

Review of compliance

Freedom Homecare Limited Freedom Homecare Ltd	
Region:	North West
Location address:	Caidan House Canal Road Timperley, Altrincham Cheshire WA14 1TD
Type of service:	Domiciliary care service
Date of Publication:	October 2011
Overview of the service:	Freedom Homecare is an agency offering personal care, companionship and home help to people living in their own home.

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

Our current overall judgement

Freedom Homecare Ltd was meeting all the essential standards of quality and safety but, to maintain this, we have suggested that some improvements are made.

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 because concerns were identified in relation to:

Outcome 12 - Requirements relating to workers

Outcome 14 - Supporting staff

How we carried out this review

We reviewed all the information we hold about this provider and carried out a visit on 28 September 2011.

What people told us

During this visit we did not speak to people using the service.

What we found about the standards we reviewed and how well Freedom Homecare Ltd was meeting them

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

To ensure people are suitably qualified and experienced to meet the needs of the people using the service and to ensure their safety all people employed must undergo the recruitment and selection process and have the necessary safety checks.

One of the professional references should be obtained from the person's last employer.

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

Staff receive induction which is relevant to their job role. However to ensure staff are appropriately trained and competent to support and promote people's choice and independence training in the Mental Capacity Act and the Deprivation of Liberty safeguards must be provided.

Actions we have asked the service to take

We have asked the provider to send us a report within 14 days of them receiving this report, setting out the action they will take to improve. We will check to make sure that the improvements have been made.

Where we have concerns we have a range of enforcement powers we can use to protect the safety and welfare of people who use this service. When we propose to take enforcement action, our decision is open to challenge by a registered person through a variety of internal and external appeal processes. We will publish a further report on any action we have taken.

Other information

Please see previous reports for more information about previous reviews.

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

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

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

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

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

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

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

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

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

Outcome 12: Requirements relating to workers

What the outcome says

This is what people who use services should expect.

People who use services:

* Are safe and their health and welfare needs are met by staff who are fit, appropriately qualified and are physically and mentally able to do their job.

What we found

Our judgement

There are minor concerns with Outcome 12: Requirements relating to workers

Our findings

What people who use the service experienced and told us

We have not received any comments from people who use the service in respect of this outcome.

Other evidence

During this visit we looked at a sample of staff files to check that the service had an effective recruitment and selection process in place.

In the files looked at we saw that they contained a photograph of the individual, proof of identification, an application form and interview records.

We saw that two professional and two personal references had been obtained. However in the files looked at we saw that references had not been obtained from the person's last employer. In one file we saw that the first professional reference had not been obtained from the person's last employer and the second professional reference was obtained from an employer in 2006. On examining this person's employment history she had worked for several different employers since 2006.

Following the visit we received confirmation that the references had been applied for.

We saw arrangements were in place for all staff to be employed subject to Criminal Records Bureau checks being carried out.

We were informed that the agency employed the services of an independent trainer on

an intermittent basis. However he had not gone through the recruitment and selection process and had not been subject to a Criminal Records Bureau check. This was discussed with the nominated individual and the manager during this visit and we were assured the process would be started.

The service had only recently been registered with the Care Quality Commission and staff were still working through their probation period. The nominated individual for the service said that once this period was completed contracts would be issued.

There were policies and procedures relating to recruitment and information had been included in the staff handbook.

Our judgement

To ensure people are suitably qualified and experienced to meet the needs of the people using the service and to ensure their safety all people employed must undergo the recruitment and selection process and have the necessary safety checks.

One of the professional references should be obtained from the person's last employer.

Outcome 14: Supporting staff

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

There are minor concerns with Outcome 14: Supporting staff

Our findings

What people who use the service experienced and told us

We have not received any comments from people who use the service in respect of this outcome.

Other evidence

We saw policies and procedures relating to staff induction and ongoing training. However it was noted that in some parts the policies and procedures made reference to the Care Standards Act which became obsolete in 2008. It was discussed with the nominated individual and the manager that this should be updated to reflect the current act, the Health and Social Care Act 2008.

Information relating to induction and training was included in the staff handbook and we were told that all staff are given a copy of the handbook.

In the files looked at we saw evidence of staff induction and we told that induction is done over a three or four day period depending on the individual staff members needs.

We were told that currently the agency employed seven care workers and three of those had completed National Vocational Qualification (NVQ) level 2 and a further two members of staff were due to start the training.

We saw a training plan for 2012, which included relevant mandatory training. However it did not include the Mental Capacity Act or the Deprivation of Liberty training. It was discussed with the manager that to ensure staff are appropriately trained and

competent to support and promote people's choice and independence training in the Mental Capacity Act and the Deprivation of Liberty safeguards must be provided.

We were told that staff supervision was undertaken after the first month of work and then would be every three months after that or sooner if individually required. The nominated individual said that new staff work a three month probation period and during that time will have a one to one session and following that a contract would be issued.

We saw evidence of staff supervision in the files looked at.

Our judgement

Staff receive induction which is relevant to their job role. However to ensure staff are appropriately trained and competent to support and promote people's choice and independence training in the Mental Capacity Act and the Deprivation of Liberty safeguards must be provided.

Action we have asked the provider to take

Improvement actions

The table below shows where improvements should be made so that the service provider **maintains** compliance with the essential standards of quality and safety.

Regulated activity	Regulation	Outcome
Personal care	Regulation 21 HSCA 2008 (Regulated Activities) Regulations 2010	Outcome 12: Requirements relating to workers
	<p>Why we have concerns:</p> <p>To ensure people are suitably qualified and experienced to meet the needs of the people using the service and to ensure their safety all people employed must undergo the recruitment and selection process and have the necessary safety checks. One of the professional references should be obtained from the person's last employer.</p>	
Personal care	Regulation 23 HSCA 2008 (Regulated Activities) Regulations 2010	Outcome 14: Supporting staff
	<p>Why we have concerns:</p> <p>Staff receive induction which is relevant to their job role. However to ensure staff are appropriately trained and competent to support and promote people's choice and independence training in the Mental Capacity Act and the Deprivation of Liberty safeguards must be provided.</p>	

The provider must send CQC a report about how they are going to maintain compliance with these essential standards.

This report is requested under regulation 10(3) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2010.

The provider's report should be sent to us within 14 days of the date that the final review of compliance report is sent to them.

CQC should be informed in writing when these improvement actions are complete.

What is a review of compliance?

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

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

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

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

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

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

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

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

Information for the reader

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