

# Key inspection report

## Domiciliary care agencies

<b>Name:</b>	Country View Homecare
<b>Address:</b>	Westbourne Road Westbourne West Sussex PO10 8UL

**The quality rating for this domiciliary care agency is:** three star excellent service

A quality rating is our assessment of how well an agency is meeting the needs of the people who use it. We give a quality rating following a full review of the service. We call this full review a 'key' inspection.

<b>Lead inspector:</b>	<b>Date:</b>
Val Sevier	1 5 0 2 2 0 1 0

This is a review of quality of outcomes that people experience in this agency. We believe high quality care should

- Be safe
- Have the right outcomes, including clinical outcomes
- Be a good experience for the people that use it
- Help prevent illness, and promote healthy, independent living
- Be available to those who need it when they need it.

The first part of the review gives the overall quality rating for the agency:

- 3 stars - excellent
- 2 stars - good
- 1 star - adequate
- 0 star - poor

There is also a bar chart that gives a quick way of seeing the quality of care that the home provides under key areas that matter to people.

There is a summary of what we think this service does well, what they have improved on and, where it applies, what they need to do better. We use the national minimum standards to describe the outcomes that people should experience. National minimum standards are written by the Department of Health for each type of care service.

After the summary there is more detail about our findings. The following table explains what you will see under each outcome area.

**Outcome area (for example User focussed services)**

**These are the outcomes that people using domiciliary care agencies should experience. They reflect the things that people have said are important to them:**

This box tells you the outcomes that we will always inspect against when we do a key inspection.

This box tells you any additional outcomes that we may inspect against when we do a key inspection.

**This is what people using this domiciliary care agency experience:**

Judgement:

This box tells you our opinion of what we have looked at in this outcome area. We will say whether it is excellent, good, adequate or poor.

Evidence:

This box describes the information we used to come to our judgement.

We review the quality of the service against outcomes from the National Minimum Standards (NMS). Those standards are written by the Department of Health for each type of care service.

Copies of the National Minimum Standards – Domiciliary Care Agencies can be found at [www.dh.gov.uk](http://www.dh.gov.uk) or bought from The Stationery Office (TSO) PO Box 29, St Crispins, Duke Street, Norwich, NR3 1GN. Tel: 0870 600 5522. Online ordering from the Stationery Office is also available: [www.tso.co.uk/bookshop](http://www.tso.co.uk/bookshop)

The mission of the Care Quality Commission is to make care better for people by:

- Regulating health and adult social care services to ensure quality and safety standards, drive improvement and stamp out bad practice
- Protecting the rights of people who use services, particularly the most vulnerable and those detained under the Mental Health Act 1983
- Providing accessible, trustworthy information on the quality of care and services so people can make better decisions about their care and so that commissioners and providers of services can improve services.
- Providing independent public accountability on how commissioners and providers of services are improving the quality of care and providing value for money.

## Reader Information

Document Purpose	Inspection report
Author	Care Quality Commission
Audience	General public
Further copies from	0870 240 7535 (telephone order line)
Copyright	Copyright © (2009) Care Quality Commission (CQC). This publication may be reproduced in whole or in part, free of charge, in any format or medium provided that it is not used for commercial gain. This consent is subject to the material being reproduced accurately and on proviso that it is not used in a derogatory manner or misleading context. The material should be acknowledged as CQC copyright, with the title and date of publication of the document specified.
Internet address	<a href="http://www.cqc.org.uk">www.cqc.org.uk</a>

## Information about the agency

Name of agency:	Country View Homecare
Address:	Westbourne Road Westbourne West Sussex PO10 8UL
Telephone number:	01243373757
Fax number:	
Email address:	homecare@caresouth.co.uk
Provider web address:	

Name of registered provider(s):	Countryview Homecare Services Ltd
Name of registered manager (if applicable)	
Miss Maria Chapman	
Conditions of registration:	
Date of last inspection	
Brief description of the agency	
<p>Country View Homecare Services Limited is registered as a domiciliary care agency and provides personal care and support to service users over the age of eighteen who live in the area surrounding Westbourne and Emsworth. The agency operates from a suite of offices in Westbourne, West Sussex.</p> <p>The responsible individual on behalf of the company is Mrs Maureen Hughes and the registered manager is Ms Maria Chapman who is responsible for the day to day running of the agency.</p> <p>The cost of the service ranges from £12.60 per hour week days and £13.05 per hour at the weekend; this is doubled for bank holidays. The price for part of an hour is available on asking the provider.</p>	

## Summary

This is an overview of what we found during the inspection.

