

# Review of compliance

<b>Medway Council Shared Lives</b>	
<b>Region:</b>	South East
<b>Location address:</b>	Lordswood Healthy Living Centre Sultan Road Chatham Kent ME5 8JT
<b>Type of service:</b>	Shared Lives (formerly known as Adult Placement)
<b>Publication date:</b>	April 2011
<b>Overview of the service:</b>	<p>Shared Lives is run by Medway Council, and is situated in offices within the Lordswood Healthy Living Centre in Chatham.</p> <p>It provides a service to enable people who need care, to live with carers within their own homes.</p>

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

## What we found overall

**We found that Shared Lives 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, carried out a visit on 13<sup>th</sup> April 2011, talked with staff, checked the provider's records, viewed survey results, and looked at records of people who use services.

### What people told us

We viewed some responses from recent carers' surveys. These showed that all the respondents were happy with the service provided by Shared Lives. Respondents said that they found the staff to be "approachable, professional, and very helpful". We talked with five staff members, who told us that there were sufficient numbers of social workers to support the Shared Lives carers. They informed us that there were good processes in place to support the staff and carers with ongoing training.

## **What we found about the standards we reviewed and how well Shared Lives 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**

People using services were fully involved with all aspects of the assessment and placement processes.

- Overall, we found that Shared Lives was meeting this essential standard.

### **Outcome 2: Before people are given any examination, care, treatment or support, they should be asked if they agree to it**

The carers were provided with clear information, so that they could consent to carrying out all aspects of the placements' management.

- Overall, we found that Shared Lives was meeting this essential standard.

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

The service had good systems in place to support the carers in their work of providing care to people.

- Overall, we found that Shared Lives was meeting this essential standard.

### **Outcome 5: Food and drink should meet people's individual dietary needs**

The service provided carers with appropriate information and training to assist them with providing a healthy diet for people in their care.

- Overall, we found that Shared Lives was meeting this essential standard.

### **Outcome 6: People should get safe and coordinated care when they move between different services**

The service maintained good links with other health services and social care providers.

- Overall, we found that Shared Lives was meeting this essential standard.

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

The service ensured that the staff and people who provided care were trained to understand safeguarding processes, and how to apply them.

- Overall, we found that Shared Lives was meeting this essential standard.

### **Outcome 8: People should be cared for in a clean environment and protected from the risk of infection**

The service supported carers in managing and maintaining appropriate standards of cleanliness.

- Overall, we found that Shared Lives was meeting this essential standard.

**Outcome 9: People should be given the medicines they need when they need them, and in a safe way**

The service provided staff and carers with suitable training and guidance so that people receiving care could be supported with their medication.

- Overall, we found that Shared Lives was meeting this essential standard.

**Outcome 10: People should be cared for in safe and accessible surroundings that support their health and welfare**

The service ensured that carers were informed about their responsibility in running their own homes.

Office facilities for Shared Lives were satisfactory.

- Overall, we found that Shared Lives was meeting this essential standard.

**Outcome 11: People should be safe from harm from unsafe or unsuitable equipment**

The service had procedures in place to support carers with using any specialist equipment needed.

- Overall, we found that Shared Lives 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 service had suitable recruitment procedures in place.

- Overall, we found that Shared Lives was meeting this essential standard.

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

Shared Lives had suitable numbers of trained and experienced staff to support the carers and service users.

- Overall, we found that Shared Lives was meeting this essential standard.

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

Staff were enabled to take part in training which was relevant to their roles and skill development.

- Overall, we found that Shared Lives 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**

Shared Lives had effective processes for monitoring the care that people received.

- Overall, we found that Shared Lives was meeting this essential standard.

**Outcome 17: People should have their complaints listened to and acted on properly**

The service ensured that the complaints procedure was accessible to all parties, and took appropriate steps to deal with each complaint.

- Overall, we found that Shared Lives was meeting this essential standard.

**Outcome 21: People's personal records, including medical records, should be accurate and kept safe and confidential**

The service maintained records to a good standard, and ensured that peoples' confidentiality was protected.

