

We are the regulator: Our job is to check whether hospitals, care homes and care services are meeting essential standards.

Maksanus Care Services Limited

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We inspected the following standards as part of a routine inspection. This is what we found:

Respecting and involving people who use services	✓ Met this standard
Care and welfare of people who use services	✓ Met this standard
Safeguarding people who use services from abuse	✓ Met this standard
Requirements relating to workers	✓ Met this standard
Supporting workers	✓ Met this standard
Assessing and monitoring the quality of service provision	✓ Met this standard

Details about this location

Registered Provider	Maksanus Care Services Limited
Registered Manager	Mr. Ben Koroma
Overview of the service	Maksanus Care Services Limited is a domiciliary care service based in North-West London. The location is currently registered for the regulated activity of personal care. It is a small sized agency currently providing care and support to a number of people living in their home.
Type of service	Domiciliary care service
Regulated activity	Personal care

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Summary of this inspection

Why we carried out this inspection

This was a routine inspection to check that essential standards of quality and safety referred to on the front page were being met. We sometimes describe this as a scheduled inspection.

This was an announced inspection.

How we carried out this inspection

We looked at the personal care or treatment records of people who use the service, carried out a visit on 10 July 2013, observed how people were being cared for and talked with people who use the service. We talked with carers and / or family members and talked with staff.

What people told us and what we found

We spoke with two people who used the service by phone. They told us that they had been treated with respect and dignity. One person told us "I am happy with my care and have no complaints". Another told us "they are perfect".

We spoke with two members of staff who were both aware of the importance of treating people with respect and ensuring that people were always given a choice. One member of staff told us that it was important for people to be as independent as possible whilst supporting them.

The care of people had been assessed and care plans prepared. These were signed by people receiving the care. People we spoke with were positive about care workers and indicated that they were reliable and competent.

Staff we spoke with told us that they felt supported by management and felt comfortable raising concerns with them.

We observed that the provider had an effective system to assess and monitor the quality of service that people receive.

You can see our judgements on the front page of this report.

More information about the provider

Please see our website www.cqc.org.uk for more information, including our most recent judgements against the essential standards. You can contact us using the telephone number on the back of the report if you have additional questions.

There is a glossary at the back of this report which has definitions for words and phrases we use in the report.

Our judgements for each standard inspected

Respecting and involving people who use services ✓ Met this standard

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

Our judgement

The provider was meeting this standard.

People's privacy, dignity and independence were respected. Their views and experiences were taken into account in the way the service was provided and delivered in relation to their care.

Reasons for our judgement

We spoke with two people who used the service and they told us that they were always treated with respect and dignity and they were satisfied with the care they received. One person told us that the care provided was "perfect in every way" and another person said that the care received was "very good" and they had no concerns.

One person told us that the care workers always explained what they were doing before actually doing it. This person told us that care workers never did anything without seeking permission first.

During the inspection, we looked at the care files for five people who received care from the provider. We observed that all the files contained an agreed support plan that was signed by people receiving the care and the provider. The support plan contained information about people's needs, goals and how to deliver the required support. One member of staff who was responsible for the day to day running of the service told us that they always ensured that people understood their care plan before signing the support plan. This ensured that people were involved in their care.

We noted that special preferences and the choices of people were recorded in their care records. There was a section in each file which noted what people's likes and dislikes were.

Two members of staff told us that they understood the importance of respecting people's confidentiality and ensured that they never discussed people's care with other people. One member of staff told us that all staff understood that it was important to respect people's privacy especially when going into their home.

One member of staff told us that they encouraged people to be independent as much as possible whilst providing them with the support they needed.

We observed that the provider had a service user guide and we were told that a copy of this was given to people who used the service.

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

Our judgement

The provider was meeting this standard.

People experienced care, treatment and support that met their needs and protected their rights.

Reasons for our judgement

People we spoke with told us that staff were supportive and caring. One person we spoke with told us that carer workers were "helpful and always thought about the little things that matter". Another person told us that they were always given a choice and involved in decision making.

