

Review of compliance

Mrs Gillian Tomlinson Combined Care Services	
Region:	North West
Location address:	1 Elworthy Grove Whelley Wigan Greater Manchester WN1 3UH
Type of service:	Domiciliary care service
Date of Publication:	October 2012
Overview of the service:	Combined Care Services is a domiciliary care service providing social care and support services in order to enable people to remain at home with as much independence as possible. The service was registered in August 2011 and operates from an office in the Whelley area of Wigan. They currently provide a service to 14 people living in the area.

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

Our current overall judgement

Combined Care Services was meeting all the essential standards of quality and safety inspected.

The summary below describes why we carried out this review, what we found and any action required.

Why we carried out this review

We carried out this review as part of our routine schedule of planned reviews.

How we carried out this review

We reviewed all the information we hold about this provider, carried out a visit on 7 August 2012, carried out a visit on 14 August 2012, checked the provider's records, observed how people were being cared for, looked at records of people who use services, reviewed information from people who use the service, talked to staff, reviewed information from stakeholders and talked to people who use services.

What people told us

We carried out a themed inspection looking at domiciliary care services. We asked people to tell us what it was like to receive services from this home care agency as part of a targeted inspection programme of domiciliary care agencies with particular regard to how people's dignity was upheld and how they could make choices about their care. The inspection team was led by a CQC inspector and joined by an Expert by Experience who has personal experience of using or caring for someone who uses this type of service.

We carried out four telephone interviews and three home visits to people who used the service and to their main care givers (a relative or friends) to gain views about the service. We spoke with two of the staff members who worked for the agency and observed two more during one of the home visits.

People told us that Combined Care Services provided good quality care and offered a reliable service. People spoke positively about their care workers and that they fully supported their care needs.

People we spoke with told us they were given choices as to what they needed care staff to do for them. Comments included; "Peace of mind, they are a godsend."

People told us that an assessment of their needs had been carried out when they started receiving support from the agency. This had then been used by the staff and with the person to produce a care plan and risk assessments for them to work to. .

People confirmed that they felt safe with the carers who were visiting them and did not feel in any way threatened or concerned when the care workers were around. They knew they could speak with the provider/manager and would have no problem doing so if they had any concerns.

All of the people we spoke with made positive comments about the staff members who supported them. Comments included; "Carers are smashing."

People told us they were regularly asked if they were happy with the care and the service provided. They thought the agency was open to suggestions and actively sought views to help and improve the service provided.

What we found about the standards we reviewed and how well Combined Care Services was meeting them

Outcome 01: People should be treated with respect, involved in discussions about their care and treatment and able to influence how the service is run

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.

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

The provider was meeting this standard. People experienced care, treatment and support that met their needs and protected their rights.

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

The provider was meeting this standard. 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.

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

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.

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

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

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.

Where we judge that a provider is non-compliant with a standard, we make a judgement about whether the impact on people who use the service (or others) is minor, moderate or major:

A minor impact means that 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.

A moderate impact means that 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.

A major impact means that 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.

Where we identify compliance, no further action is taken. Where we have concerns, the most appropriate action is taken to ensure that the necessary changes are made.

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

Outcome 01: Respecting and involving people who use services

What the outcome says

This is what people who use services should expect.

People who use services:

- * Understand the care, treatment and support choices available to them.
- * Can express their views, so far as they are able to do so, and are involved in making decisions about their care, treatment and support.
- * Have their privacy, dignity and independence respected.
- * Have their views and experiences taken into account in the way the service is provided and delivered.

What we found

Our judgement

The provider is compliant with Outcome 01: Respecting and involving people who use services

Our findings

What people who use the service experienced and told us

People we spoke with told us they were given choices as to what they needed care workers to do for them. They said that they were involved in making decisions about their care and support package and they understood the choices available to them.

They told us that they or their representative, usually family members were involved in any discussions and decisions about their future care and support needs and that they felt as if their wishes had been listened to and acted upon.

Comments from the people we visited or contacted by telephone included; "Peace of mind, they are a godsend."

The people who spoke to us were very positive about the service and felt they were treated with courtesy and respect. They said they felt able to choose how the care worker spent their time with them and were confident about directing them. They understood that they could ask for more time or for a change in the type of support if they needed. People also said they could tell the care worker how they liked things done and that their wishes would be respected. They said care workers showed an interest in them; took time to talk with them and to get to know them as individuals. Comments included; "We have a chat and a laugh."

Other evidence

Was privacy and dignity respected?

