

Review of compliance

Oxford Private Care Shrublands	
Region:	South East
Location address:	Shrublands, Faringdon Road Cumnor Oxford Oxfordshire OX2 9QY
Type of service:	Domiciliary care service
Date of Publication:	April 2012
Overview of the service:	Oxford Private Care is a domiciliary care agency providing practical and personal care in people's own homes to enable them to maintain their independence. They provide services throughout Oxfordshire.

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

Our current overall judgement

Shrublands was meeting all the essential standards of quality and safety.

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 and carried out a visit on 1 March 2012.

What people told us

People we spoke with were very positive about the quality of the care they received. People told us that they knew who to contact within the agency and that staff were well trained and knowledgeable about their care needs.

People told us that they had a choice in who provided their care and could request a change if care was not being given in the way they wanted.

People we spoke with told us that their care was regularly reviewed and that if there were problems they were confident that the manager would investigate them. People told us that they would be listened to and that action would be taken if they had a complaint or concern.

What we found about the standards we reviewed and how well Shrublands was meeting them

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

People who used the agency were involved in the assessment and planning of their care needs. People told us that care staff were kind and caring.

Overall we found that Oxford Private Care was meeting this essential standard.

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

People were kept safe when using the service. Staff were trained and able to respond appropriately to any actual or suspected abuse or concern.

Overall, we found that Oxford Private Care was meeting this essential standard.

Outcome 13: There should be enough members of staff to keep people safe and meet their health and welfare needs

People received care that met their assessed needs. Staff were available in sufficient numbers and held the appropriate skills, qualifications and experience to provide care in a safe manner.

Overall, we found that Oxford Private Care was meeting this essential standard.

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

The service had systems in place to ensure staff received the necessary training and support to care for people who used the service. Staff had regular supervision and appraisals to support them in their role.

Overall, we found that Oxford Private Care was meeting this essential 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 agency had ensured that people who used the service were safe. The quality of care provision was monitored and improvements were made when concerns were raised.

Overall, we found that Oxford Private Care was meeting this essential 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.

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 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 we spoke with told us that the agency provided them with information about the care the agency provided. They also told us that the people who cared for them were caring and kind. People told us that they had been involved in their care planning.

Other evidence

Oxford Private Care is family owned and managed. The agency provided care staff who offered a range of services from domestic duties to personal care. They had expanded their service to include foot care and hairdressing provided by qualified and experienced people.

We looked at care plans for people who used the service. Care plans showed that people were involved in the design of their care plan.

The agency's' assessment along with the assessments and opinions of other interested professionals formed the care plan. The care plan was a comprehensive plan of the daily care needs of the person. It also set out the times when care was required and how the care was to be given.

People were encouraged to be as independent as possible. The agency undertook an initial assessment which took into account how, where and when people wanted their care to be given. Where the person could do things for themselves they were encouraged to do so. The agency, as part of the care plan, was working towards enabling people to gain independence and improve their daily lives.

As part of the assessment process, the agency made assessments of risk to protect both the person receiving the service and their staff. These included an assessment of the home, any equipment to be used, hazardous substances and any threat from animals in the home. Where risk was identified steps were taken to minimise the risk and a strategy was recorded and kept on file.

Care plans were reviewed every three months but changes could be made as and when they were needed. This was done by the proprietor carrying out a visit to the person to review care which then became the new care plan.

Care staff could telephone in to the office if they had a problem or needed support. After office hours the agency had a senior person on call to support care staff.

Our judgement

People who used the agency were involved in the assessment and planning of their care needs. People told us that care staff were kind and caring.

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 were not asked to comment on this outcome.

Other evidence

The agency treated the protection of vulnerable adults seriously and people were treated with dignity and respect. We saw training records that confirmed that all staff had attended, or were due to attend, safeguarding of vulnerable adult training. This training enabled staff to understand the aspects of safeguarding which were relevant to them.

Staff spoken with showed a good knowledge of safeguarding people from abuse. Staff knew how to recognise the signs of abuse and that they must report all cases of concern to the appropriate person.

