



# Review of compliance

Montecare Solutions Limited Montecare Solutions Limited	
<b>Region:</b>	East
<b>Location address:</b>	59 Station Road Clacton-on-Sea Essex CO15 1SD
<b>Type of service:</b>	Domiciliary care service
<b>Date of Publication:</b>	August 2012
<b>Overview of the service:</b>	Montecare Solutions Limited is a domiciliary care agency that provides personal care and domestic support to older people and younger adults, who may have a mental health need in their own homes. The agency is privately owned and has two locations in Clacton and Harwich, Essex. The regulated activity personal care may be provided by Montecare Solutions Limited.

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

## Our current overall judgement

**Montecare Solutions Limited 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 9 July 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.

We were supported on this review by an expert-by-experience who has personal experience of using or caring for someone who uses this type of care service.

### 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 with particular regard to how people's dignity was upheld and how they can make choices about their care. The inspection team was led by a CQC inspector joined by an Expert by Experience, who has personal experience of using or caring for someone who uses this type of service.

We used postal surveys, telephone interviews and home visits to people who use the service and to their main carers (relatives or friends) to gain views about the service.

We visited six people in their homes and all six told us that they were very happy with the service from the agency. We also spoke with five carers, and two family members who cared for their relatives. Their comments about quality were also complimentary, for example one person stated: "The care is very personal and the staff put themselves out, over and above what was on the care plan."

We talked on the phone to twenty one people and all were positive about the quality of care they received. People felt respected and treated in a dignified way. All people stated that they were called by their preferred name. We checked records kept in their homes which showed their preferred name recorded.

All people spoken with knew about their care plans. Three relatives told us that they were involved in all reviews. Eight people told us that they always sign their care plans and we noted that all checked care plans were signed.

All people spoken with stated that they felt safe and protected. One person told us that a full assessment of needs and risk assessment was drawn up on the day prior to service commencing.

All the people we spoke with confirmed that visits to check quality were regular and that they were asked about the quality of service. Three people were able to name a coordinator who had conducted visits to check quality on previous occasions before our visit.

## **What we found about the standards we reviewed and how well Montecare Solutions Limited 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**

The provider was meeting this standard. People's privacy, dignity and independence were respected. People's views and experiences were taken into account in the way the service was provided and delivered in relation to their care.

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

The provider was meeting this standard. People experienced care, treatment and support that met their needs and protected their rights.

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

The provider was meeting this standard. People who use 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.

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

The provider was meeting this standard. People were cared for by staff who were supported to deliver care and treatment safely and to an appropriate 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 was meeting this standard. The provider had an effective system to regularly assess and monitor the quality of service that people receive.

## **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

People understood the care and treatment choices available to them and told us they were involved in making decisions about their care and treatment.

People told us that staff always asked how they would like to be addressed. One person told us that they did not want a male carer at any time and this was respected.

A relative told us was "We are very satisfied with all aspects of the care, the agency do just what they say they will do, and keep us in the picture." The whole family were involved in the assessment, and setting up the care plan and they found all the staff polite and respectful saying. In particular, they felt the dignity and respect shown to their family member was excellent on how they assist X, and how they always knocked and announced who they are, even though they had a key .

People who use the service were given appropriate information and support regarding their care or treatment.

Everyone we visited told us about the information folder that had been put in their homes. Another person told us: "I always have a double (two carers) visit and I always know who is coming." Another person told us one staff member had been unsuitable for

their care and had been taken off provision straight away.

Staff were described as being polite and the care given as being very professional and respectful of the service user's household and belongings.

### **Other evidence**

Was privacy & dignity respected?

We spoke with the manager who told us that privacy, dignity and independence were covered as part of the induction programme and regular in house training was completed. We saw four copies of the induction which confirmed this. Staff were trained to respect people's dignity. We saw that people's preferred forms of address were documented in their care notes.

We spoke with four care workers who gave us some good examples of how they promoted privacy and dignity, for example by always checking with the people who use the service how a particular task could be done. Good knowledge of people's routines by care workers was something appreciated both by the people who received care and their relatives. One person told us that the care workers understood their relative's particular condition. They said: "They are very patient and kind and never rush their care."

We saw that people's preferred forms of address were documented in their care notes.

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

People told us that the agency had made alterations to times and duration of calls when requested. Particular care needs had been accommodated and written into people's care plans and notes to ensure consistency.

### **Our judgement**

The provider was meeting this standard. People's privacy, dignity and independence were respected. People's views and experiences were taken into account in the way the service was provided and delivered in relation to their care.



## 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

Six people that we visited told us that they were fully aware of their care plans. All six people showed us their folders and confirmed that they signed these documents. A person told us: "When I came out from hospital, they went through all the care I would need, then asked me to read and sign." A relative told us that they were always present at the reviews of care plans and that their relative, a person who uses the service, always had things explained and were asked if they wanted to comment or to have a different arrangement for any aspect of their care.

One person felt their choices and needs were included in the care plan, and the staff followed this carefully checking out care needs with them. They also felt that staff were all very competent, and they felt completely safe and at ease in their company at all times.

The staff were described as "Always being polite and respectful", and that when assisting the service user they would keep them and the relative informed of the assistance provided, or, if something was not possible, for example due to health and safety, or moving and handling procedure, they would explain this fully, not just refuse to help.

##### Other evidence

Assessment of People's needs

We checked six files in the office and six files in people's homes. All of them contained

initial assessments and copies of all reviews. Each assessment was detailed and signed at the end by the assessed person.