The quality rating for this agency is:

three star excellent service

### Our judgement for each outcome:



### How we did our inspection:

An unannounced visit took place at the agency office on 15th February 2010 and lasted four and a half hours. Before the visit to this service we looked at all the information we have received from the agency. This information included an Annual Quality Assurance Assessment (AQAA) which is a document completed by the agency. This document gives the agency the opportunity to say what it does well and provide evidence of that. It also gives them the opportunity to say what they feel they could do better and what their future plans are, how it dealt with any complaints and concerns, any changes to how the agency is run, the providers view of how well they care for people, the views of the people who use the service, their relatives and staff who work for the service.

The Registered Manager and Responsible Individual assisted us with the inspection.

We looked at information about the people who use the service and how well their

needs are met. We looked at other records that must be kept and checked that staff had the skills, knowledge and training to meet the needs of the people they support and care for. We also looked around the office to make sure it was safe and that the staff had access to the equipment and facilities needed to run the agency efficiently.

We checked what improvements had been made since the last visit and before we left we told the registered manager and responsible individual what we had found. We sent surveys to the people who use the service, their relatives and the staff who work for the agency. Ten people or their representative who use the service, ten staff and three professionals completed these surveys and returned them to us. Information detailed on these surveys are used in this report.

### **What the agency does well:**

We received very positive comments from clients, families and other professionals about the staff members providing support. Comments included: "The carers are very nice and helpful and I am very pleased with the care given to my relative". "I approached the agency and was impressed with the fact that an interest was taken in ensuring that clients needs are met".

A full needs assessment is undertaken for all clients who express an interest in the service with a visit being undertaken before a care package is agreed.

The recruitment practices that protect people who use the service are clear and were seen to be complete.

It was seen that staff receive or are encouraged to undertake regular updating to maintain their skills. The support workers handbook is comprehensive and contains all information they may need. Staff also have access to information through the agency website.

Clients feel listened to and any complaints they have are acted upon. Clients commented that that they feel that they receive a flexible and reliable service and they feel confident that all their information will be treated in confidence.

The care plans provide the staff with the information required to fully support the clients needs and some clients commented that they feel they are treated with respect at all times.

The safe working practices operated by the agency through risk assessments and policies protects clients and staff.

The manager is well qualified to run the agency and continues to maintain her standards through training and updating herself in procedures and policies.

### **What has improved since the last inspection?**

There were no requirements from the commission following our last inspection.

The registered manager and responsible individual had included areas of change in the AQAA for the service. They have continued to maintain their quality rating.

### **What they could do better:**

A record must be kept of verbal references.

If you want to know what action the person responsible for this agency is taking following this report, you can contact them using the details on page 4.

The report of this inspection is available from our website [www.cqc.org.uk](http://www.cqc.org.uk).

You can get printed copies from [enquiries@cqc.org.uk](mailto:enquiries@cqc.org.uk) or by telephoning our order line 0870 240 7535.

## Details of our findings

### Contents

User focussed services (standards 1 - 6)

Personal care (standards 7 - 10)

Protection (standards 11 - 16)

Managers and staff (standards 17 - 21)

Organisation and running of the business (standards 22 - 27)

Outstanding statutory requirements

Requirements and recommendations from this inspection

## User focussed services

These are the outcomes that people using domiciliary care agencies should experience. They reflect the things that people have said are important to them:

People are confident that the agency can support them. This is because there is an accurate needs assessment, which they, or someone close to them, have been involved in. This tells the agency all about them and the support they need and is carried out before they are offered a personal domiciliary care service.

