

# Key inspection report

## Domiciliary care agencies

<b>Name:</b>	ROC Northwest Limited
<b>Address:</b>	Yealand Suite Clawthorpe Hall Business Centre Burton Carnforth Lancashire LA6 1NU

**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>
Jenny Donnelly	2   5   0   9   2   0   0   9

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

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## Information about the agency

Name of agency:	ROC Northwest Limited
Address:	Yealand Suite Clawthorpe Hall Business Centre Burton Carnforth Lancashire LA6 1NU
Telephone number:	01524784344
Fax number:	
Email address:	info@rocnorthwest.co.uk
Provider web address:	

Name of registered provider(s):	ROC Northwest Limited
Conditions of registration:	
Date of last inspection	
Brief description of the agency	<p>ROC Northwest Ltd provides domiciliary care services to children and young people with a learning and or physical disability, or mental health needs, and support to their families. Support is offered by caring for a child in their own home either with the parents or guardians still at home, or while they go out. Children are also supported to go out and take part in activities and outings with their support worker.</p> <p>The agency is run by the registered manager, Katie Stephens, and currently eleven staff are employed to support a small number of families.</p> <p>All families are currently referred by social services and the hourly rate charged is between £16.48 and £22.17 with an additional £7.00 for supporting an activity and 50p per mile for use of transport.</p> <p>The agency has a set of documents made readily available explaining their services, terms and conditions and complaints procedures.</p>

