

Review of compliance

Seton Care Limited

Region:	North East
Location address:	3 & 4 The Chandlery Berwick TD15 1HE
Type of service:	Domiciliary Care Service
Date this review was completed:	1 July 2011
Overview of the service:	The service is registered with CQC to provide 'personal care'. Nursing care is not provided.

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

What we found overall

We found that Seton Care Ltd was meeting all the essential standards of quality and safety we reviewed.

The summary below describes why we carried out the 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, surveyed people who use services, carried out a visit on 1 July 2011, observed how people were being cared for, talked with people who use services, talked with staff, checked the provider's records, and looked at records of people who use services.

We asked the manager to submit provider compliance assessments for outcomes 1, 7, 14 and 16.

What people told us

People told us that they were happy with the care and attention they received from staff from Seton Care Ltd. They confirmed that they were given choices in life and that staff supported them on their visits.

People confirmed that they could receive medical and specialist attention when they needed it and were helped to fulfil their social needs within the community.

People told us that the staff were kind and caring. People confirmed that they were given the opportunity to comment on the service, change routine or raise complaints. They said that the information exchange was good.

What we found about the standards we reviewed and how well Seton Care Ltd was meeting them

Outcome 1: People should be treated with respect, involved in discussions about their care and treatment and able to influence how the service is run

The evidence demonstrated that there were suitable systems in place within the service to promote the privacy, dignity and independence of people receiving support.

- Overall, we found that Seton Care Ltd was meeting this essential standard.

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Outcome 4: People should get safe and appropriate care that meets their needs and supports their rights

The evidence demonstrated that people who received support from Seton Care Ltd experienced effective, safe and appropriate care, treatment and support.

- Overall, we found that Seton Care Ltd was meeting this essential standard.

Outcome 7: People should be protected from abuse and staff should respect their human rights

There was evidence to demonstrate that there were systems in place to identify and manage any potential abuse within the service. We found that staff had up to date training in how to safeguard the people receiving support from abuse.

- Overall, we found that Seton Care Ltd was meeting this essential standard.

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

The evidence demonstrated that the recruitment checks carried out at the service ensured that people who used the service were supported by staff that were fit to do so.

- Overall, we found that Seton Care Ltd 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 evidence demonstrated that people who used the service were supported by trained and competent staff.

- Overall, we found that Seton Care Ltd 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 evidence would suggest that people benefit from a safe, quality service that was well managed and constantly reviewed.

- Overall, we found that Seton Care Ltd was meeting this essential standard.

Action we have asked the service to take

We have not asked the provider to take any action.

Other information

In a previous review of the home there were no shortfalls identified.

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 1: 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 1: Respecting and involving people who use services

Our findings

What people who use the service experienced and told us

We visited the service and talked to people who were receiving support in their own homes. People who received support told us that staff involved them in all decisions about the care and support they received. We saw that support was discussed and planned with the people who used the service.

Other evidence

The manager told us that people who receive support from Seton Care Ltd were supported by staff to understand their care and support. This enabled them to make choices and take informed risks. The personal preferences of people including their likes dislikes and wishes were recorded in individual plans of care.

Our judgement

The evidence demonstrated that there were suitable systems in place within the service to promote the privacy, dignity and independence of people receiving support.

Outcome 4: 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 4: Care and welfare of people who use services

Our findings

What people who use the service experienced and told us
We visited the service and talked to people who received support in their own home. It was evident that the service users knew the names of the support workers and spoke positively about the support they received and stated ‘they help me stay at home’ ‘always smiling and make me feel better’ ‘nothing is too much trouble’. Relatives commented they were ‘very happy with the support’ ‘they are very reliable’ ‘my wife responds well and likes to see them’.

Other evidence
Information supplied by the manager clearly stated that each person had a plan of care, treatment and support in place. These were regularly reviewed, evaluated and changed if found not to be effective. The plans aimed to maintain each person’s welfare and took into account individual need.

We looked at two peoples’ support plans during the visit. They were all written out in the same format and contained assessment of need, care plans and risk assessments. The support plans were being regularly evaluated and up dated as needed.

The manager stated that they had a system and procedure in place for managing identified risks, including how these were reviewed. These were developed with the people who used the service, or those acting on their behalf and this was confirmed by people who used the service during the visits.