- Overall, we found that Shared Lives was meeting this essential standard.

**Action we have asked the service to take**

We found that Shared Lives was fully compliant with all of the 16 essential standards of quality and safety.

**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 did not obtain any information about this standard from people who used the service.

**Other evidence**  
In this service, the people who were being directly supported by the staff were carers who provided accommodation and daily support to people who came to live in their own homes. The carers were not employed by Shared Lives, but were self-employed.

We viewed two carers' files, looking at the assessment processes. These were extremely detailed, looking at all aspects of their home, such as their health, lifestyle, finances, neighbourhood, knowledge, competencies, skills and experience. Assessments took place over a number of visits to them in their home, and included other people living in the household, and information about close relatives who would visit regularly. The staff explained before the process started that the questions could seem intrusive, but found that most carers were aware that it would be necessary to provide comprehensive information. This was to ensure the safety

of the people who they would be caring for in the future, and to enable the staff to match up the people being cared for to the carers in the best way possible.

The staff provided detailed information to potential new carers before the assessment process commenced. Each successfully recruited carer had an allocated social worker assigned to them, who would visit them on a regular basis to support them in their role.

A carers' survey which had been carried out in January 2011 showed that those who responded had been satisfied with the assessment and approval process.

The Shared Lives staff received information from Social Services with Individual Needs Portrayals for each person who wanted to access care. Discussions were carried out as a team to try to determine which carer would be best for those being cared for. Placements could take a long time to set up, as matching people to the right carers was a very important part of the service. This was carried out with visits and overnight stays, for people to make an informed decision on both sides.

### **Our judgement**

People using services were fully involved with all aspects of the assessment and placement processes.

Overall, we found that Shared Lives was meeting this essential standard.

# Outcome 2: Consent to care and treatment

## What the outcome says

This is what people who use services should expect.

People who use services:

- Where they are able, give valid consent to the examination, care, treatment and support they receive.
- Understand and know how to change any decisions about examination, care, treatment and support that has been previously agreed.
- Can be confident that their human rights are respected and taken into account.

## What we found

### Our judgement

**The provider is compliant** with outcome 2: Consent to care and treatment

### Our findings

**What people who use the service experienced and told us**  
We did not obtain any information about this standard from people who used the service.

**Other evidence**  
We obtained information about this outcome by talking with staff, and by reading carers' recruitment and assessment files, and two files of people receiving care. Potential carers were fully informed about the need for staff to obtain detailed information about them for the purposes of carrying out the placements, and they verbally consented to providing the information required. They recognised that the requirements of being a carer for other people necessitated providing ongoing information about their health and any medical conditions, and details of any changes in the home that might affect the person living with them. Carers consented to having planned visits from social workers for the purposes of assessments; and consented to planned visits from people who required care, in order to decide if they would be suitable carers for them. Carers also consented to having an enhanced Criminal Record Bureau (CRB) check; having other checks and references carried out; and agreed to carry out

required training.

A licence agreement was made between the carer and the person receiving care for the weekly rental. The terms and conditions of the placement were specified in writing, and this included details such as keeping the premises in a state of good repair, and providing all heating, lighting, and meals. Carers agreed in writing to provide the support which had been identified; and agreed to receive ongoing support and advice from their allocated social worker.

**Our judgement**

The carers were provided with clear information, so that they could consent to carrying out all aspects of the placements' management.

Overall, we found that Shared Lives was meeting this essential standard.

# 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 did not obtain any information about this standard from people who used the service.

**Other evidence**  
New carers were taken through an induction programme to ensure their familiarity with key issues, and given clear expectations of the ethos behind family based care. All carers were provided with a carers' handbook which gave them guidance, and policies and procedures to support them and inform them in the work they were undertaking with people they agreed to care for. Carers received regular monitoring and support from their allocated social worker, including visits every six to ten weeks. The social workers ensured their understanding and compliance with the regulations for carrying out care in their own homes.

Shared Lives had developed a separate paper work manual for carers to use, which included documentation for them to complete to show the care given. This included a daily diary, medication support, and the NHS traffic light system. This document was completed by each carer for the person living with them so that in the event of the person needing any emergency hospital treatment, they could inform the hospital staff of the person's current care needs, their support needs, and their communication skills.