A care worker spoken with explained how they raised the need for a review and it was arranged for the following day, ensuring that the person's needs were met all the time despite the sudden changes.

### Care Planning

When we checked care plans, we compared them with the latest assessments and noticed that all assessed needs were appropriately addressed instructing carers how to carry out each recorded task.

Six people spoken with confirmed that they were consulted during care planning and that their views were taken into account when care plans were made. All the care plans we checked were up to date.

### Delivery of care

People's assessed needs were met. It was evident from what people told us and the records we saw that care was delivered in a way that ensured people's health and wellbeing. Daily records that we checked in folders confirmed that staff completed their tasks and appropriately recorded events, showing that people received care they expected.

### **Our judgement**

The provider was meeting this standard. People experienced care, treatment and support that met their needs and protected their rights.

## 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 told us that they felt safe and protected. They felt comfortable and safe with current staff, and knew how and to whom to complain if needed.

One person told us that as far as they were concerned, the service user was very safe and they were at ease with all the staff, and they would soon stipulate if they were not happy but had not had any occasion to do so.

##### Other evidence

Preventing abuse

The manager showed us the records confirming that all staff had attended safeguarding training. The manager and coordinators had attended external safeguarding training and were sharing their knowledge with all staff, the manager has appropriate qualifications and is able to train staff herself. We saw the safeguarding policy in the staff handbook.

A risk assessment was done of a person's home and environment for the first day when service commenced. This assessment reduced risk significantly to both the person who used the service and to their carers.

All late calls were recorded and analysed and actions were taken to prevent any kind of neglect or recurrence.

Five staff members spoken with were clear of what to do in case of allegations of or potential abuse and safety procedures surrounding lone working. All staff are issued with personal alarms and torches to ensure their safety and ease of access when using keypads at night.

#### Raising concerns

Staff spoken with and the manager were fully aware of the procedure for raising concerns. Four out of six people who use the service explained that the contact details were, "On the sheet at the front of the file." The manager explained that the service took any concern or complaint very seriously and each was given appropriate attention and acted upon until resolved and actions fed back to the person raising it where appropriate.

#### **Our judgement**

The provider was meeting this standard. People who use 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.

## 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 told us that staff had knowledge and skills to meet their needs. Two people and a relative described how well they or their relative was cared for and that staff understood well specific conditions requiring some complex tasks.

Staff were reported by one person as having a high degree of 'common sense' and "Look very professional with uniforms.". Experienced staff helped newer staff, thereby improving continuity which was very important for them.

One person told us "They are always polite, respectful and unhurried and understood the privacy of their house."

##### Other evidence

Development, supervision and appraisal

Care staff received supervision and observations of practice, on a two to three monthly basis, provided by the manager and the co ordinator, and evidence of supervision sessions was seen in staff files that we reviewed. Regular staff meetings on a weekly basis were also being held so that staff had the opportunity to discuss topics and raise issues.

##### Training

The provider ensured that staff had received an induction prior to providing care and support. There were records in staff files to evidence that regular training, covering all

mandatory topics, was in place. Examples included health & safety, fire safety, medication, moving & handling, food hygiene, safeguarding and infection control.

Additional training had been provided to ensure that staff had the required skills to safely assist with an individual care need. The examples included training about how to assist a person with dementia, diabetes or who had suffered a stroke.

Training was monitored by the agency and via appraisal and supervision of staff. This would also flag up any due dates for refresher courses. This ensured that all care staff were booked on refresher courses throughout the year to ensure safe practice.

**Our judgement**

The provider was meeting this standard. People were cared for by staff who were supported to deliver care and treatment safely and to an appropriate 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 using the service and their relatives who we spoke with told us that they were in regular contact with the agency's management and that they were encouraged to express their views about the agency either directly, through monitoring visits, or through a yearly questionnaire/survey.

One person recalled that they had taken part in a customer survey by the agency which they valued.

Overall the care provided by agency staff was described as being "Very personal and the staff put themselves out, over and above what was on the care plan."

##### Other evidence

Monitoring quality

The manager told us that regular visits and calls were made to people using the service to discuss and monitor the care and support that was being provided. Regular monthly 'spot checks' were made by the management team either in person or via telephone contact, to monitor people's care needs and observe the staff's care practice, conduct and adherence to the care plan.

While we visited one person we saw a sample of a 'spot check'. This showed us that provider monitored quality of the service.

Surveys had been sent out to people using the service and their families to gauge opinions and identify how improvements could be made. The manager told us that the surveys were being analysed to identify areas for improvement and development. For example, one questionnaire initiated changes to a care package for a person whose care needs had changed and indicated that they may require more care.

Relatives who we spoke with felt that they were kept up to date with any changes to care and support regarding their family member. Relatives also confirmed that any issues or concerns they raised were dealt with in a professional and timely manner by the agency's management.

#### Risk assessment and management

All risk assessments seen in files, six in the office and six in people's homes, were up to date. All potential risks were addressed. For example in the bad weather staff who were closer were called upon. This ensured there were no missed calls.

#### Complaints

Complaints and concerns were found to be addressed in the same way to ensure that people's views were listened to and acted on appropriately. No complaints have been received by the agency in the last year. We were told that complaints would be appropriately handled and recorded with the outcome sent to complainants.

The complaints procedure was clearly set out in the service users guide to ensure that people had up to date information on the current guidance about progressing and handling of complaints.

#### **Our judgement**

The provider was meeting this standard. The provider had an effective system to regularly assess and monitor the quality of service that people receive.



# 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

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