

# Review of compliance

<p>InSafeHands Limited In Safe Hands Limited</p>	
<p><b>Region:</b></p>	<p>North West</p>
<p><b>Location address:</b></p>	<p>Regents Park 129 London Road Nantwich Cheshire CW5 6LW</p>
<p><b>Type of service:</b></p>	<p>Domiciliary care service</p>
<p><b>Date of Publication:</b></p>	<p>November 2011</p>
<p><b>Overview of the service:</b></p>	<p>InSafeHands is a domiciliary care service providing social care and support services in order to enable people to remain at home with as much independence as possible. It operates from an office on the outskirts of Nantwich and provides a service to people living in Crewe, Nantwich and the surrounding villages.</p>

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

## Our current overall judgement

**In Safe Hands Limited 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, carried out a visit on 5 October 2011, observed how people were being cared for, looked at records of people who use services, talked to staff, reviewed information from stakeholders and talked to people who use services.

### What people told us

We spoke with people who receive support from the agency to gain their views on how well the staff members were providing safe and appropriate support. Comments from people were wholly positive and included the following:

"The care is excellent, the carers are marvellous".

"Carers are very friendly".

"Has been absolutely brilliant".

"I am always treated with respect and dignity".

The people we spoke to also said that they were able to talk to staff members or would contact the office if they had any issues or concerns. One person told us:

"The manager is at the end of the phone".

We received positive comments about the staff and their approach. Comments included:

"My carers are very chatty and friendly".

"Very professional".

The staff members we spoke to were very positive about the agency and the quality of

care it was providing to people. One person said:

"Best move I ever made, I am so happy here".

## **What we found about the standards we reviewed and how well In Safe Hands Limited 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 are encouraged to express their views and these are taken into account by the staff.

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

People can be confident that their care and support needs will be met.

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

People who use the agency are protected from abuse.

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

People can be confident that they are being supported by competent and well trained staff members.

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

The service provides enough staff with the right qualities to meet the needs of the people they are supporting at the present time.

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

People can be confident that they are being supported by competent and well trained staff members.

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

The agency has a variety of monitoring processes in place to monitor the quality of the service they are providing.

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

There is an established complaints procedure within the service.

## **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 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 carried out home visits to four of the people who use the agency. They were asked about their experiences of how the service involved them and kept them informed. They confirmed they were encouraged to express their views and that these were taken into account so that the care or support they received was in line with their wishes. People told us they or their representative were given information about the service prior to it starting and that they had chosen this service themselves.

#### Other evidence

The files of six people were examined during the visit. These contained all the necessary details to ensure that people's needs were being met. They included care plans and risk assessments that were tailored to the individual persons needs. On the services initial visit to the individual, they are given a copy of the service user guide [a document explaining what the service can provide to people and how it will be done]. They are also given information about what to do if there are any issues.

#### Our judgement

People are encouraged to express their views and these are taken into account by the staff.

## 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 spoke with people who receive support from the agency to gain their views on how well the staff members were providing safe and appropriate support. They said their support needs were being met and that they were confident of the support they received from the staff.

Comments from people were wholly positive and included the following; "The care is excellent, the carers are marvellous", "Carers are very friendly ", "Has been absolutely brilliant", "I am always treated with respect and dignity".

##### Other evidence

During our visit we found that each person had a detailed individual plan of care; there was a copy in the office and an identical copy, with additional documents so that staff members can report on what they have done each day in the individual's own home. We looked at six care plans in more depth. The care plans gave very detailed information. They provided a good description of what a person needed to support them, for example when assisting with bathing.

Risk assessments were well completed and provided clear details as to any possible hazards and how they should be managed.

In addition to the above the care folder contained information about the individual's personal details, their family as well as information about the time and frequency of the visits to be provided. The copies kept in the individuals own homes also have additional information that staff members complete on a day to day basis; this included sheets for them to record their visits, medication administered and any monies spent on behalf of the person, for example, any shopping.

All of the files we looked at were well maintained, tidy and up to date. The information within them was also clear and well written.

**Our judgement**

People can be confident that their care and support needs will be met.

## Outcome 07: Safeguarding people who use services from abuse

### What the outcome says

This is what people who use services should expect.

People who use services:

\* Are protected from abuse, or the risk of abuse, and their human rights are respected and upheld.

### What we found

#### Our judgement

The provider is compliant with Outcome 07: Safeguarding people who use services from abuse

#### Our findings

##### What people who use the service experienced and told us

The people we spoke to said that they were able to talk to staff members or would contact the office if they had any issues or concerns. One person told us; "The manager is at the end of the phone".

##### Other evidence

Staff members are made aware of the process to follow should they suspect any abuse is occurring. This is mentioned in the induction process and is revisited during appraisals, supervisions, staff meetings and regular in house training days. The staff members we spoke to all confirmed that they had received safeguarding training recently.

People have a copy of the abuse procedures available within their service user guide and this was explained to them when they started using the agency.

The agency manager has regular contact with the people using the service and their representatives so that they have the confidence to report any issues including abuse.