People and their relatives can decide whether the agency can meet their support needs. This is because they, or someone close to them, have got full, clear, accurate and up to date information about the agency. People know that the agency can meet their needs because staff have the skills and experience to give them the care they need. If they decide to use the agency they know about their rights and responsibilities because there is an easy to understand contract or statement of terms and conditions between them and the agency that includes how much they will pay and what the agency provides for their money. People are confident that the agency handles information about them appropriately. This is because the agency follows their policies and procedures. They get a consistent, and flexible care service from reliable and dependable staff members.

**This is what people using this domiciliary care agency experience:**

Judgement:

People using this service experience **good** quality outcomes in this area. We have made this judgement using a range of evidence, including a visit to this service.

The agency had a system in place to ensure that the needs of potential services users were identified before they were provided with domiciliary care.

The agency supplies good information for prospective service users in order for them to make an informed decision on whether to engage its services.

Evidence:

The AQAA told us: "A statement of purpose is available for inspection at the company premises and contains material prescribed by the regulations and is reviewed annually. All service users and potential service users are provided with a Service User Guide that contains material prescribed by the regulations and again this is reviewed annually. All self funding service users are provided with a simple jargon free written contract explaining what we can expect from each other. It also details the weekly

## Evidence:

cost of care. We have achieved a streamlined and efficient service from referral to the point of care delivery and our approach is very thorough. Home visits for new referrals are often done on the same day or in any event very quickly for emergency and non emergency care packages. Where necessary we will visit clients in hospital prior to their release and discuss cases on the ward with GP's, discharge nurses and relatives. We feel this provides a better understanding of our clients situation and helps us to ensure that we have gathered all the relevant information. The meetings are in addition to our normal in-depth care needs assessment and risk assessment that are carried out at a client's home using a method that ensures a consistent approach. Prior to a home visit, assessments already undertaken by other agencies e.g. Social Services are also requested and form part of our own assessment. Our assessors are able to signpost to other services that maybe of use e.g. Meals delivery, Age Concern. We will liaise with other organisations to ensure care delivery can take place effectively e.g. Occupational Therapists for mobility equipment and also ensure that other useful services can be accessed by providing telephone numbers and leaflets. This year has seen an increase in multi agency working and we have attended and assisted with several safeguarding issues, our contribution has been valuable. Our assessors also work within the office as coordinators and therefore have specific knowledge of our Service Users which enables us to act on information and situations swiftly and appropriately. We actively encourage feedback from family and other stakeholders involved in the package of care. With Service Users permission we will liaise with relatives who are concerned but not directly involved due to personal circumstances. Our website contains lots of useful information for potential service users that will help people to decide if we are the right provider for them. We also include some of the frequently asked questions and all the relevant contact information. We have established networks with other agencies to disseminate relevant and useful information to Service Users. Examples would include informing them of free electric blanket testing by the Local Authority and free smoke alarms from the Fire Brigade".

The manager explained that they receive an initial enquiry for their service either from social services or directly from the individual. A visit is undertaken to the individual by the manager, she explained that another experienced person at the office will also be undertaking this and following up on reviews of care plans. The individual's needs are assessed and a care plan is written taking into account information from other professionals as needed, the individual and or their representative.

At this visit the member of staff also carries out the risk assessments for medication, moving and handling and the environment and agrees support needs with the individual. The individual or their representative is then encouraged to sign the care

Evidence:

plan in agreement.

The agency is currently supporting over 200 hundred individuals. We looked at assessments and care plans in the office for ten individuals. Documentation included copies of assessments for care needs and risk assessments completed by the agency's staff. The documents also indicated that the help and care that individuals required, were identified before they received a service and that those needs were reviewed regularly and amended as necessary.

## Personal care

**These are the outcomes that people using domiciliary care agencies should experience. They reflect the things that people have said are important to them:**

Each person is treated as an individual and the agency is responsive to his or her race, culture, religion, age, disability, gender and sexual orientation. Their right to privacy is respected and the support they get from workers is given in a way that maintains their dignity. If people take medicine, they manage it themselves if they can. If people cannot manage their medicine, the agency supports them with it in a safe way.