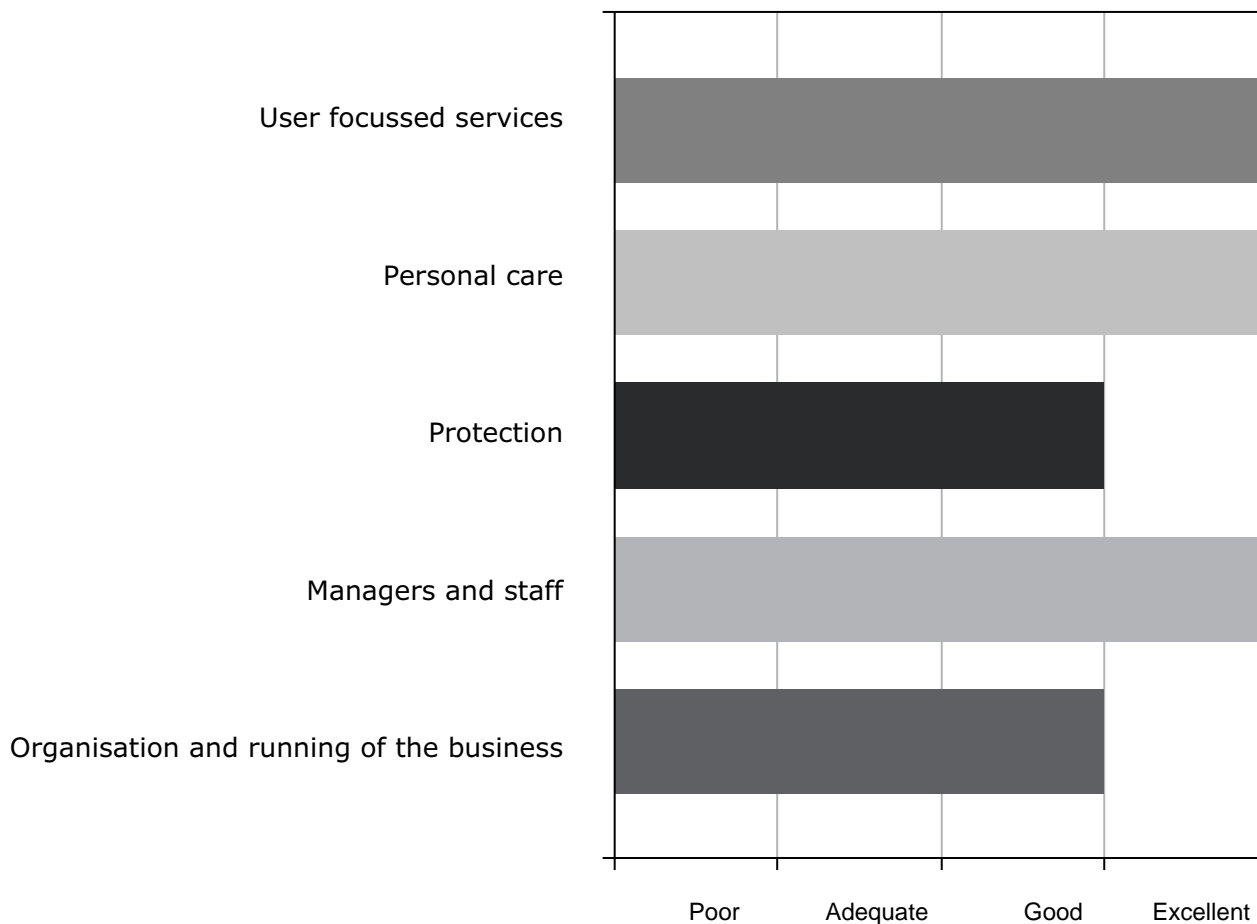
## Summary

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:

This was the main, or 'key' inspection of this service for the year. Jenny Donnelly, inspector, visited the agency office on 25th September 2009, and spent time looking at client and staff files, and speaking with the manager and office staff.

Prior to the inspection the manager had completed an Annual Quality Assurance Assessment (AQAA) that we asked for. This gave us information about what changes had been made to the service over the last year, as well as some numerical data.

We posted surveys to some of the families who receive a service from this agency, and conducted telephone interviews with those people who agreed to this on the survey form.

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

ROC Northwest offers a professional and very individual service to young people and their families. The detailed referral and assessment process helps families know if the agency will be able to meet their needs, and helps the manager allocate the most appropriate staff to each young person.

Care packages are tailor made to each young persons needs and are mostly delivered by the same care staff, so there is good continuity of care and knowledge of the persons needs and wishes.

The agency operates safe working practices to protect both staff and clients from harm. The support plans for the young people are very detailed and give staff clear guidance on what level of care and support is needed. The plans are agreed to by the young person, their family and their social worker. The agency promotes good working relationships with other professionals involved in the persons care, again providing good continuity.

The staff team all achieve a National Vocational Qualification in the care of children and young people at level 3 or 4. There is a full induction training programme for new staff and regular training updates for existing staff. The manager arranges specific training in response to the needs of service users.

The agency operates a quality monitoring system that includes six monthly satisfaction surveys being sent to families and their social workers, and annual visits to the clients home by the manager. We saw evidence that suggestions and ideas raised in these quality surveys are acted on.

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

Since the last inspection on 2007 the agency has improved the staff induction training package and strengthened information and training for staff about medicines. There has been training in autism and epilepsy in response to service user's needs.

The manager has introduced a complaints log, although no complaints have been made. She has also introduced checklists to help keep track of when satisfaction surveys, home visits and care plan reviews are due to take place.

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

There are no requirements or good practice recommendations made as a result of this inspection.

The manager and staff continue to listen to their service users, and provide a very good quality service to them.

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).

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## Details of our findings

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

The agency provides a highly individual, reliable and responsive service that meets the needs of young people and their families.

Evidence:

We saw that the agency has developed an informative Statement of Purpose, and the manager told us she gives a copy of this to each family they support. The document outlines the aims and objectives of the agency and gives an overview of how the agency operates. It includes information about terms and conditions, confidentiality, staffing arrangements and the complaints procedure.

We looked at the referral and assessment procedure for new clients, and saw this ensured full information was gathered, and a care plan drawn up, before any care and

## Evidence:

support was delivered. All referrals come via social services and include a copy of their core assessment of the young persons needs. The manager then arranges to visit the family, with the social worker if possible, to discuss their expectations, and to undertake her own assessments. A care plan is drawn up based on the information gathered, and the family and their social worker are asked to sign their agreement to this. The manager selects care staff according to the needs of the young person, and takes them on an introductory visit to the family, before any care is provided.

Each family has their own dedicated care staff, and any planned absence such as carers holidays, are arranged in advance so that adequate cover can be provided. The manager said some families prefer not to have a service while their main carer is on leave. Any short term changes of care staff, owing to sickness, are communicated to families by telephone.

When asked, what the agency could do better, one family told us, "you can't beat excellence".

## 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.

Individual care plans are drawn up jointly with the young person, their parents or guardians and their social worker. The plans give very detailed guidance to staff about the kind of care and support required.