CQC has not received any safeguarding referrals in respect of this agency.

We spoke with Cheshire East Council's contracting department prior to the inspection visit; they told us that they did not have any concerns about the service being provided by InSafeHands.

**Our judgement**

People who use the agency are protected from abuse.

## Outcome 12: Requirements relating to workers

### What the outcome says

This is what people who use services should expect.

People who use services:

\* Are safe and their health and welfare needs are met by staff who are fit, appropriately qualified and are physically and mentally able to do their job.

### What we found

#### Our judgement

The provider is compliant with Outcome 12: Requirements relating to workers

#### Our findings

##### What people who use the service experienced and told us

We spoke to people who use the agency and they told us that the staff members were very good and that they were well supported. We received positive comments about the staff and their approach. Comments included; "My carers are very chatty and friendly".

##### Other evidence

From the staff records we looked at we were able to see that the staff currently working for the agency had been appointed correctly. For example, all of the appropriate checks, references and CRB's had been carried out; they had received a proper induction and they were receiving regular training. In addition to this all staff members have one to one supervision meetings regularly and annual appraisals take place. These provide opportunities to discuss and address any training or other needs identified.

The staff members we spoke to were very positive about the agency and the quality of care it was providing to people. One person said; "Best move I ever made, I am so happy here".

##### Our judgement

People can be confident that they are being supported by competent and well trained staff members.

## 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

#### Our judgement

The provider is compliant with Outcome 13: Staffing

#### Our findings

##### What people who use the service experienced and told us

The people that we spoke to during the home visits were very positive about the quality of the staff members supporting them and how they carried out their work. One person told us; "very professional".

##### Other evidence

The staff roster was looked at during the inspection. This showed who was supporting an individual and when. This is also used to check if support could be provided to a new person using the service or to someone whose needs have changed. The agency tries to limit the numbers of staff members who visit each person so that there is less likelihood of any problems occurring.

We did not identify any staffing issues during our visit and the staff members we spoke to know the people they were supporting very well.

##### Our judgement

The service provides enough staff with the right qualities to meet the needs of the people they are supporting at the present time.

## 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 who use the service told us they feel that the staff members are able to deliver care and support needs effectively. They feel the staff approach is good and they feel confident will the care and support offered.

##### Other evidence

The staff members we spoke with confirmed that they had received an appropriate induction and that staff training was ongoing. Staff members have one to one supervision meetings regularly and annual appraisals take place. These provide opportunities to discuss and address any training or other needs identified. We were able to confirm this was happening when a staff member had their supervision meeting on the first day of our visit. We also saw there were records of meetings in the staff files that were looked at. The training matrix in place provides a breakdown of the training each person is due to attend every month. Sessions are arranged and staff members are expected to attend. This helps to ensure that all staff members are trained to a high standard and the people using the service receive support that is underpinned by a thorough training system.

The staff files also contained information on training undertaken; these included, moving and handling; medication awareness, health and safety and safeguarding of vulnerable adults, see outcome 7]. Where a DVD is used as a training resource the staff member will complete a questionnaire to ensure that they have understood the information given.

Staff members are able to undertake a National Vocational Qualification [NVQ] in Care [This is a nationally recognised qualification for people working in this profession].

**Our judgement**

People can be confident that they are being supported by competent and well trained staff members.

## 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

We spoke with people who use the agency and they told us they are consulted about their care and support and they feel their wishes are listened to.

##### Other evidence

We found that the agency uses a variety of methods in order to assess the quality of the service they are providing to people. This includes regular spot checks by senior staff members to ensure the care plan is being implemented and that all tasks within it are undertaken, we were able to confirm this was happening during the inspection. There is also regular contact via the telephone.

The agency sends out Satisfaction Questionnaires to the people using the service and they had recently sent out the latest batch of these; a good number of forms had been returned and the comments within them were very positive. The manager explained that she was in the process of reviewing these and would feedback to the people using the service and staff members when all of the information had been collated.

##### Our judgement

The agency has a variety of monitoring processes in place to monitor the quality of the service they are providing.

## 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

#### Our judgement

The provider is compliant with Outcome 17: Complaints

#### Our findings

##### What people who use the service experienced and told us

We spoke to people who use the agency and they told us that they felt the staff and management listened to their concerns and would act appropriately if needed. They also confirmed that they had no concerns about this service.

##### Other evidence

The service user guide that is provided to every individual within their care folder has a detailed section on Comments, Compliments and Complaints and the actions that need to be taken to address these.

There are forms and procedures in place to deal with any complaints that may arise.

The agency also has a book that records any comments or issues, no matter how small that the agency receives. All comments have an audit trail and an outcome. The comments can be requests, minor complaints/concerns or practical issues such as problems with a person's front door lock and a staff member raising a concern about the size of someone's walking frame. We think this is a good system because it helps to ensure things are dealt with properly.

CQC have not received any concerns about this service.

##### Our judgement

There is an established complaints procedure within the service.

# 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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