People's needs and goals are met. The agency has a plan of care that the person, or someone close to them, has been involved in making. They are able to make decisions about their life, with support if they need it, as the staff promote their rights, choices and independence.

**This is what people using this domiciliary care agency experience:**

Judgement:

People using this service experience **excellent** quality outcomes in this area. We have made this judgement using a range of evidence, including a visit to this service.

The agency had policies, procedures and systems in place that ensured the practice and approach of care workers promoted the dignity and privacy of people who use the service and that they were supported to manage their medication safely.

Evidence:

The AQAA told us that: "A care plan is formulated following a needs assessment which includes health & safety and moving & handling risk assessments. The care plan is agreed with the service user and is signed by the assessor and the client. Key policies are included in the service user guide (SUG) and contract terms and conditions are contained within the SUG and contract. Delivering personal care is the main reason for our organisations existence. We deliver it in a way that encompasses current best practice and this is achieved through a comprehensive training programme. All new staff complete the Common Induction Standards and consolidate their training by attending various complimentary continuation training courses delivered both internally and by working towards an NVQ. As stated last year by training staff in palliative care we can ensure that high quality personal care is achieved. We allow service users wherever possible to make decisions and choices for themselves. Staff

## Evidence:

understanding of the 5 principles of the Mental Capacity Act have been key in allowing staff to assess a service users capacity to achieve this. We have a comprehensive policy and procedure regarding medication. Staff understand the limits on which they are able to act regarding assistance with medication. Where a need to act outside of the these limits is identified in order to provide a helpful service, specialist training is undertaken".

The care plans seen provide staff with information to support individual needs, and questionnaires from people who use the service suggest that staff respect them and enable them to have control over their daily lives. In those seen it was noted that there was information on: Medical condition, medication, sensory impairment, memory, communication, behavioural issues, mobility including transfers, dressing, personal care, and support with food. There was also a risk assessment for mobility, medication and general health and safety.

We were shown copies of the care plans for ten individuals which also included a record of contact with the office regarding the individual. We were also shown a copy of the medication record that the agency uses, where staff record when they have prompted an individual to take medication or when the staff member may have removed the medication from a blister pack and placed it in front of the individual and encouraged them to take it. The manager and staff handbook told us that staff do not dispense medication from any source other than the blister pack. One example we saw said "prompt medication watch as will hide", we saw that staff were able to comment on the medication records any concerns.

The manager and responsible individual explained that information is passed to staff as needed about the people they care for for. They tested staff recently to see if they did as they were asked - checking the notes to see if any new information has been added. They included in some daily notes that the individual staff member had won a prize and to contact the office, only one member of staff did not respond. Staff receive an initial one day induction during which they cover moving and handling, health and safety fire, infection control, protection of vulnerable adults and medication. The staff also receive an employee handbook, which refers to the company policies on record keeping and confidentiality; data protection and disposal of confidential information, accessing the home, lone working and medication. The staff can also access information with their own personal log on from the agency's website.

The individual who is using the service is also given information about what support they can expect from staff and specifically the support with medication they are able to have.

Evidence:

Comments from people who use the service included: "The paperwork and reviews can be a bit tiresome but this is probably because they do things properly". "All the staff that come are very conscientious and show that they care with consideration and gentleness".

## Protection

**These are the outcomes that people using domiciliary care agencies should experience. They reflect the things that people have said are important to them:**

People using the agency are safeguarded. This is because the agency follows health and safety procedures, keeps records appropriately and ensures their staff follow policies and understand the importance of assessing risks. The agency safeguards people from abuse, neglect and self harm and takes action to follow up any allegations.

People are confident that their property and money will always be safe as the agency follows the right procedures. Their health and rights are safeguarded as the staff keep an accurate record in their home of all the support they give them.

**This is what people using this domiciliary care agency experience:**

Judgement:

People using this service experience **good** quality outcomes in this area. We have made this judgement using a range of evidence, including a visit to this service.

The well being of people who use the service and care workers was promoted by the agencies procedures and systems that included providing staff with training in health and safety subjects and adult protection.

