

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

## Knighton Road

28 Knighton Road, Leicester, LE2 3HH

Date of Inspection: 19 September 2013

Date of Publication: October 2013

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

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

## Details about this location

Registered Provider	Domiciliary Care Services (UK) Limited
Registered Manager	Miss Donna Marie Louise Preston
Overview of the service	Knighton Road Domiciliary Care Services (UK) Limited provides personal care and support to people in their own homes.
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

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### Why we carried out this inspection

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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.

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### How we carried out this inspection

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We looked at the personal care or treatment records of people who use the service, carried out a visit on 19 September 2013, talked with people who use the service and talked with carers and / or family members. We talked with staff.

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### What people told us and what we found

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We asked people and their relatives for their views about the care and supported they received. People's comments included: "Very happy with the service, they're flexible if you need to change your visit times." "Very good and responsive service. I can't speak highly enough about the agency. The care staff have really taken on board my relatives dementia and the consistency of care staff mean they are safe and well cared for." "I can't think of a situation they haven't managed well, they contact me with any concerns." "I've had some lovely ladies (staff) to care for me, they're generally speaking on time and if they're going to be late for any reason they always let you know and why." "The staff are very considerate and very kind." "I'm very happy. I have the same girls (staff) looking after me, they're so kind and I like the consistency of having the same people. They're really, really good and I do appreciate them." "I have no concerns, they're always kind and courteous and if they're running a little late they always apologise and explain why. We are supported by the same staff and we like that."

We found people's care plans and records provided information which enabled staff to provide the care and support each person required. Staff told us that where they noted changes to the health or welfare of people they reported these to a member of the management team who then liaised with people's relatives or health and social care professionals where appropriate to ensure peoples care packages were reviewed in order that they received the care they needed.

Staff we spoke with told us they had regular access to training and that they were supported by the management team through supervision, one to one 'spot checks' and meetings. The supporting of staff was part of the providers' quality assurance system, which included speaking with people who used the service and seeking their views.

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

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## More information about the provider

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Please see our website [www.cqc.org.uk](http://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

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### Our judgement

The provider was meeting this standard.

People's views and experiences were taken into account in the way the service was provided and delivered in relation to their care.

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### Reasons for our judgement

We spoke with nine people who used the service or their relatives. We asked people what written information the agency had provided them with. People told us they had received information about how to contact the agency as well as information about how to make a complaint. People told us they also had a copy of their care plan so they knew what care and support they expected to receive. The provider may find it useful to note that the people who use the service were not provided with information setting out the aims and objectives, values and beliefs of the service and how the provided intended to monitor the service it provides.

We spoke with nine people who used the service or their relatives they told us that they were able to express their views and were involved in making decisions about their care. People told us: "The manager has been out to see us several times to talk about our care package." "They're very responsive and they have visited several times to discuss and make changes to my father's care plan." We asked people whether their privacy and dignity was respected. People told us: "The staff always consider my dignity; they treat me with respect and are very courteous and polite." They're very mindful of their attitude and approach."

The registered manager told us that most of the people who used the service were able to make decisions about their care and support and where people were not able to do so due to illness or disability the service liaised with people's relatives where appropriate or social care professionals. We found people's diversity; values and human rights were respected. Care plans showed that people's cultural needs were considered as part of the assessment process when people were referred to the service. The service provided support to people from diverse religious and cultural backgrounds and had a multicultural staff team which meant people's diversity and values were respected. Staff in some instances were able to speak with people in their first and preferred language.

Relatives we spoke with told us the ability of staff to speak with people in their first language was important to them, especially where their relative had dementia. A relative

we spoke with did raise a concern that staff had spoken to other in their first language, which their relative (who received care) could not understand. We read in the minutes of the most recent staff meeting that the registered manager had identified this is an area of concern and had reminded staff that they were to speak to each other and to the person receiving a service in a language which could be understood by the person to whom they were providing care.

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

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**Our judgement**

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The provider was meeting this standard.

Care and treatment was planned and delivered in a way that was intended to ensure people's safety and welfare.

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**Reasons for our judgement**

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We spoke with nine people who used the service or their relative. We asked them for their views about the care they received from staff and their thoughts about the agency. "Very good and responsive service. I can't speak highly enough about the agency. The care staff have really taken on board my relatives dementia and the consistency of care staff mean they are safe and well cared for." "I've had some lovely ladies (staff) to care for me, they're generally speaking on time and if they're going to be late for any reason they always let you know and why." "The staff are very considerate and very kind." "I have no concerns, they're always kind and courteous and if they're running a little late they always apologise and explain why. We are supported by the same staff and we like that."

We looked at the records including the care plans of twelve people who used the service and found care plans provided clear guidance to staff about how the persons' care should be delivered. We found people's needs were assessed and care was planned and delivered in line with their individual plan. Key information about the person's health, well-being and social network had been gathered and recorded. We found that care plans had been updated when people's needs had changed which showed that the service was responsive to changes in people's well-being. Daily records detailed the care and support that had been provided and showed staff were providing care in accordance with the person's care plan.

Records contained risk assessments relating to the environment where care was being provided. These identified whether there were any risks to people and demonstrated that the service was considering people's safety. Care plans were regularly reviewed by the registered manager who visited people in their own home to review their care package with the person and where appropriate their relatives. People who used the service and their relatives told us that their care plan was regularly reviewed and in some instances the frequency was determined by when their needs changed or the number or times of calls by the agency needed to be reconsidered.