Evidence:

We looked at the service user plans for young people with very different needs and who had been receiving a service from the agency for different lengths of time. We saw the plans were individual and specific to each young person, and contained a good level of information for staff to refer to. In some cases there were very set routines for the carer to follow and this helped provide consistency for the young person and their family. Some of the plans, especially around behaviour support, matched those of other agencies, such as school or family rules. Care plans, and any changes to them, had been signed and agreed by the family and their social worker.

Each family kept a 'log book' in their home, which contained a copy of the current care plan and the carers daily records. These were collected periodically and securely stored in the agency office. From these we saw that care plans were written in such a way as to promote privacy and dignity, and care staff completed the daily logs using

Evidence:

appropriate and professional language.

Staff were issued with a medicines information sheet, setting out the use of and side effects of the common medicines their clients used. Care staff were only administering medicines to one young person at the time of this inspection. Information about who was responsible for administering medicines was set out in each persons care plan. Care staff who did administer medicines had received appropriate training and support to do so safely.

## 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 agency promoted safe working practises and had suitable procedures in place to minimise risks to their clients and staff.

Evidence:

We saw evidence that the agency had safe working practices in place to protect their clients and their staff. Staff had received training in safe moving and handling, fire safety and food hygiene. Risk assessments were in place to guide staff in the correct use of hoists and other equipment and about how to manage challenging behaviour. Staff were instructed on how to gain access to clients homes and were aware of any security measures in place. Staff were able to contact the manager at all times for advice should anything untoward happen. There was an accident reporting procedure, and we saw that staff had made use of this as necessary.

The service did not have dealings with people's finances, and all invoices for services delivered were managed through social services. There were however guidelines for staff in handling peoples money should the need arise.

All staff had received training in child protection and the manager acted as the designated child protection officer. There were polices and procedures in place to

Evidence:

guide staff in raising alerts, and staff had access to the local authority child protection procedures. Staff had also received physical intervention training and had completed National Vocational Qualifications in the care of children and young people.

The systems and procedures in place were in line with good practice and served to ensure the safety and wellbeing of service users and staff.

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

Young people and their families were supported by well trained, experienced staff who were individually assigned to them and understood their needs and wishes.

Evidence:

The agency employed eleven care staff who were each allocated to work with specific young people and their families. All staff received thorough induction training and were supported to gain a National Vocational Qualification in the care of children and young people at level 3 or 4. The agency had an annual training plan that covered all core subjects and staff undertook additional role specific training as required to meet their client's needs. For example some additional training had been arranged in autism and epilepsy. The majority of training was provided by external training providers and the agency maintained good links with the local college who would tailor make courses to meet specific needs.

We looked at staff recruitment records and saw that thorough pre-employment checks were carried out. These included written references and checks against the criminal records bureau and child protection agency listings. The agency held copies of peoples identity checks on file, and all staff were issued with a staff handbook and identity badge. The induction pack had been re-written and now provided a very comprehensive guide for staff in all aspects of the agencies policies and procedures.

Evidence:

The manager supervised each staff member every three months and carried out an annual appraisal. There were also regular, well attended staff meetings, where practices and procedures were discussed as well as training needs.

People who used the service told us the staff were reliable, friendly and skilled and understood their needs. One family wrote, "They come into the home with a happy and relaxed attitude".

## 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 agency is run in a professional and efficient way with the manager putting the needs of the young people and families they support first.

Evidence:

The agency operates from a modern office within a small business park. Clients do not need to visit the office, as the manager will visit people in their home on request. The office was well equipped and staffed appropriately for the size of service. The registered manager provided positive leadership and had a clear vision for the future shape of the service.

The standard of administration and record keeping was very good, with check lists in use to keep track of tasks to be completed. There was secure storage for confidential records, which were safely archived once no longer in use.

There were comprehensive policies and procedures that were frequently reviewed and updated to keep them in line with current good practice guidelines.

Each family was given a copy of the complaints procedure when they started to receive a service, and told us they knew how to raise concerns. The manager had set up a new complaints log, but told us she had not received any complaints. None had been made to the Care Quality Commission either.

Evidence:

There was a quality assurance process in place. This included families and social services signing their agreement to care plans, bi-annual satisfaction surveys to each family and their social worker, and an annual visit to families by the manager. We saw that the manager kept check lists of when care plan updates, surveys and visits were due, and she also kept a record of the outcome of these. We saw evidence that where families had made a request or suggestion this had been acted on.

This was a well run business where the manager focused on providing good outcomes for the young people and families who use the service.

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

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

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