Evidence:

The AQAA told us that: "We are committed to looking after the health & safety and welfare of both service users and staff. We seek to minimise the risk of accidents through training and risk assessment. The management keep abreast of any changes in legislation and take appropriate action. Health & safety training is a key feature in our training plan. All new staff complete a health and safety course as part of their induction and this is refreshed for existing staff annually. Health & safety training incorporates but is not exhaustive to: moving & handling, food hygiene, medication, and protective clothing. The risk of accidents happening to service users and Staff whilst providing personal care are minimised through the identification of risks during assessment and training of staff in safe moving & handling techniques. Staff are trained at induction in abuse awareness and this is refreshed annually. Staff are trained to recognise any signs of abuse and how to report it. Staff are trained to protect a Service User's rights and best interests by recording details of care undertaken. Key events and activities are recorded at the office. The money and

## Evidence:

property of Service Users is protected and the policies and procedures for this are taught at induction. The responsible individual attended a Level 1 Safeguarding Adults investigation training workshop in April 2009. The Company have introduced a new additional remote back up facility which holds all client and staff information in the event of building fire etc. We are in contact with the local police as part of the neighbourhood watch scheme and any information received is passed to carers so that they inform service users of any particular concerns. Large investment in health & safety training materials which will be incorporated in the training programme. We have purchased a new Adult Abuse DVD which goes into more detail about the subject and uses real life case studies, staff are able to interact at all training sessions. All staff are being informed and updated with any issues and forthcoming changes in Domiciliary Care i.e. CQC, Independent Safeguarding Authority and the impact of these".

The agency had a range of health and safety policies and procedures intended to promote the welfare of both the care workers employed by the agency and the people to whom they were providing domiciliary care. It was noted that risk assessments are in place that cover areas such as: location of property where carers are going, the entrances and exits for example lighting and trees; whether there are key codes and alarms. Inside the risks are assessed regarding the flooring, stairs, layout of furniture, heaters, lighting, temperatures fire safety, location of facilities, appliances to be used, food handling and storage, and cleaning materials.

A further risk assessment looks at mobility issues including ability and weaknesses, comprehension, equipment to be used, level of risk and any behavioural concerns.

The agency had written policies and procedures based on West Sussex safeguarding adults policy, which is concerned with the protection of vulnerable adults and the prevention of abuse. Staff training records indicated that the induction training that all care workers were required to complete before they started their employment included the subject of abuse awareness as well as several health and safety related subjects including: moving and handling; infection control and fire.

Staff are given identity badges from the agency, which they sign for and a copy is kept at the office. They are also issued with protective equipment such as uniforms and gloves.

Comments from people who use the service included:

"The agency provides carers to cover all shifts and they usually try and to ensure that they have training and support before coming in on their own".

## Managers and staff

These are the outcomes that people using domiciliary care agencies should experience. They reflect the things that people have said are important to them:

People have confidence in the staff at the agency because checks have been done to make sure that they are fit to do the job. Their needs are met and they are supported as the staff get relevant training, support and supervision from their managers.

People have safe and appropriate support because the staff providing their care are qualified and competent. They are confident that the staff that provide their support are clear about their roles and responsibilities.

**This is what people using this domiciliary care agency experience:**

Judgement:

People using this service experience **good** quality outcomes in this area. We have made this judgement using a range of evidence, including a visit to this service.

There was a clear staff recruitment process that ensured as far as possible that people who use the service are protected.

There was a commitment to staff training and development and also to providing a system of staff support to ensure as far as was reasonably possible that care workers had the skills and competence to meet service users needs.

