people who use the service. They said, ‘Staff are trained and supervised in their work.’ The manager also told us they have systems in place to make sure staff receive regular 1-1 supervision meetings, which means staff are given the opportunity to discuss their role and responsibilities.

Our judgement
People who use the service benefit from safe, quality care, treatment and support. The provider monitors the quality of support people receive and identifies and monitors risks to people who use the service.
Outcome 17: Complaints

What the outcome says

This is what people should expect.

People who use services or others acting on their behalf:
- Are sure that their comments and complaints are listened to and acted on effectively.
- Know that they will not be discriminated against for making a complaint.

What we found

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<td>The provider is compliant with outcome 17: Complaints</td>
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<td>What people who use the service experienced and told us</td>
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People who use the service and their relatives said staff and management are very good at listening, and any comments are taken seriously. They said:

“I am aware how to complain and feel comfortable to do so if needed”

“No complaints but would talk to the manager if I had any”.

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<th>Other evidence</th>
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We did not ask the provider to assess themselves in this outcome area. However they provided us with information on how they are meeting this outcome area within another part of their assessment. They said, ‘We investigate all complaints, serious incidents, errors or staff misconduct thoroughly and report back to the individuals who have been affected. We have a policy of apologising, putting things right quickly and considering compensation where appropriate.’

At our last visit to the service in August 2009 we said, complaints were well recorded and investigated. In August 2010, we received a complaint about the
service and the care of a person using the service. The manager investigated the issues and has assured us that plans are in place to make sure there is no re-occurrence of the issues highlighted.

**Our judgement**
People who use the service or others acting on their behalf are sure that their comments and complaints are listened to and acted on effectively.
Outcome 21: Records

What the outcome says

This is what people who use services should expect.

People who use services can be confident that:
- Their personal records including medical records are accurate, fit for purpose, held securely and remain confidential.
- Other records required to be kept to protect their safety and well being are maintained and held securely where required.

What we found

Our judgement

The provider is compliant with outcome 21: Records

Our findings

What people who use the service experienced and told us

We have not spoken directly to people who use services in assessing this outcome.

Other evidence

In January 2010 we received copies of annual meetings with people who use the service and the service manager. These meetings included a check of the records of people who use the service. Wherever there were shortfalls noted such as a risk assessment needing to be updated, there were action plans in place with dates of when the action was to be completed by.

At our last visit to the service in August 2009, we said, appropriate measures were in place to maintain confidentiality and comply with the requirements of the Data Protection Act.

Since that time we have received no information to indicate non-compliance in this outcome.

Our judgement

People who use the service can be confident that their personal records are
accurate, fit for purpose, held securely and remain confidential. Other records, required to protect people's safety and wellbeing are maintained properly.
Outcome 18:
Notification of death of a person who uses the service

What the outcome says

This is what people who use services should expect.

People who use services:

Can be confident that deaths of people who use services are reported to the Care Quality Commission so that, where needed, action can be taken.

What we found

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<td>The provider is compliant with outcome 18 Notification of death of a person who uses the service</td>
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Our findings

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<th>What people who use the service experienced and told us</th>
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<td>We have not spoken directly to people who use services in assessing this outcome.</td>
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<td>In February 2011, we received a notification from the manager of the service, informing us of a death of a person using the service. There was a delay of over a month in the manager getting this information to us. We telephoned the manager to discuss this. She said this was an oversight on her behalf and that she had not been fully aware of the new system of notifying CQC of the deaths of people using the service. She said she would make sure we were informed in future, without delay.</td>
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<th>Our judgement</th>
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<tr>
<td>People can now be confident that deaths of people who use the service are reported promptly to the Care Quality Commission so that, where needed, action can be taken.</td>
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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 Adult 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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<td>Author</td>
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