The registered manager told us that when someone was new to the service following the initial assessment undertaken by social services they then visited the person within their own home within the two first weeks to find out whether the person was happy with the service and to review the care package. After the initial review the care package provided

was then reviewed twice a year or with greater frequency if the needs of the person changed. The registered manager told us that where they noted changes to peoples' needs these were brought to the attention of the person's social worker. The social worker would then review the person's needs and make any changes to the persons care package, which were then implemented by the service.

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

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### **Our judgement**

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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.

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### **Reasons for our judgement**

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People told us that they felt safe with the staff who visited them. One person explained: "I feel very safe with them, I have no concerns." People who used the service and their relatives told us that they knew what to do if they had any concerns or worries about the care. One person told us: "I know to ring the manager with any concerns, but I've never had any."

We spoke with two members of staff and asked them about their understanding and responsibilities in reporting potential abuse. Staff were able to tell us about the forms that abuse may take and told us they would report any concerns they had to a member of the management team. Staff we spoke with had received training in the protection of vulnerable adults from abuse. We looked at the records of four members of staff which detailed they had received training in protecting vulnerable adults from abuse. This means people who used 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. A vulnerable adult is a person who may be unable to take care of themselves, or protect themselves from harm or from being exploited.

We spoke with the registered manager who was aware of their responsibilities in reporting any concerns which may indicate abuse was taking place. The provider may find it useful to note that the policy and procedure for reporting abuse had not been recently reviewed.

## Requirements relating to workers

✓ Met this standard

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

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### Our judgement

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The provider was meeting this standard.

There were effective recruitment and selection processes in place and people were cared for by suitably qualified, skilled and experienced staff.

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### Reasons for our judgement

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We spoke with two members of staff who told us they were happy with the training provided by the provider and that they received training on a regular basis.

We looked at the records of four members of staff and found appropriate checks had been undertaken before staff began work, which showed there were effective recruitment and selection processes in place. Staff records showed pre-employment checks had been carried out, which had included the seeking of two references, a Criminal Record Bureau (CRB) disclosure and confirmation of their identity. This meant people using the service could be confident that staff had been screened as to their suitability to work with vulnerable adults.

We found staff received appropriate professional development as the provider required staff to undertake training in a range of topics which were linked to the health, rights, and the promotion of the safety and welfare of people who used the service. Staff had accessed long distances courses, which required staff to submit work which had been externally assessed to determine staff understanding and knowledge of the subject. Long distances courses subjects included end of life care, equality and diversity, mental health, medication awareness and nutrition. Staff had also received training in the safeguarding of vulnerable adults from abuse, moving and handling and continence management and the caring of people with a visual impairment.

## 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

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### Our judgement

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The provider was meeting this standard.

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

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### Reasons for our judgement

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People who used the service had the opportunity to comment on the service during regular reviews of their care package. People also said that they received questionnaires regularly which sought their views about the service they received. People and their relatives told us: "Donna (the registered manager) is very good at resolving any issues." "I regularly get a questionnaire asking me what I think of the service, which is good."

People who use the service and their representatives were asked for their views about their care. The provider sought the views of people who used the service by the sending out of questionnaires. The provider may find it useful to note that people had not received a report detailing the outcome of the quality assurance process and any action the service planned to take to address issues identified. The registered manager told us issues were addressed on an individual basis. We looked at a selection of completed questionnaires and found people's responses to questions were positive indicating they were happy with the service they received. The provider may find it useful to note that questionnaires as part of the services quality assurance system were not sent to staff or external health and social care professionals.

The service had a complaints procedure. The service had not received any complaints within the last twelve months. People we spoke with and their relatives told us they were aware of the services complaints procedure and were confident that any issues raised would be managed well. People and their relatives said that the registered manager and other office staff were always helpful when they telephoned with a query and said that the registered manager or other senior staff visited them to talk about the service they received.

As part of the providers quality assurance system, the registered manager or a supervisor carried out 'spot checks' to observe staff delivering care to people who used the service. Staff we spoke with told us they had experienced routine 'spot checks', which were unannounced and that they received feedback from these. People we spoke with and their relatives confirmed these checks were carried out and that they the staff were not told in advance. Staff received regular supervisions on a one to one basis with a member of the management team, supervision were used to discuss any areas of concern, staff training

and staff performance, supervisions were documented and kept within staff records. Staff we spoke with confirmed they received regular supervisions. Staff meetings has taken place monthly and were used to update staff on any changes. Minutes we read showed that the registered manager had used staff meetings to discuss any areas which required staff to make changes to their practices to ensure that people received care and support consistent with the expectations of the provider and registered manager.

The provider had an electronic monitoring system, which recorded the time staff arrived and departed from a person's house. This system enabled the registered manager to ensure people received the care and support they required in a timely manner, and identified where staff were late arriving at a person's home. People we spoke with said they valued this system as it was another way of assuring that the manager knew whether they had received a visit from a member of staff. People told us that they didn't have any concerns with the punctuality of staff and many said they were informed if a member of staff was going to be late, which in the main was due to the previous person not being well and the member of staff having to stay with them or traffic and travelling delays.

## 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.

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**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.

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**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.

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**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

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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)

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### **(Registered) Provider**

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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'.

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### **Regulations**

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

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### **Responsive inspection**

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

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### **Routine inspection**

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

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### **Themed inspection**

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

## Contact us

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