We looked at the agency's safeguarding policy and procedure and found that it included the local authority multi-agency safeguarding procedures. The manager confirmed that it worked collaboratively with the local authority to safeguard and protect the welfare of people who used the service. We found that they reported any concerns appropriately and attended local authority safeguarding meetings when required.

Staff had received training regarding the Mental Capacity Act 2005 and Deprivation of Liberty Safeguards. Therefore, people could be sure that any decisions were made in their best interests and were reviewed in line with appropriate guidelines.

Our judgement

People were kept safe when using the service. Staff were trained and able to respond appropriately to any actual or suspected abuse or concern.

Outcome 13: Staffing

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 sufficient numbers of appropriate staff.

What we found

Our judgement

The provider is compliant with Outcome 13: Staffing

Our findings

What people who use the service experienced and told us

People told us that they felt that there were sufficient staff in place and that staff were very caring and responsive.

Other evidence

The agency recruited its staff locally where possible. Staff were placed on a rota with hours to suit both the agency's needs and that of their staff. Many of the agency staff were part time which suited their home arrangements. The agency ensured that the skills of their staff matched the needs of the people who used the service.

Where staff were running late or care had to be changed the agency had a system in place to notify people if a staff member was going to be more than 15 minutes late. The agency had a bank of mobile carers who could be used to cover any gaps in the rota. This service would also be used in an emergency.

Where there was to be a change in the person's care plan the proprietor contacted all concerned with the care plan to inform them of the changes.

Our judgement

People received care that met their assessed needs. Staff were available in sufficient numbers and held the appropriate skills, qualifications and experience to provide care in a safe manner.

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

The provider is compliant with Outcome 14: Supporting staff

Our findings

What people who use the service experienced and told us

People were not asked to comment on this outcome.

Other evidence

The agency employs a number of care staff who are supported and managed by senior members of the agency staff.

The service provided an induction programme for staff which was based on the Skills for Care Common Induction Standards. The agency had recently introduced a new training assessment module which enabled care staff to identify and record training taken and training needed. This system then tracked the care staff's progress and highlighted where further training was required or refresher training needed.

We were shown documentation which showed that staff were being supported, trained and had a yearly appraisal. The agency held weekly staff meetings which gave staff information about important changes to people's care. Staff meetings alerted staff to training opportunities and important changes happening in the care sector.

Staff told us they felt supported and they could contact the office both during office hours and out of hours if they had a problem or needed help or advice.

Our judgement

The service had systems in place to ensure staff received the necessary training and support to care for people who used the service. Staff had regular supervision and appraisals to support them in their role.

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 that they were asked their views about the service. Some people told us they had been asked to complete a survey about the service.

Other evidence

We saw that there was a record of identified risks and issues with action plans in place where needed. We were shown examples of audits for each activity the agency was involved in. These demonstrated that the quality of the service was monitored and concerns addressed appropriately.

Complaints were logged and incidents were reported and both had been reviewed to identify trends. Lessons arising from these had been used to make changes to the service. We were shown documentation for two recent complaints which demonstrated that the agency was dealing with complaints in an appropriate and timely manner.

Information about people's experiences had been gathered in such a way to allow for monitoring of risks and the quality of care delivery

We were shown examples of a recent survey the agency had sent out to people. They sent out 333 questionnaires to people who used the service. They received 204 replies These showed that people were very satisfied with the service. People surveyed stated that appearance, punctuality and attitude was good or excellent. Where feedback indicated some dissatisfaction steps were taken to address these issues.

The management structure for decision making and accountability provided guidance for staff, to ensure that care and support needs were met consistently and safely. Staff were confident and aware of how to raise concerns.

Our judgement

The agency had ensured that people who used the service were safe. The quality of care provision was monitored and improvements were made when concerns were raised.

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:

<u>Improvement actions</u>: These are actions a provider should take so that they <u>maintain</u> 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.

<u>Compliance actions</u>: 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

Document purpose	Review of compliance report
Author	Care Quality Commission
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