

Review of compliance

Mr. Michal Andrzej Kaczorowski
Neighbourhood Care HQ

Region:	South West
Location address:	35 Rosewood Avenue Burnham on Sea Somerset TA8 1HE
Type of service:	Domiciliary care service
Date of Publication:	November 2012
Overview of the service:	Neighbourhood Care HQ is registered to provide the regulated activity personal care to people in their own homes. The agency covers the Somerset area and provides care and support to three people.

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

Our current overall judgement

Neighbourhood Care HQ 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 14 November 2012, checked the provider's records, observed how people were being cared for, looked at records of people who use services, talked to staff 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.

We carried out home visits to people who used the service and to their main carers (a relative or friends).

We spoke with three people in their own homes and two relatives who were visiting them at the time. Everybody told us that the care provided was excellent. One person said, "She is brilliant I don't know where I'd be". Another person said, "I can't fault it, it is so lovely to have the two girls coming in, I know them both, they are never late and they are just wonderful". One relative told us, "The agency has been brilliant they have provided a lot of support for mum". Another relative told us, "I know the two girls and they are the people I want to care for my wife. I chose the agency because it was small and I didn't want lots of strange people coming and going, they are really good".

What we found about the standards we reviewed and how well Neighbourhood Care HQ 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

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

The provider was meeting this standard.

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

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

The provider was meeting this standard

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

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.

The provider was meeting this standard.

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

People were cared for by care workers who were supported to deliver care in the person's own home safely and to an appropriate standard.

The provider was meeting this 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 had an effective system in place to identify, assess and manage risks to the health, safety and welfare of people who used the service and others.

The provider was meeting this standard.

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

We visited three people in their own homes. We asked them to tell us how involved they had been in making decisions about how their support was provided. Everybody confirmed that they had met the agency's manager before they started to receive support. One person said, "We met and discussed what care and support was needed, that is the care and support I receive, I have my folder with plans in and they are all agreed with me".

We asked people if they felt staff respected their privacy and dignity, one person told us, "I am always treated with respect, they are so nice and really care".

We observed that care workers upheld people's privacy and dignity when their personal needs with bathing, showering, and toileting were being attended to.

Other evidence

Was privacy and dignity respected?

We read the care records for three people. We saw that personal preferences were recorded. We observed the manager helped people in a dignified way. They respected their privacy and gave them time to proceed at their own pace. The manager demonstrated to us that they had a very clear understanding of the care and support

needs of the people they visited. They knew what people's preferences for care were and endeavoured to respect this as far as was possible.

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

The care plans read included a pre assessment of people's needs. This was carried out before care and support was provided. These records contained information about the person's preferred name and identified the person's usual routine. All three care plans had been developed with the person who then signed them to agree. We read in one care plan times of visits were flexible and based on the shift patterns of a relative. This meant the person could chose to continue to have care provided by their relative as well as a care worker.

Our judgement

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

The provider was meeting this standard.

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

People told us that they were very happy with the care and support they received. Everybody told us that the care provided was excellent. One person said, "She is brilliant I don't know where I'd be". Another person said, "I can't fault it, it is so lovely to have the two girls coming in, I know them both, they are never late and they are just wonderful". One relative told us, "The agency has been brilliant they have provided a lot of support for mum". Another relative told us, "I know the two girls and they are the people I want to care for my wife. I chose the agency because it was small and I didn't want lots of strange people coming and going, they are really good".

Other evidence

Assessment of people's needs

We read three care plans and saw that a full assessment of their needs had been recorded before they started to receive services from the agency. We saw that a record had been made of the person's preferred times and the length of visits. The assessment of need then formed the basis for the care plans. We spoke with the manager about how they carried out the initial assessment. They told us that they always visited the person and discussed their needs with them and any advocate or family member involved.

Risk assessments were completed during the initial assessment for most tasks listed in the care plans and included such things administration of medication. This meant both the people who received care and the care worker were protected from any perceived risk to them.

Care Planning

We read that people's care plans were person centred, which meant people's personal preferences had been taken into account. The plans were written from the person's point of view. We spoke with the manager about the use of care plans. They told us they wrote care plans even though they only employed one care worker. We saw the care plans provided a list of duties and identified problems, aims and goals with a clear emphasis on promoting independence as far as possible. We asked a member of staff about the care plans, they told us they contained enough information to enable them to understand the person's needs and carry out the care needed. They also told us they spoke to the manager regularly and any changes were clearly communicated.