Evidence:

The AQAA told us that: "We operate a recruitment procedure which meets the requirements of all current legislation. Face to face interviews are always carried out, written references and CRB checks are obtained prior to the commencement of employment. We also require evidence of identity and entitlement to work. Gaps in employment history are explored and evidence of qualifications claimed are requested. Staff are issued with a written contract and issued with the General Social Care Council code of conduct. Potential staff are required to provide a statement of any criminal convictions before a final recruitment decision is made in conjunction with the CRB disclosure. All managers and staff are provided with a written job description and procedures involving grievance and disciplinary. The need to report any new criminal convictions is made clear and stated in the Staff Handbook which is signed for. Staff are aware of the POVA and POCA lists explained during CRB checks and are also communicated via the Staff Handbook. All new staff are required to complete an Induction programme based on the Skills for Care Common Induction Standards which

## Evidence:

also includes Health & Safety training. All staff are required to complete at least a NVQ 2 qualification in care. Trained strength is currently at 75% which we hope to increase to 90% by October 2010 with the current staffing levels. The current Responsible Individual completed her Registered Managers Award in 2004, and is now undertaking a degree in Health & Social care with the Open University. The Registered Manager is looking to complete her NVQ 4 in Leadership and Management. Another office coordinator is also being recruited to both support the office and compliment the existing team. Two members of staff have NVQ assessors awards. We have put a lot of time and effort into training our staff and are proud of our high level of NVQ qualified staff, we are convinced that this helps us to provide a high quality service. All staff receive supervision on a 3 monthly basis and receive an annual appraisal, in the infancy of employment more in field supervisions are undertaken. One supervision includes observing a member of staff delivering care to a Service User. A comprehensive training programme is in place which is decided in the February of each year for the coming training year April to March. Courses are taught in house and include: Palliative Care, Stroke Awareness, Dementia Awareness, Diabetes & Nutrition, Catheter and Stoma Care, Mental Capacity Act, Health & Safety which includes: Moving & Handling, Food Hygiene, Abuse Awareness and Medication. An external instructor attends 2 or 3 times a year to undertake First Aid training".

The agency has developed a recruitment process that meets the minimum standards for recruitment. The recruitment policy made reference to equal opportunities and anti discriminatory practice. We were able to sample files and looked at five, three had evidence to support that the agency recruitment process had been followed, there was also evidence that staff had undertaken the one day induction period. For two staff members we saw that for each one reference was dated after the day they commenced work with people who use the service. We spoke with the manager and responsible individual who stated that a verbal reference had been taken for these individuals and they had followed this up with a reference in writing. However there was no record of the verbal reference, who had spoken to the referee, their comments and the date. We discussed this at the time and the manager and responsible individual agreed that they would ensure that a record of verbal references is kept.

We were told of a situation in the two weeks prior to our visit where a new staff member was on the induction training and the responsible individual took a phone call from a referee in response to a reference request. The information led the responsible individual to talk with the staff member and terminate their association with the agency.

It was noted that staff are also issued with equipment to help safeguard them and the

Evidence:

people they are supporting this includes: an identity badge issued once identity is established gloves, aprons and hand wash.

We saw records that showed that new staff whilst on a three month probationary period have supervision every month; this includes an observed supervision of the person with an individual user of the service. After this staff receive supervision every three months and these are carried out in the main by the manager. Appraisals occur yearly and the manager carries out spot checks regularly to ensure that the service is being provide appropriately. Training continues with regular updates in moving and handling, adult protection, medication, fire, food hygiene and infection control. The agency has a trainer and the majority of training undertaken at the office with a room for discussion and an area for practical training such as moving and handling.

Comments from staff who returned questionnaires included: "I always get all information on new and existing clients". "I regularly have face to face meetings with my manager".

## Organisation and running of the business

These are the outcomes that people using domiciliary care agencies should experience. They reflect the things that people have said are important to them:

People get consistent and planned support from the agency because the manager runs it appropriately with an open approach that makes them feel valued and respected.

People using the agency are safeguarded because it follows financial and accounting procedures, keeps record appropriately and ensures that their staff follow policies. If people have concerns about the agency they, or people close to them, know how to complain. Their concern is looked into and action taken to put things right.

**This is what people using this domiciliary care agency experience:**

Judgement:

People using this service experience **good** quality outcomes in this area. We have made this judgement using a range of evidence, including a visit to this service.

The policies and procedures support the management of the service in offering consistent and well planned care to meet individual needs.

There is regular monitoring of the quality of the service and outcomes for individuals. The agency has a clear complaints procedure and takes all complaints seriously. The agency is committed to developing the service in consultation with people who use the service.