We spoke with one care worker and the provider/manager about how they promoted privacy and dignity for people who used the service. During the home visits we also observed the warm relaxed and positive relationship between one of the people using the service and the two carers who were visiting her. Privacy was respected and protected. The provider/manager said that all staff had received training on maintaining privacy and dignity as part of their induction. She told us that she observed the care workers at their work place to ensure that the privacy and dignity of the individuals was maintained whilst delivering care and support. People told us during our home visits and during the phone calls we made that the staff members always treated them with respect.

The manager told us that staff members had training in dignity and respect and that these themes are included in other training sessions including moving and handling training. Staff members are provided with information about privacy and dignity in their staff handbook.

Were people involved in making choices & decisions about their care?

Staff members said that an individual's needs were assessed during an initial visit from the provider/manager. During this visit a care plan would be completed with the individual. Staff members told us that if a person requested a change in their support then this would be discussed with them as to how it could be achieved. The provider/manager had regular contact with the person and the care package would be reviewed and updated with the individual. Care folders were audited by the provider/manager. People who used the service confirmed that their needs were reviewed on a regular basis and changes were made if necessary.

The provider/manager told us about procedures to ensure that people's choices were acted upon. This included the use of a computer programme that recorded a client's information and any discussions or changes that had occurred. The agency's assessment document had the following statement within it; "this document invites an initial discussion between the client and assessor on matters such as the clients own assessment of their physical and mental health, disabilities or impairments, and the client's own ideas about the support they need, how it should be delivered and when".

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.

Outcome 04: Care and welfare of people who use services

What the outcome says

This is what people who use services should expect.

People who use services:

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

What we found

Our judgement

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

Our findings

What people who use the service experienced and told us

We spoke with people who received support from the agency to gain their views on how well the care staff members were providing safe and appropriate care. They said their support needs were being met and that they had confidence in the staff members who were visiting them. Comments from the people we visited or contacted by telephone included, "Absolutely brilliant."

People told us that an assessment of their needs had been carried out when they started receiving support from the agency. This had then been used by the staff and with the person to produce a care plan and risk assessments for them to work to. Everyone we spoke with said they had a care folder with all the details of their assessments and plans.

The people we spoke to said that they felt their care was based around their needs as a person and that they were met appropriately.

People told us that they felt able to express their views and make choices about their care and support.

Other evidence

Assessment of people's needs.

We looked at the care files of five people during this review. They all included a pre-service assessment to ascertain whether their needs could be met. This would be done

wherever the person was; this could include their own home or another care setting such as a respite centre or a hospital. As part of this process the agency would also get the person's family, social worker or other professionals to add to the assessment if it was necessary. We saw that the assessments included information about personal preferences and choices such as what the person preferred to be called.

Care Planning

We found that each person using the service had a care plan that was written from the information gathered during the assessment.

We looked at five of these to see what support people needed and how this was recorded. We saw that each plan was detailed, personalised and reflected the needs of the individual. We also saw that the plans were written in a style that would enable the person reading it to have a good idea of what help and assistance someone needed at a particular time. The plans we looked at had the following note; "ensure the task is completed in a respectful and dignified manner." All of the plans we looked at were well maintained and were up to date. The reviews were detailed, as were the daily records, so staff knew what changes, if any, had been made. Managers and staff made every effort to ensure that the person understood the arrangements made for their care and support and knew about the choices and opportunities open to them.

Risk assessments, including the environment were carried out and kept under review so that the people receiving a service were safeguarded from unnecessary hazards. We could see that the agency's staff members were working closely with the person and, where appropriate, their representatives. This ensured that the management of risk was balanced against safety and the person's rights to live a fulfilling lifestyle without unnecessary restriction.

There were two copies of each care plan; there was a copy in the office and an identical copy, with additional documents so that staff members could report on what they have done each day in the individual's own home.

All of the files we looked at were well maintained, tidy and up to date.

Delivery of Care

People told us that staff members usually arrived and left at the designated times. They stayed for the full length of time and checked all was well before leaving. Staff members did not miss calls, but sometimes they could be late if the previous call needed extra time or if there was another problem. Service users were notified by phone if this occurred. People did say that this rarely happened.

The provider/manager told us that she checked the quality of care delivery through direct contact with service users and by supervision of the care workers. Some people who used the agency said that they had completed a monitoring form about whether they were happy with the service being provided. We saw some of the completed forms in the agency office. The staff members we talked to in the office and those we observed during our home visits could show that they had a good understanding of the people they were supporting and that they were able to meet their various needs. During the home visits we saw that they were interacting well with people and the

relationships we saw were warm, respectful, dignified and with plenty of smiles.

