

Review of compliance

<p>Fylde Community Link Limited Supported Living and Domiciliary Support Service</p>	
<p>Region:</p>	<p>North West</p>
<p>Location address:</p>	<p>19 Church Road Lytham Lancashire FY8 5LH</p>
<p>Type of service:</p>	<p>Domiciliary care service Supported living service</p>
<p>Date of Publication:</p>	<p>March 2012</p>
<p>Overview of the service:</p>	<p>Fylde Community Link offers support services for adults with learning disabilities within Blackpool, Fylde and Wyre and can also provide a service for people who in addition have physical disabilities and / or sensory impairments. Fylde Community Link is a community based non-profit making agency in the Fylde, whose purpose is to provide an positive support services</p>

	to people with learning disabilities based on the principles of promoting people's rights, their inclusion and their choices
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Summary of our findings for the essential standards of quality and safety

Our current overall judgement

Supported Living and Domiciliary Support Service was meeting all the essential standards of quality and safety.

The summary below describes why we carried out this review, what we found and any action required.

Why we carried out this review

We carried out this review as part of our routine schedule of planned reviews.

How we carried out this review

We reviewed all the information we hold about this provider, carried out a visit on 17 February 2012, reviewed information from stakeholders and talked to people who use services.

What people told us

People said that before they were offered the care service everything was agreed with them and they knew what to expect. People also said that they felt the staff respected their privacy and dignity when carrying out their care.

We spoke to three people who receive care and support from Fylde Community Link and they were very satisfied with the way the service operated. They said that the staff were very good, and that they always did what has been agreed. They said that their care and support was discussed with them, carried out sensitively and that they were treated with dignity and respect.

People who use the agency told us that the care staff arrive on time and stay for the time that has been agreed. They said that the carers were very good and always carried out the care that had been agreed and recorded in their care plan.

What we found about the standards we reviewed and how well Supported Living and Domiciliary Support Service 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

People are supported and encouraged to express their views, so far as they are able to do so, and people are involved in making decisions about their care and support.

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

and supports their rights

People experience effective, safe and appropriate care and support that meets their needs and protects their rights.

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

People are protected from abuse, or the risk of abuse, and their human rights are respected and upheld.

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

People's needs are met by a effective staff team.

Outcome 16: The service should have quality checking systems to manage risks and assure the health, welfare and safety of people who receive care

People benefit from a service that has effective monitoring systems in place.

Other information

Please see previous reports for more information about previous reviews.

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**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 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 said that before they were offered the care service everything was agreed with them and they knew what to expect. People also said that they felt the staff respected their privacy and dignity when carrying out their care.

Other evidence

The management team explained what is involved when a new person looks to use the service. Staff from the agency are involved in gathering information about the person's needs, and this is done with the person, their representative and family (if appropriate), and any other interested party. Once a thorough assessment of the person's individual needs, interested and support requirements has been made, then a decision is made about what type of service can be offered to the person, and further discussions and negotiation takes place.

The information supplied by the management team was supported by way of written information held by the agency relating to the people who the service. In addition to this, people associated with the agency (Stakeholders - staff, relatives, professionals and people who use the service) confirmed that good assessment processes are in place, and that there are systems in place that ensure people are consulted about their wants and needs, so that the support the agency provides is meeting those individual

needs.

Our judgement

People are supported and encouraged to express their views, so far as they are able to do so, and people are involved in making decisions about their care and support.

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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

We spoke to three people who receive care and support from Fylde Community Link and they were very satisfied with the way the service operated. They said that the staff were very good, and that they always did what has been agreed. They said that their care and support was discussed with them, carried out sensitively and that they were treated with dignity and respect.

Other evidence

Information held by the agency relating to the people it supports clearly demonstrates that person-centred planning is at the heart of everything they do with people, and is linked to the types of care and support they offer people. The management team explained that their approach is aimed at enabling people who use the service to plan their own futures and to get the services that they need. One professional we spoke to said that the agency embracing the principles of independence, choice, inclusion, equality and empowerment and sees these as the foundations of everything they do.

Again, others stakeholder associated with the agency confirmed that good systems are in place relating to how people are supported, with particular reference to ensuring people's health needs are monitored, their social interests met, and individual well-being is promoted.

Our judgement

People experience effective, safe and appropriate care and support that meets their needs and protects 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 said if they had any concerns they knew who to contact and things would be sorted out quickly. One person said, "If I was not happy I would tell someone and things would change". One person told us that they had been very nervous about having people they did not know provide care and support but they explained that staff from the agency spoke to them about all the checks they made on staff to make sure they are suitable to work with people. The person told us that they were reassured by this, and felt able to be confident about using the agency.

Other evidence

The management team and staff explained what the process for identifying and responding appropriately to signs and allegations of abuse are. The records show that staff are trained in understanding what constitutes abuse and restraint. People we spoke to told us how they would respond to signs and allegations of abuse. From these responses it was clear that the staff had been trained and understood what abuse was, and other issues such as the circumstances in which restraint can and cannot be used. Information contained within the records we looked at reflected what the manager and care staff had told us, and what people who use the service had said.

Our judgement

People are protected from abuse, or the risk of abuse, and their human rights are respected and upheld.

Outcome 13: Staffing

What the outcome says

This is what people who use services should expect.

People who use services:

* Are safe and their health and welfare needs are met by sufficient numbers of appropriate staff.

What we found

Our judgement

The provider is compliant with Outcome 13: Staffing

Our findings

What people who use the service experienced and told us

People who use the agency told us that the care staff arrive on time and stay for the time that has been agreed. They said that the carers were very good and always carried out the care that had been agreed and recorded in their care plan.

One person said, "The staff are really nice. They come on time and do what they are supposed to do."

Other evidence

The management explained the systems for staffing the various tenancies run by the agency. Staffing levels are based on people's assessed needs, and these are reviewed both routinely and in response to the changing needs of people using the service. Staff and other professionals who were spoken with said that they felt that the management team was approachable and added that if they need any specialist help when working with an individual they can access this through their manager and the support systems run by the agency.

Our judgement

People's needs are met by a effective staff team.

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

One person said that the the managers of the agency come out to chat about the care and support they are receiving, and another person that they always felt listened to if they wanted to raise an issue.

Other evidence

The management team explained that there is assessment and monitoring systems in place that look at the quality of the services provided by the agency. The records show that these systems look at the delivery of the care and support people receive. Professionals linked to the agency were able to talk about the different reporting systems that are used by the agency concerning risks relating to the health, welfare and safety of people who use the service. The agency routinely seeks the views and comments of people who use services, their carers, staff and other third parties regarding the quality of the services provided. The results of these surveys were found be very positive.

Our judgement

People benefit from a service that has effective monitoring systems in place.

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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