Delivery of care

We read from records that the care provided was delivered by the manager and one care worker. People were informed in advance who would visit or if there were any changes. This meant people received continuity in their care. We saw that the times and days when care was provide for one person was flexible to cover the working shifts of the primary carer.

Staff spoken with confirmed that they knew in advance who they would visit and they had a very clear understanding of individual needs and preferences.

Our judgement

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

The provider was meeting this standard

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

People spoken with said they felt safe with the care workers who visited them. People told us they knew who to speak to with a complaint or concern.

Other evidence

Preventing abuse

The manager and care worker spoken with told us that they had attended training in safeguarding of vulnerable adults. We saw that a matrix of training was kept to show when they needed to attend updates. The care workers spoken with demonstrated a good awareness of safeguarding issues and their responsibilities in reporting concerns or bad practice. The manager had copies of the local authority policies and procedures and knew who they could contact if they felt anyone was at risk of abuse.

Raising concerns

We saw the staff handbook contained up to date policies and procedures on safeguarding people and whistle blowing. The care worker spoken with said they had a copy of the safeguarding procedure and knew who to talk to if they were concerned, they said they felt they could speak freely with the manager and were confident they would follow up any concerns appropriately.

During our visits to people in their own homes we saw that a copy of the agency complaints procedure was provided in each care plan pack. The procedure included relevant contact details for the area as well as the agency. This meant people could contact the local authority if they felt they could not speak to the agency staff.

Our judgement

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.

The provider was meeting this standard.

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

People spoken with were positive about the skills of care workers who visited them. One person told us, "They certainly know what they are doing and have a very professional approach." One relative told us, "I have no worries; they know what they are talking about and have been very helpful when we have been struggling to find a solution".

Other evidence

Development, supervision and appraisal

We spoke with the manager about how they supervised staff and managed their personal development. They showed us a record of a one to one meeting with the care worker to discuss working practices and any training needs. We saw that from this meeting training had then been arranged and a personal development plan was in place. The personal development plan showed what the care worker wanted to do and how they would achieve their goals. The manager told us that they carried out one to one supervision every three months as well as an annual appraisal.

We spoke to a care worker who confirmed that they had attended one to one supervision meetings when they discussed working practices and any training and personal development they might need or be interested in. They also confirmed that they spoke with the manager on a regular basis when they could discuss anything they might be concerned about or any changes they might wish to suggest.

Training

The care worker we spoke with told us that they had completed an induction training programme when they first started working for the agency. They confirmed they had then completed a number of 'shadow shifts', when they went out with the manager to all the people who received care from the agency.

We saw that the manager used an online training company to ensure all training was up to date. The manager could look at the staff profile online and see when training needed to be refreshed. The manager confirmed that they also had information on local courses and funded training for end of life care. We saw certificates to support that the manager and care worker had completed training relevant to their role and the needs of the people they cared for. The manager told us they would be sourcing dementia care training to widen their knowledge in that area.

The care worker spoken with confirmed that they had attended training and completed on line courses relevant to their role. They told us, "The training has been really good there has been plenty of it to do".

Our judgement

People were cared for by care workers who were supported to deliver care in the person's own home safely and to an appropriate standard.

The provider was meeting this 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 we spoke with told us they had been asked to comment on the care they received and on the way staff worked. "It's difficult really as we see the two girls so regularly, we talk to the manager almost everyday so we are always telling them about the support they provide". One relative said, "We see them every week sometimes more, we tell them any changes we might want and always thank them for the excellent job they do".

Other evidence

Monitoring quality

We spoke with the manager about how they monitored the quality of the service they provided. They told us that they speak to all the people in their care on a daily basis so any feedback is made directly to them. They confirmed that when they started a new package they always visited after one month to discuss how it had worked and what changes could be made. Care plans read also confirmed that regular monitoring of people's care took place. The manager told us they had not used customer satisfaction surveys due to the daily contact they had. However they would in the future when the organisation expanded, with more clients and staff.

Risk assessment and management

Risks for people and in their homes were identified, assessed and recorded. We discussed safe systems of work around specific areas such as medication and moving and handling. We saw from records held that an in depth risk assessment had been carried out and people and staff had been given information to reduce risks.

Complaints

The manager told us that they had not received any complaints. We were told that they had a system in place to record concerns or complaints. We saw that the system showed an investigation process, learning from the complaint, feedback to the complainant and action plans to address any issues raised. Information about the agency's complaints procedure was included in the care plan folder given to each person who received a service. The manager told us that staff were trained in handling complaints during induction training and the agencies policy and procedure was included in the staff handbook.

Our judgement

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 and others.

The provider was meeting this standard.

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
Audience	The general public
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