

Review of compliance

Sally and Sarah Sally and Sarah	
Region:	North East
Location address:	Sally and Sarah 3 Innovation Court, Yarm Road Stockton-on-Tees Cleveland TS18 3DA
Type of service:	Domiciliary care service
Date of Publication:	February 2012
Overview of the service:	Sally and Sarah is a small domiciliary care agency providing personal care to people in their own homes. The provision is predominantly within North Yorkshire with the majority of clients paying privately for their care and support. The regulated activity is that of personal care.

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

Our current overall judgement

Sally and Sarah 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 to check whether Sally and Sarah had made improvements in relation to:

- Outcome 04 - Care and welfare of people who use services
- Outcome 07 - Safeguarding people who use services from abuse
- Outcome 09 - Management of medicines
- Outcome 12 - Requirements relating to workers
- Outcome 16 - Assessing and monitoring the quality of service provision

How we carried out this review

We reviewed all the information we hold about this provider, carried out a visit on 27 January 2012, 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 relatives of people who used the service. They were extremely positive about the care and support provided to their relatives.

One relative said, "It is a very reliable service, they are very good, they come on time, stays for the required time." and "We have been so pleased, really satisfied with them."

Another relative said, "Everything they needed to do they would do, they provided the care that they needed and wanted and this enabled them to stay at home."

Relatives spoken with confirmed that before the service began, the providers visited and conducted an assessment and discussed specific needs.

What we found about the standards we reviewed and how well Sally and Sarah was meeting them

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

and supports their rights

Overall, we found that this essential standard was met.

We found that there were detailed care records for individual and copies of these records were now available with the offices of Sally and Sarah.

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

Overall, we found that this essential standard was met.

We found that the service had the required information and contact details for local authority safeguarding department. We found that staff had received training and had been provided with safeguarding information and contact details for safeguarding departments.

Outcome 09: People should be given the medicines they need when they need them, and in a safe way

Overall, we found that this essential standard was met.

We found that appropriate systems were in place for the management of medication and the training for staff.

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

Overall, we found that this essential standard was met.

We found that appropriate systems were in place for the recruitment and induction of staff.

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

Overall, we found that this essential standard was met.

We found systems in place for obtaining people's views in respect of the service and to monitor the quality of service provided to people.

Other information

Please see previous reports for more information about previous reviews.

**What we found
for each essential standard of quality
and safety we reviewed**

The following pages detail our findings and our regulatory judgement for each essential standard and outcome that we reviewed, linked to specific regulated activities where appropriate.

We will have reached one of the following judgements for each essential standard.

Compliant means that people who use services are experiencing the outcomes relating to the essential standard.

A **minor concern** means that people who use services are safe but are not always experiencing the outcomes relating to this essential standard.

A **moderate concern** means that people who use services are safe but are not always experiencing the outcomes relating to this essential standard and there is an impact on their health and wellbeing because of this.

A **major concern** means that people who use services are not experiencing the outcomes relating to this essential standard and are not protected from unsafe or inappropriate care, treatment and support.

Where we identify compliance, no further action is taken. Where we have concerns, the most appropriate action is taken to ensure that the necessary improvements are made. Where there are a number of concerns, we may look at them together to decide the level of action to take.

More information about each of the outcomes can be found in the *Guidance about compliance: Essential standards of quality and safety*

Outcome 04: Care and welfare of people who use services

What the outcome says

This is what people who use services should expect.

People who use services:

* Experience effective, safe and appropriate care, treatment and support that meets their needs and protects their rights.

What we found

Our judgement

The provider is compliant with Outcome 04: Care and welfare of people who use services

Our findings

What people who use the service experienced and told us

We spoke with relatives of people who used the service. They were extremely positive about the care and support provided to their relatives.

One relative said, "It is a very reliable service, they are very good, they come on time, stays for the required time." and "We have been so pleased, really satisfied with them."

Another relative said, "Everything they needed to do they would do, they provided the care that they needed and wanted and this enabled them to stay at home."

Relatives spoken with confirmed that before the service began, the providers visited and conducted an assessment and discussed specific needs.

Other evidence

We identified minor concerns at the last inspection in regard to people's care records. There was insufficient details recorded and the service did not have a copy of the care records in the office base.

During this inspection we saw that Sally and Sarah had a copy of people's care records within the office. We looked at the care records of three people who used the service. The assessments and care plans for people had been developed since the last inspection and contained much more detail, which provided staff with the information they needed to meet people's needs. Care records looked at contained a detailed life history of the person. They were very specific to the individual and it was clear that

people continued to be provided with care in the way they wanted it and that they had been fully consulted.

Staff spoken with confirmed that prior to delivering care to people for the first time, they were introduced to the person and were made aware of their assessments and care plans.

Our judgement

Overall, we found that this essential standard was met.

We found that there were detailed care records for individual and copies of these records were now available with the offices of Sally and Sarah.

Outcome 07: Safeguarding people who use services from abuse

What the outcome says

This is what people who use services should expect.

People who use services:

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

What we found

Our judgement

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

Our findings

What people who use the service experienced and told us

We did not speak to people about this outcome.

Other evidence

At the last inspection of Sally and Sarah it was identified that the service needed to obtain additional information in regard to the safeguarding of vulnerable adults. During this inspection we saw that the service had policies and procedures in place for safeguarding people and had obtained information about the local safeguarding protocols for the local authority areas they were working in.