Shared Lives had a senior staff member on call throughout the twenty-four hour

period, so that carers could contact them on any urgent issue. The staff team kept a confidential file of the “traffic light” forms in a secure place to access if needed in an emergency.

Carers in the Shared Lives scheme received an annual review, and were kept up to date via mail shots, guidance, and information from the team throughout the year. The annual reviews included feedback obtained from the person receiving care, and feedback from their own families, and their supporting social worker. Carers attended mandatory training courses, and specific courses were offered according to the needs of the service user and the learning needs of the carer.

People receiving care were integrated into the carer's family as quickly as possible, and they got to know each other extremely well. This enabled the carers to be able to quickly identify any changes in the person's health or support them through any illness. People receiving care were allocated with a local GP and regular health checks were maintained. These were checked via the six to ten week support and monitoring visits from the team social workers. The scheme also provided Family Support Workers, whose role was to liaise directly with the people receiving care. They spent time with each person several times per year on a one to one basis, and would be present at the people's six-monthly care manager reviews. This provided an additional support network to the carers.

### **Our judgement**

The service had good systems in place to support the carers in their work of providing care to people.

Overall, we found that Shared Lives was meeting this essential standard.

# Outcome 5: Meeting nutritional needs

## What the outcome says

This is what people who use services should expect.

People who use services:

- Are supported to have adequate nutrition and hydration.

## What we found

### Our judgement

**The provider is compliant** with outcome 5: Meeting nutritional needs

### Our findings

**What people who use the service experienced and told us**  
We did not obtain any information from people who used the service about this standard.

**Other evidence**  
We obtained information about this outcome area from the Provider Compliance Assessment, which was requested before the visit; and from reading documentaiton in the office.

Shared Lives did not provide food for people using the service, but it did support the carers with nutritional information and practical advice. Carers were expected to provide a healthy balanced diet for the person living with them. Each carer was provided with a booklet of recipes produced by Medway Council Health Promotion Team which contained simple to follow recipes. Any specific nutritional needs were identified at the commencement of the placement through the completion of the referral document. The carers were encouraged to work with the person they were caring for, and, where possible, help the person to develop independent living skills so that they could prepare their own drinks and snacks. If possible, people were encouraged to prepare hot meals for themselves and the family they lived with. This was often an aim which was identified on the service user's plan, and the progress on this was reviewed every six months.

The service followed the recommended practice guidance established by the National Association of Adult Placements, (NAAPS), who specified that twenty-five competencies should be monitored and evidenced during the work with carers. This

included the provision of a healthy life style. Evidence of this, through discussion with the carer and service user, was gathered and recorded on the carer's file. Carers carried out training in basic food hygiene as part of their induction course.

**Our judgement**

The service provided carers with appropriate information and training to assist them with providing a healthy diet for people in their care.

Overall, we found that Shared Lives was meeting this essential standard.

# Outcome 6: Cooperating with other providers

## What the outcome says

This is what people who use services should expect.

People who use services:

- Receive safe and coordinated care, treatment and support where more than one provider is involved, or they are moved between services.

## What we found

### Our judgement

**The provider is compliant** with outcome 6: Cooperating with other providers

### Our findings

**What people who use the service experienced and told us**  
We did not obtain any information from people who used the service about this standard.

**Other evidence**  
We obtained information about this outcome from the Provider Compliance assessment, from discussion with five staff on the day of the visit, and from documentation viewed in the office.

The Shared Lives staff supported the carers to maintain an up to date “pen picture” of the person who was living with them. This document was produced with the involvement of the person receiving care, and included essential information about the their care, support, daily activities, routines, and contact details. This was available for sharing with another carer or service provider if required, and would allow them to take over the person’s care with minimal disruption to their daily routine.

The carers maintained a respite pack with support from the team, which included a copy of the person’s service user plan, risk assessments and the NHS traffic light assessment, all of which were prepared with the participation of the person receiving care. The packs were kept in a secure but accessible place within the home so that it was available if the person required planned or emergency respite care. It was then passed to the alternative service provider to ensure continuity of

care.