Evidence:

The AQAA told us that: "The business runs from dedicated offices, the building is well maintained and in addition to office space has comfortable rooms to conduct meetings and training. The building can be accessed by wheelchair users. The building houses all the necessary infra-structure to ensure the efficient running of the business. Modern IT systems are employed to ensure that the right people are in the right place at the right time doing the right things. All telephone calls between Service User and agency are logged to form a permanent record. Our IT also ensures that our service users are billed correctly and that our staff are paid correctly. End of year accounts are completed by a chartered accounting firm. The company has comprehensive public and employer liability cover. Both Directors have a vested interest in the business and are employed in their respective roles full time. Their hands on approach ensures that the business runs at maximum efficiency, areas for improvement are under constant review and queries or complaints can be dealt with effectively and in a timely fashion.

## Evidence:

The company maintains all the records prescribed by Standard 24 and all relevant policies and procedures which are reviewed annually. Staff working in field have access to rest facilities and refreshments paid for by the company. Our reference library which staff previously used to look up information has now been superseded and access to the Internet can be made available e.g NHS Direct".

Since our last visit the registered manager has become the responsible individual and the new manager has been registered. The agency had received the updated certificate on the day of our visit. We spoke with the manager to ensure that the certificate was correct.

The responsible individual told us that they are looking an planning for the future changes in registration with the outcomes described in the the Health and Social Care Act, to ensure that the agency is ready for the changes.

We were able to confirm that all policies and procedures were adhered to and that they promoted the well being of the service users. The registered manager also contacts other professionals as needed in ensuring that the service offered is appropriate to the needs of the individual.

The agency regularly seeks the views of the people who use the service, through phone and face to face contact at the individuals home. The agency has a complaints procedure, which is included in the information given to the individuals. The complaints record was seen and no complaints have been received by either the agency or us since the company was registered.

Comments from individuals who use the service included: "There have been occasions when there have been issues but these have been managed well". "We have been with the agency for some considerable time and have always been completely satisfied". "Communication is very good. I am always kept informed of change. They try very hard to keep my regular carers". "We had help even in the recent bad weather".

Comments from staff who returned questionnaires included: "I have had lots of training and they always offer more". "I know about the policies and procedures and what to do in an emergency". "They always allow time to talk on the phone about any problems that you may have". "They support staff and always ensure that health and education up to date".

Are there any outstanding requirements from the last inspection?

Yes

No

## Outstanding statutory requirements

These are requirements that were set at the previous inspection, but have still not been met. They say what the registered person had to do to meet the Care Standards Act 2000, Domiciliary Care Agencies Regulations 2002 and the National Minimum Standards.

No.	Standard	Regulation	Requirement	Timescale for action

## Requirements and recommendations from this inspection:

### Immediate requirements:

These are immediate requirements that were set on the day we visited this domiciliary care agency. The registered person had to meet these within 48 hours.

No.	Standard	Regulation	Requirement	Timescale for action

### Statutory requirements

These requirements set out what the registered person must do to meet the Care Standards Act 2000, Domiciliary Care Agencies Regulations 2002 and the National Minimum Standards. The registered person(s) must do this within the timescales we have set.

No.	Standard	Regulation	Requirement	Timescale for action

### Recommendations

These recommendations are taken from the best practice described in the National Minimum Standards and the registered person(s) should consider them as a way of improving their service.

No	Refer to Standard	Good Practice Recommendations

## Helpline:

**Telephone:** 03000 616161

**Email:** [enquiries@cqc.org.uk](mailto:enquiries@cqc.org.uk)

**Web:** [www.cqc.org.uk](http://www.cqc.org.uk)

We want people to be able to access this information. If you would like a summary in a different format or language please contact our helpline or go to our website.

Copyright © (2009) Care Quality Commission (CQC). This publication may be reproduced in whole or in part, free of charge, in any format or medium provided that it is not used for commercial gain. This consent is subject to the material being reproduced accurately and on proviso that it is not used in a derogatory manner or misleading context. The material should be acknowledged as CQC copyright, with the title and date of publication of the document specified.