We spoke with staff who confirmed that they had received protection of vulnerable adults and protection of children's training. They confirmed they had received information on how to contact the safeguarding departments in the local authority areas that they work in.

Staff spoken with were clear about the actions they would take, if abuse was suspected. We also saw that safeguarding had been discussed at staff meetings, as well as staff training.

Our judgement

Overall, we found that this essential standard was met.

We found that the service had the required information and contact details for local authority safeguarding department. We found that staff had received training and had been provided with safeguarding information and contact details for safeguarding

departments.

Outcome 09: 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 09: Management of medicines

Our findings

What people who use the service experienced and told us

We did not speak to people about this outcome.

Other evidence

At the last inspection we found that the management of medication was not robust enough and that this needed to be developed further.

We found that much work had been implemented since the last inspection. Policies and procedures had been updated and staff had received training. They had also had their medication competencies assessed. We saw certificates to confirm that training had taken place and completed competency records. Staff also discussed the training they had received and they confirmed they had been observed administering medication.

Our judgement

Overall, we found that this essential standard was met.

We found that appropriate systems were in place for the management of medication and the training for staff.

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 with relatives of people who used the service. They were extremely positive about the staff who provide care to their relatives.

One relative said, "They were all absolutely friendly, eager to help, this was the whole staff." and "It was also the support given to the family as well, they helped me to cope, their care extended to me and helped my fears disappear."

When asked, relatives confirmed that they believed staff had the knowledge, understanding and skills necessary to provide the care and support needed.

Other evidence

At the last inspection we had concerns about the robustness of recruitment of staff.

During this inspection, we looked at the recruitment records for three staff, one of who had been the most recently employed person. We saw that specific dates of previous employment history were now being recorded on the application forms. Contracts of employment were in place, which detailed the date employment commenced and the recruitment files were in a much more organised format.

The induction for staff had also been developed further and we saw that skills for care common foundation standards had been implemented. Staff spoken to confirmed that when they commenced employment they had completed an induction and also worked in a shadowing capacity.

We also saw that a record had been developed to show that staff had been issued with the staff handbook as well as other information such as safeguarding.

Our judgement

Overall, we found that this essential standard was met.

We found that appropriate systems were in place for the recruitment and induction of 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

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

The relatives we spoke with said there was regular contact with Sally and Sarah, that reviews take place and that they have been extremely satisfied with the care and support provided by them.

One relative said, "Yes, they do contact me, I am very satisfied with the service, very happy with them."

Other evidence

Since the last inspection, a more formal system to obtain the views of people who used the service had been developed. We saw that surveys had been produced and sent to people who used the service or their relatives, this was known as, 'Customer talkback.'

The service is currently small, as such, the response to surveys was also small. It was confirmed with the providers, that as the service develops there will be further implementation of this.

We saw numerous letters and cards from people expressing their thanks for the service provided.

Staff confirmed that there were regular staff meetings and that the providers were extremely approachable and supportive. We saw minutes of the staff meetings, which detailed plans for development and improvements to the service.

Our judgement

Overall, we found that this essential standard was met.

We found systems in place for obtaining people's views in respect of the service and to monitor the quality of service provided to people.

What is a review of compliance?

By law, providers of certain adult social care and health care services have a legal responsibility to make sure they are meeting essential standards of quality and safety. These are the standards everyone should be able to expect when they receive care.

The Care Quality Commission (CQC) has written guidance about what people who use services should experience when providers are meeting essential standards, called *Guidance about compliance: Essential standards of quality and safety*.

CQC licenses services if they meet essential standards and will constantly monitor whether they continue to do so. We formally review services when we receive information that is of concern and as a result decide we need to check whether a service is still meeting one or more of the essential standards. We also formally review them at least every two years to check whether a service is meeting all of the essential standards in each of their locations. Our reviews include checking all available information and intelligence we hold about a provider. We may seek further information by contacting people who use services, public representative groups and organisations such as other regulators. We may also ask for further information from the provider and carry out a visit with direct observations of care.

When making our judgements about whether services are meeting essential standards, we decide whether we need to take further regulatory action. This might include discussions with the provider about how they could improve. We only use this approach where issues can be resolved quickly, easily and where there is no immediate risk of serious harm to people.

Where we have concerns that providers are not meeting essential standards, or where we judge that they are not going to keep meeting them, we may also set improvement actions or compliance actions, or take enforcement action:

Improvement actions: These are actions a provider should take so that they **maintain** continuous compliance with essential standards. Where a provider is complying with essential standards, but we are concerned that they will not be able to maintain this, we ask them to send us a report describing the improvements they will make to enable them to do so.

Compliance actions: These are actions a provider must take so that they **achieve** compliance with the essential standards. Where a provider is not meeting the essential standards but people are not at immediate risk of serious harm, we ask them to send us a report that says what they will do to make sure they comply. We monitor the implementation of action plans in these reports and, if necessary, take further action to make sure that essential standards are met.

Enforcement action: These are actions we take using the criminal and/or civil procedures in the Health and Social Care Act 2008 and relevant regulations. These enforcement powers are set out in the law and mean that we can take swift, targeted action where services are failing people.

Information for the reader

Document purpose	Review of compliance report
Author	Care Quality Commission
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