During the inspection, we looked at five care files and noted that they all included day support plans, full care assessments and up to date risk assessments. We observed that various risk assessments had been carried out and included moving and handling, accommodation and medication risk assessments.

We noted that all files contained a detailed care plan which included information about people's preferred daily routines, interests, likes and dislikes.

We spoke with a member of staff who was responsible for the day to day running of the agency and she explained that a full care assessment was carried out for each person to ensure that their care needs were identified and supported accordingly. She also explained that risk assessments were reviewed at least twice a year or more if people's circumstances changed. We were told that staff were encouraged to observe and monitor people's progress and if they noticed changes they reported this to management.

One member of staff told us that they always ensured people were given a choice and were given the opportunity to make their own decisions.

Staff had undergone emergency first aid training and training records confirmed this.

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

Our judgement

The provider was meeting this standard.

People who use the service were protected from the risk of abuse, because the provider had taken reasonable steps to identify the possibility of abuse and prevent abuse from happening.

Reasons for our judgement

One person who used the service told us that care staff treated people well and they felt safe under their care. Another person told us that if they were worried or unhappy about their care, they felt comfortable raising this.

Staff told us that they had received training in safeguarding people. This was evidenced in their training records. When we discussed safeguarding with staff, they were aware of the procedure and action to take when responding to allegations or incidents of abuse.

The agency had a safeguarding policy but this had not been updated to reflect recent changes and the role of the Disclosure and Barring Service (DBS). The provider may wish to note that it was not evident when the safeguarding policy had been produced and last reviewed as it was not dated.

We observed that that the agency did not have a copy of the recent London guidance document "Protecting Adults at Risk: London Multi-Agency Policy and Procedure to Safeguard Adults from Abuse".

At the time of the inspection, the provider did not have any outstanding safeguarding concerns.

Requirements relating to workers

✓ Met this standard

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

Our judgement

The provider was meeting this standard.

People were cared for, or supported by, suitably qualified, skilled and experienced staff.

Reasons for our judgement

At the last inspection carried out in June 2011, we made some suggestions in relation to this outcome. We observed that staff records were in place but that they had not been stamped by the referee or verbally verified by the employer. It was therefore not clear if references were authentic.

During this inspection in July 2013, we looked at the files for three members of staff who were relatively new. We noted that in all files, at least two references had been obtained. Further, the provider had verified the references received and evidence of this was recorded on the reference itself. The provider told us that they now ensured that they verified all references received and this was evident in the documentation we looked at.

We observed that the staff files we looked at contained all the necessary documents such as criminal records check, proof of ID, right to work in the UK and employment history.

The provider told us that the recruitment process involved a face to face interview and a written test. We observed that there was an effective recruitment and selection process in place.

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

Our judgement

The provider was meeting this standard.

People were cared for by staff who were supported to deliver care and treatment safely and to an appropriate standard.

Reasons for our judgement

During our visit we looked at three staff records and found that these contained information relating to an induction that each staff had attended. A member of staff who provided training to staff informed us that the induction was for three days and covered a wide range of topics which included the provider's code of practice, fire safety, manual handling, health and safety and record-keeping. We were shown a copy of the staff handbook which was provided to each member of staff during their induction. We noted that this handbook included information about principles of care, equal opportunities and adult abuse.

The member of staff responsible for the day to day running of the agency told us that she met with each care worker once a week to discuss their progress and any concerns they had. She told us that there was an "open door policy" where staff were able to contact her when necessary.

One member of staff told us that they felt "very supported" by their management and felt comfortable raising queries.

We observed the training records for staff and noted that all staff had infection control, medication, moving and handling, health and safety, food hygiene, risk assessment and emergency first aid training.

The provider explained that staff received formal supervisions at least three times a year as well as spot checks as and when necessary. This enabled the provider to monitor care workers progress. Staff also received an appraisal once a year. We saw evidence of supervisions and spot checks being documented in the files we looked at.