Our judgement

The provider was meeting this standard. People experienced care, treatment and support that met their needs and protected their rights.

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

Whilst people had not received any specific information about reporting abuse they confirmed that they would contact a member of staff at the agency if they had any concerns about the service or the support they received. All confirmed that they felt safe with the carers who were visiting them and did not feel in any way threatened or concerned when the carers were around. During the home visits they told us they were respected and listened to. They knew they could speak with the provider/manager and would have no problem doing so if they had any concerns.

The people who spoke to us all said that they had an understanding of what to do if they were not happy about something. Although their understanding around types of abuse varied all but one of the people spoken to felt they would feel confident about reporting it or getting help.

Other evidence

Preventing abuse

The agency had an adult protection procedure [now called safeguarding] that complied with the relevant legislation and good practice guidelines. This was designed to ensure that any possible problems that arose were dealt with openly and people were protected from possible harm. Staff members were made aware of the process to follow should they suspect any abuse was occurring. This was mentioned in the induction process and was revisited during appraisals, supervisions, staff meetings and regular in house training days. The staff members we spoke to all confirmed that they

had received safeguarding training or were due to do so.

The provider/manager and the care staff members we spoke with told us that there was a policy on whistle blowing. We found the care workers had a good understanding of what and who they would report any concerns to.

Raising concerns

People said that they would raise any concerns they had with the care staff or the provider/manager if needed. In discussions with people using the service it was clear they were aware of what to do in the event of them having a concern or complaint.

The provider/manager and staff spoken with confirmed that they were aware of the procedure to be followed if abuse was suspected. This included gathering basic information, reporting the incident to the provider/manager and triggering the concern to the local safeguarding team. The agency had access to the safeguarding policy for the Local Authority.

Our judgement

The provider was meeting this standard. 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.

Outcome 14: Supporting 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 competent staff.

What we found

Our judgement

The provider is compliant with Outcome 14: Supporting workers

Our findings

What people who use the service experienced and told us

All of the people we spoke with made positive comments about the staff members who supported them. Comments from the people we visited or contacted by telephone included, "Carers are smashing."

The people who spoke to us said they were confident that their care worker would recognise any significant change in their needs and would help arrange appropriate changes to their support.

Other evidence

Development, supervision and appraisal

All new staff members completed an induction training programme so they had the skills they needed to do their jobs effectively and competently. This induction also included an introduction to the job they would be doing and as part of it they shadowed existing staff members and were not allowed to work unsupervised, [shadowing is where a new staff member works alongside either a senior or experienced staff member]. The staff members we spoke with confirmed that they had received an appropriate induction and that staff training was ongoing.

The staff members had annual appraisals and regular one to one supervision meetings, [these are regular meetings between an employee and their line manager to discuss any issues that may affect the staff member; this would include a discussion of ongoing training needs].

Training

The agency kept a record of the staff training; the database kept showed what courses each staff member had undertaken and when. Staff members had received training in areas such as safeguarding and moving and handling. The staff members we asked said that they were receiving regular training and in their opinion it was of a very good standard.

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.

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

People told us they were regularly asked if they were happy with the care and the service provided. They thought the agency was open to suggestions and actively sought views to help and improve the service provided.

Some people had completed feedback forms about their care and support and had also had reviews where their views about the service had been obtained.

Other evidence

Monitoring quality

Information about the safety and quality of service provided was gathered on a continuous and ongoing basis with feedback from the people who used the service.

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

The agency sent out Satisfaction Questionnaires to the people using the service and their representatives in May this year. We were able to see the returned forms in the agency office, all contained positive comments about the service being provided. These included; "Quite satisfied with all of the staff I have", "They have all been very

understanding at all times", "Everything great, no problems", "Very, very pleased with the care I receive."

Risk assessment and management

Risk assessments regarding individual care plans were completed during the initial visit to the service user. They were discussed and agreed with the individuals involved. The provider/manager confirmed that accidents and incidents were recorded and any lessons learnt from these were fed back to the staff team through the regular staff meetings held.

Complaints

A copy of the complaints policy was included in the service user guide that was within the care folder in each person's home.

Processes were in place to record any complaints received and to ensure that these would be addressed within the timescales given in the policy. No complaints had been received over the last year by the service.

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.

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.

Where we judge that providers are not meeting essential standards, we may set compliance actions or take enforcement action:

Compliance actions: These are actions a provider must take so that they **achieve** compliance with the essential standards. 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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