

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

Blessings Healthcare Services Limited

Suite No 8 Shieling House, 30 Invincible Road,
Farnborough, GU14 7QU

Date of Inspection: 28 November 2012

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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
Assessing and monitoring the quality of service provision	✓ Met this standard

Details about this location

Registered Provider	Blessings Healthcare Services Limited
Registered Manager	Mrs. Maria Salome Nyeke
Overview of the service	This Domiciliary care agency is registered to provide personal care to people in their own homes. The agency currently provides this care in the Farnborough area of Hampshire.
Type of service	Domiciliary care service
Regulated activity	Personal care

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When you read this report, you may find it useful to read the sections towards the back called 'About CQC inspections' and 'How we define our judgements'.

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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 unannounced 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 28 November 2012, observed how people were being cared for and talked with staff.

What people told us and what we found

At the time of the inspection we found that the provider only delivered care to one person and therefore we did not seek their views directly as anything referred to would identify them. We did seek evidence of compliance through other means in this instance.

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.

People's 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

During our inspection we spoke with the registered manager. They told us that they promoted their service by distributing leaflets to businesses and to people's homes.

We saw an example of these leaflets and saw that they contained useful information about the services they provided, useful contact numbers and statements about enabling people to be as independent as possible and about the service ensuring people's privacy, dignity and lifestyles were respected.

The registered manager told us that when people enquired about the service they would organise to have a meeting with the person and their family. During this meeting, the registered manager told us that, people and their families were given more information about the services they offered and the services they did not offer. This meant that people who were considering using the service understood the care and treatment choices available to them.

People were also asked about their choices, their needs and their preferences. The registered manager said 'we ask the person what they want, ask them how we should do it, when we should do it and where we should do it'. This meant that people were asked to express their views and were involved in making decisions about their care and treatment.

We saw, from sampling one person's care plan that the service offered person centred care and that people's wishes had been sought.

We were told by the registered manager that the care plan had been drafted following the initial meeting with the person and their family and that following this it had been sent to them for approval and to ask for feedback. We saw evidence that the person's family had reviewed the care plan and had made suggestions to improve it before the person started receiving care. This meant that people's views were sought in relation to their care.

When looking at the care plan we saw that that personal details had been obtained from

the service such as the person's preferred name and their likes and dislikes. We saw that this care plan had been signed by the person it referred to and by their family member.

The registered manager told us that they and their staff always respected people's wants and decisions.

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

Prior to a person using the service we saw evidence that a meeting had taken place between the registered manager, the person and their family. We saw evidence that during this meeting a record of the person's care needs had been discussed and an initial assessment had taken place.

We saw that the service had developed a decision sheet which consisted of a risk assessment to determine whether the service could meet all people's required needs. This meant that should the service not be able to meet people's needs they would establish this following the initial meeting and refer them onto someone else.

Within the care plan we looked at, we saw that several risk assessments had taken place. Where risks had been identified we saw that action plans had been created to reduce or minimise the risks. These also gave the staff detailed information about how to minimise risks. This meant that people's care and treatment was planned and delivered in a way that ensured their safety and welfare.

We also saw that the care plan had been regularly reviewed and that changes to the person's needs had been documented. This meant that the service was regularly monitoring people's care needs in order to promote their safety and welfare.

We saw that the service had emergency situation policies and procedures which meant that there were arrangements in place to deal with foreseeable emergencies.

We looked at the person's daily notes and found these to contain a lot of detail and information. We saw that these notes had been reviewed and that information identified in them had been transferred over to the care plan.

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

During our inspection we spoke with the registered manager who was able to clearly tell us about their safeguarding policy and procedures.

They were able to tell us the meaning of the term safeguarding, what signs of concern they would look out for and what different types of abuse could take place.

We saw that as well as an up to date safeguarding policy and an up to date whistleblowing policy, the service also had a lot of researched information about safeguarding. We saw several documents from the Hampshire Safeguarding Adults Information. We saw lists of contact numbers, email addresses and useful contacts which were available for people to use.

The registered manager told us that each person was provided with a user handbook which contained a copy of their care plan, the complaints procedure, information about the service, their statement of purpose and a document detailing their rights.

We looked at three staff files and saw that each member of staff had attended safeguarding training.

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

During our inspection we spoke to the registered manager who told us that due to the service only having one client at the time of the inspection they delivered the care themselves. They told us that they had recruited three members of care staff; however they worked very few hours due to the number of people receiving a service at the time of the inspection.

We looked at all three staff members' staff files.

We saw that each staff member's file contained a current Criminal Records Bureau check, an application form, a full employment history, at least two photographic identity documents, interview notes and at least two references.

This meant that appropriate checks had been undertaken by the service before staff began work.

We also saw that each member of staff had received induction training and several training records were kept within their staff files.

The service also had a recruitment and selection policy which we could see was up to date and had been regularly reviewed.

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.

The provider had an effective system in place to identify, assess and manage risks to the health, safety and welfare

Reasons for our judgement

During our inspection we looked at the service's policies and procedures. We saw that each of these had been reviewed regularly and were up to date.

We saw a privacy, dignity and respect policy, a care needs assessment policy, a compliments and complaints procedure policy, a data protection policy, an accidents and emergency policy, a health and safety policy, a quality assurance policy and a records policy.

The registered manager told us that the service was in regular and frequent contact with people and their family and that they continuously sought feedback. We saw examples of letters received from a person's family member providing the service with feedback and suggestions.

The registered manager also told us that within service user handbooks which were given to people there was a copy of the complaints procedure.

We sampled the complaints procedure log book and saw that at the time of the inspection no complaints had been received. There were however procedures in place to record actions taken as well as dates and times in the event of a complaint being received.

The registered manager told us that they had received some feedback from a person's family member in relation to the person's preferences. The registered manager told us that this issue had been discussed at length with the person and their family and that different options had been explored before everyone had come to a mutual decision. This meant that the service took account of complaints and comments to improve the service. It also meant that people and their representatives were asked for their views about their care and treatment and that these were acted on.

We looked at one person's care plan and saw that this had been regularly updated and that new information about the person's changing needs had been recorded and had led to changes to the risk assessments. This meant that the provider had an effective system in place to identify, assess and manage risks to the health, safety and welfare of people who

used the service.

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 dentists and other services at least once every two years. 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 but we always inspect at least one standard from each of the five key areas every year. We may check fewer key areas in the case of dentists and some other services.

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. We make a judgement about the level of impact on people who use the service (and others, if appropriate to the regulation) from the breach. 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.

Contact us

Phone: 03000 616161

Email: enquiries@ccq.org.uk

Write to us
at: Care Quality Commission
Citygate
Gallowgate
Newcastle upon Tyne
NE1 4PA

Website: www.cqc.org.uk

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