The Shared Lives service was located in the same building as the Integrated Health and Community Team and this aided effective communication between teams. The care management team took the lead on issues of safeguarding but the Senior Practitioner from the Shared Lives team took the lead for issues involving the service, and provided additional support to social workers when required.

Documentation in the office showed that there was good liaison with other health teams, including GPs, psychiatrists, and other health professionals, such as speech and language therapists, and occupational therapists.

### **Our judgement**

The service maintained good links with other health services and social care providers.

Overall, we found that Shared Lives was meeting this essential standard.

# 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**  
We did not obtain any information from people who used the service about this standard.

**Other evidence**  
We obtained information about this outcome from the Provider Compliance Assessment, and from talking with the manager and staff during the visit. The manager stated that the safety of people using the service was of paramount importance, and said that this was emphasised at every stage when they were working with potential carers. Thorough checks and references were taken up for new applicants, and a comprehensive assessment was carried out, which included their partner or husband/wife. Checks were also carried out for any other adult living in the house; and the staff team met and talked with any children (i.e. anyone under 18 years).  
Issues of adult abuse and safeguarding adults was discussed during the induction training, and specific training was given to all carers on safeguarding vulnerable adults. This included recognising the signs and symptoms of abuse. Two staff members were qualified to deliver this training in accordance with the joint Kent and Medway protocols, which was multi-agency training established using the No Secrets guidance 2000. Regular updates and additional training was arranged for carers and staff.

Because of the unpredictable nature of disclosure the service provided carers with a prompt card to keep in their wallets or pockets so that if a person disclosed any form of abuse to them, they had a prompt on how they should respond and deal with the situation. It was recognised that disclosures could happen at the most unexpected times and it was essential that people receiving care were supported to tell their story and to receive the correct support.

The manager said that the staff were experienced and knowledgeable practitioners, and were all trained in safeguarding vulnerable adults to a high level and had an excellent awareness of the subject. The staff had regular training updates and received e-mail updates from Medway Council via the Safeguarding Officer who worked for adult services. Staff also attended the Safeguarding Children's Awareness training to enable them to support the carers' work with families.

A whistle-blowing procedure was in place for Medway Council.

### **Our judgement**

The service ensured that the staff and people who provided care were trained to understand safeguarding processes, and how to apply them.

Overall, we found that Shared Lives was meeting this essential standard.

# Outcome 8: Cleanliness and infection control

## What the outcome says

Providers of services comply with the requirements of regulation 12, with regard to the *Code of Practice for health and adult social care on the prevention and control of infections and related guidance*.

## What we found

### Our judgement

**The provider is compliant** with outcome 8: Cleanliness and infection control

### Our findings

**What people who use the service experienced and told us**  
We did not obtain any information from people who used the service about this standard.

**Other evidence**  
We obtained information about this outcome from the Provider Compliance Assessment, and from talking with staff.  
Shared Lives carers provided care within ordinary family homes and a reasonable standard of cleanliness and hygiene was required. Carers were informed that it was expected that the home would be maintained to a high standard and all necessary precautions taken to ensure there was no risk of infection spreading.  
Carers attended training on maintaining Universal Precautions which supported them in how to maintain standards and how to minimise the spread of infection.  
At the first home visit, the team manager assessed the suitability of the carer's home and its condition and hygiene standards. Any issues were raised immediately and unacceptable standards were challenged. An annual health and safety risk assessment was carried out on all carers' homes.  
People receiving care were encouraged to take part in completing domestic tasks and in learning new independence skills in order to build their knowledge and competence.

**Our judgement**  
The service supported carers in managing and maintaining appropriate standards of

cleanliness.

Overall, we found that Shared Lives was meeting this essential standard.

# Outcome 9: Management of medicines

## What the outcome says

This is what people who use services should expect.

People who use services:

- Will have their medicines at the times they need them, and in a safe way.
- Wherever possible will have information about the medicine being prescribed made available to them or others acting on their behalf.