The provider told us that they encouraged staff to advise them of any training needs so that they could provide the required training support.

We observed that staff received appropriate professional development.

Assessing and monitoring the quality of service provision

✓ Met this standard

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

Our judgement

The provider was meeting this standard.

The provider had an effective system to regularly assess and monitor the quality of service that people receive.

Reasons for our judgement

People who use the service, their representatives and staff were asked for their views about their care and treatment and they were acted on.

People we spoke with told us that they felt listened to and were happy with the quality of care provided.

The provider explained to us that they had a number of ways of checking the quality of their service which included telephone questionnaires, spot checks carried out on care staff and an annual services review questionnaire. Files we looked at demonstrated that the provider had recently carried out telephone questionnaires and had received positive feedback from people who used the service. The provider told us that they carried out these questionnaires to ensure that people were satisfied with the level of care provided to them.

We observed that the provider had an annual services review questionnaire but we noted that since the majority of people were relatively new to the service that this questionnaire had not yet been carried out for all people. The provider informed us that these questionnaires would be sent out later in the year depending on when people first received care.

We noted that in an annual service review questionnaire completed in March 2013, one person said that they were "very happy with the care provided" and said that the carer workers were "very friendly, professional and caring and always willing to support".

The provider explained that they used the responses from questionnaires in order to monitor their service. They also told us that if a particular care worker received good feedback, they would be informed of this.

The feedback recorded in the surveys and questionnaires was generally very positive. We did see that a few complaints had been raised, but these had been dealt with by the provider.

About CQC inspections

We are the regulator of health and social care in England.

All providers of regulated health and social 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 essential standards are described in the Health and Social Care Act 2008 (Regulated Activities) Regulations 2010 and the Care Quality Commission (Registration) Regulations 2009. We regulate against these standards, which we sometimes describe as "government standards".

We carry out unannounced inspections of all care homes, acute hospitals and domiciliary care services in England at least once a year to judge whether or not the essential standards are being met. We carry out inspections of other services less often. All of our inspections are unannounced unless there is a good reason to let the provider know we are coming.

There are 16 essential standards that relate most directly to the quality and safety of care and these are grouped into five key areas. When we inspect we could check all or part of any of the 16 standards at any time depending on the individual circumstances of the service. Because of this we often check different standards at different times.

When we inspect, we always visit and we do things like observe how people are cared for, and we talk to people who use the service, to their carers and to staff. We also review information we have gathered about the provider, check the service's records and check whether the right systems and processes are in place.

We focus on whether or not the provider is meeting the standards and we are guided by whether people are experiencing the outcomes they should be able to expect when the standards are being met. By outcomes we mean the impact care has on the health, safety and welfare of people who use the service, and the experience they have whilst receiving it.

Our inspectors judge if any action is required by the provider of the service to improve the standard of care being provided. Where providers are non-compliant with the regulations, we take enforcement action against them. If we require a service to take action, or if we take enforcement action, we re-inspect it before its next routine inspection was due. This could mean we re-inspect a service several times in one year. We also might decide to re-inspect a service if new concerns emerge about it before the next routine inspection.

In between inspections we continually monitor information we have about providers. The information comes from the public, the provider, other organisations, and from care workers.

You can tell us about your experience of this provider on our website.

How we define our judgements

The following pages show our findings and regulatory judgement for each essential standard or part of the standard that we inspected. Our judgements are based on the ongoing review and analysis of the information gathered by CQC about this provider and the evidence collected during this inspection.

We reach one of the following judgements for each essential standard inspected.

✓ Met this standard This means that the standard was being met in that the provider was compliant with the regulation. If we find that standards were met, we take no regulatory action but we may make comments that may be useful to the provider and to the public about minor improvements that could be made.