Information received clearly stated that people were able to take risks and were not limited by assumptions and beliefs about their diversity.

The manager demonstrated that the health and welfare of people was protected through checks and reviews of the support provided. The provider undertook three monthly welfare assessments with the people who received support and this was confirmed by the records/views of people who used the service.

Direct care was not observed but staff were able to clearly describe the support needs of people and how they provided this. This was confirmed by people who used the service.

Our judgement

We found that people receiving support from Seton Care Ltd experienced effective, safe and appropriate care and support. We had seen evidence that the planning and delivery of support meets the needs of people and protects their welfare.

Outcome 7: 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 7: Safeguarding people who use services from abuse

Our findings

What people who use the service experienced and told us
The safeguarding views of the people who received support were not obtained at this review.

Other evidence
The manager gave us information that stated that staff at Seton Care Ltd attended safeguarding of vulnerable adults training and this was confirmed within staff training files and staff interviews. The staff induction programme covered the safeguarding procedures. Staff interviewed had an understanding of the procedures. This should ensure that staff recognised and acted appropriately to situations that could place people who used the service at risk.

The manager said that there was a copy of both neighbouring Local Authority safeguarding procedures available within the service.

Our judgement
There was evidence to demonstrate that systems were in place to identify and manage any potential abuse of people who received support.

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

The provider is compliant
with outcome 12: Requirements relating to workers

Our findings

What people who use the service experienced and told us
People who used the service and relatives commented ‘the staff are marvellous’ ‘they are so reliable whatever the weather’ ‘they got through when no one else could’ ‘they give me time out and this helps me feel more able to support my wife’ ‘I can stay in my own home because they provide such great help’.

Other evidence
The manager provided information that told us that there were staff recruitment and selection process that ensured that all appropriate check and references were in place prior to employment. During the visit we checked three staff files and confirmed that this information was true. Criminal record checks were obtained for staff before employment.

We noted that there was a staff training and development programme in place to give staff an understanding of the needs of people they support. The training needs of the staff were identified by the manager and staff and this was to make sure that staff had the relevant knowledge, skills and experience to carry out their role, and keep up with current practice.

Our judgement

The evidence demonstrated that the recruitment checks carried out at the service ensured that people who used the service were cared for by staff that were fit to do so.

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
The people we spoke to could not speak highly enough of the staff.

Other evidence
The manager gave us evidence to show that staff had attended all of the mandatory training required, with a system in place to review training requirements and refreshers when needed. Training reflected vocational studies as well as mandatory ones. All of the staff had obtained National Vocational Qualification (NVQ) in Care Level 2, and 49% had NVQ in Care Level 3.

Training requirements were identified at supervision and a personal development plan implemented for each staff member and this was confirmed by staff. The manager kept detailed training plans for each employee and copies of training certificates were held on file to evidence the training they had received. We examined some of the files during our visit and double checked that certificates were available for the training that was recorded.

The manager stated she tried to work directly with staff and provided supervision on a regular basis. The support service covers a large geographical area and staff were divided into four teams who were led by team supervisors and these teams meet on a weekly basis. These regular meetings were held to discuss updates on practices and individual support for people who used the service. This was confirmed by staff.

Our judgement

The evidence demonstrated that people who used the service received support from trained and competent staff.

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
It was evident that people who used the service and their relatives were able to comment on the quality of the service received. Their views were obtained by a three monthly welfare assessment and annual quality visit questionnaire. People who used the service had been given a service user guide with information on how to raise concerns.

Other evidence
There was a system in place to monitor the quality of the service provided and a new audit tool had recently been implemented. The monitor of the quality of the service provided included gaining feedback from service users, relatives and professionals involved with the service. The annual quality visit questionnaire identified areas for improvement, actions and monitoring of improvements made by the provider and informed people who used the service of these actions.

Policies and procedures were regularly reviewed in order to reflect the service and changing legislation.

Staff training and development programmes were reviewed and updated to reflect current legislation acts or changing regulation.

To maintain the health and safety of people who used the service checks were carried out on care systems and working practices on a regular basis, with improvements identified and actions taken.

The manager said that these measures ensured that people who used service were not harmed or their health, welfare and safety were not compromised.

Our judgement

The evidence demonstrated that people benefit from a quality service that was well managed and constantly reviewed.

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

Document purpose	Review of compliance report
Author	Care Quality Commission
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