✗ Action needed This means that the standard was not being met in that the provider was non-compliant with the regulation. We may have set a compliance action requiring the provider to produce a report setting out how and by when changes will be made to make sure they comply with the standard. We monitor the implementation of action plans in these reports and, if necessary, take further action. We may have identified a breach of a regulation which is more serious, and we will make sure action is taken. We will report on this when it is complete.

✗ Enforcement action taken If the breach of the regulation was more serious, or there have been several or continual breaches, we have a range of actions we take using the criminal and/or civil procedures in the Health and Social Care Act 2008 and relevant regulations. These enforcement powers include issuing a warning notice; restricting or suspending the services a provider can offer, or the number of people it can care for; issuing fines and formal cautions; in extreme cases, cancelling a provider or managers registration or prosecuting a manager or provider. These enforcement powers are set out in law and mean that we can take swift, targeted action where services are failing people.

How we define our judgements (continued)

Where we find non-compliance with a regulation (or part of a regulation), we state which part of the regulation has been breached. Only where there is non compliance with one or more of Regulations 9-24 of the Regulated Activity Regulations, will our report include a judgement about the level of impact on people who use the service (and others, if appropriate to the regulation). This could be a minor, moderate or major impact.

Minor impact - people who use the service experienced poor care that had an impact on their health, safety or welfare or there was a risk of this happening. The impact was not significant and the matter could be managed or resolved quickly.

Moderate impact - people who use the service experienced poor care that had a significant effect on their health, safety or welfare or there was a risk of this happening. The matter may need to be resolved quickly.

Major impact - people who use the service experienced poor care that had a serious current or long term impact on their health, safety and welfare, or there was a risk of this happening. The matter needs to be resolved quickly

We decide the most appropriate action to take to ensure that the necessary changes are made. We always follow up to check whether action has been taken to meet the standards.

Glossary of terms we use in this report

Essential standard

The essential standards of quality and safety are described in our *Guidance about compliance: Essential standards of quality and safety*. They consist of a significant number of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2010 and the Care Quality Commission (Registration) Regulations 2009. These regulations describe the essential standards of quality and safety that people who use health and adult social care services have a right to expect. A full list of the standards can be found within the *Guidance about compliance*. The 16 essential standards are:

Respecting and involving people who use services - Outcome 1 (Regulation 17)

Consent to care and treatment - Outcome 2 (Regulation 18)

Care and welfare of people who use services - Outcome 4 (Regulation 9)

Meeting Nutritional Needs - Outcome 5 (Regulation 14)

Cooperating with other providers - Outcome 6 (Regulation 24)

Safeguarding people who use services from abuse - Outcome 7 (Regulation 11)

Cleanliness and infection control - Outcome 8 (Regulation 12)

Management of medicines - Outcome 9 (Regulation 13)

Safety and suitability of premises - Outcome 10 (Regulation 15)

Safety, availability and suitability of equipment - Outcome 11 (Regulation 16)

Requirements relating to workers - Outcome 12 (Regulation 21)

Staffing - Outcome 13 (Regulation 22)

Supporting Staff - Outcome 14 (Regulation 23)

Assessing and monitoring the quality of service provision - Outcome 16 (Regulation 10)

Complaints - Outcome 17 (Regulation 19)

Records - Outcome 21 (Regulation 20)

Regulated activity

These are prescribed activities related to care and treatment that require registration with CQC. These are set out in legislation, and reflect the services provided.

Glossary of terms we use in this report (continued)

(Registered) Provider

There are several legal terms relating to the providers of services. These include registered person, service provider and registered manager. The term 'provider' means anyone with a legal responsibility for ensuring that the requirements of the law are carried out. On our website we often refer to providers as a 'service'.

Regulations

We regulate against the Health and Social Care Act 2008 (Regulated Activities) Regulations 2010 and the Care Quality Commission (Registration) Regulations 2009.

Responsive inspection

This is carried out at any time in relation to identified concerns.

Routine inspection

This is planned and could occur at any time. We sometimes describe this as a scheduled inspection.

Themed inspection

This is targeted to look at specific standards, sectors or types of care.

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