## What we found

### Our judgement

**The provider is compliant** with outcome 9: Management of medicines

### Our findings

**What people who use the service experienced and told us**  
We did not obtain any information from people who used the service about this standard.

**Other evidence**  
The carers' handbook included the medication policy and relevant guidance for carers to support people with their medication. This included guidance on maintaining documentation for medication recording, so that health professionals would have a clear record of what the people receiving care had been taking. People receiving care were encouraged to build their skills and take as much responsibility as possible for the management of their own medication. Carers were required to have a lockable place for all medicines kept in the house. This was monitored annually as part of the annual health and safety check undertaken by the staff team. Carers were required to attend a medication handling course with updates every three years. Ongoing monitoring was carried out annually by a staff member between these courses, to ensure that standards were maintained. Issues regarding medication and changes in medication were recorded in the carer's daily diary and discussed with the social worker at their regular visits. Specific training was arranged for carers who had people placed with them who

were diagnosed with certain medical conditions e.g. epilepsy, so that the carers could be confident in understanding the medical condition and the medication required, and how to support the person placed with them.

**Our judgement**

The service provided staff and carers with suitable training and guidance so that people receiving care could be supported with their medication.

Overall, we found that Shared Lives was meeting this essential standard.

# Outcome 10: Safety and suitability of premises

## What the outcome says

This is what people should expect.

People who use services and people who work in or visit the premises:

- Are in safe, accessible surroundings that promote their wellbeing.

## What we found

### Our judgement

**The provider is compliant** with outcome 10: Safety and suitability of premises

### Our findings

**What people who use the service experienced and told us**  
We did not obtain any information from people who used the service about this standard.

**Other evidence**  
The care provided under this scheme was within family homes and the carers were expected to maintain the safety of their own homes, the upkeep of the property and peoples' belongings. It was specified that no-one should have access to the bedroom of the person receiving care without their permission. Their personal belongings were covered by the carer's insurance, unless the value was exceptionally high (e.g. computers and high cost equipment). In this case, the person receiving care was encouraged to have their own insurance to cover their belongings. Access to the home was restricted, and the person receiving care would have a key to the front door where this was safe and practical to do so.  
The manager carried out a health and safety check of the carer's home at the first visit, to ensure that the premises would be suitable. These were followed up with annual checks, which included viewing documents such as gas and boiler certificates.  
The Shared Lives service operated out of a Health and Community Centre run by Medway PCT. The premises provided a sufficient amount of office space, but the service was spread out between two small offices, and an open plan area, so that there were sometimes considerable distances between staff, and only small office areas for the staff team to meet together and discuss issues and ongoing progress.

**Our judgement**

The service ensured that carers were informed about their responsibility in running their own homes.

Office facilities for Shared Lives were satisfactory.

Overall, we found that Shared Lives was meeting this essential standard.

# Outcome 11: Safety, availability and suitability of equipment

## What the outcome says

This is what people should expect.

People who use services and people who work in or visit the premises:

- Are not at risk of harm from unsafe or unsuitable equipment (medical and non-medical equipment, furnishings or fittings).
- Benefit from equipment that is comfortable and meets their needs.

## What we found

### Our judgement

**The provider is compliant** with outcome 11: Safety, availability and suitability of equipment

### Our findings

**What people who use the service experienced and told us**  
We did not obtain any information from people who used the service about this standard.

**Other evidence**  
There was currently no specialist equipment in use within the homes approved under the scheme. The manager said that if a person receiving care needed special equipment the service would ensure that the carer's house was suitable for this, and the carer would receive adequate training to ensure that the person receiving care had their safety, comfort and dignity maintained.  
One carer was waiting for a chair lift to be fitted in order to meet the needs of the person living with them, as their mobility needs increased.

**Our judgement**  
The service had procedures in place to support carers with using any specialist equipment needed.  
Overall, we found that Shared Lives was meeting this essential standard.

# 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**  
We talked with a newly recruited staff member who confirmed that there was a robust recruitment and induction process.

**Other evidence**  
We talked with five staff and a social work student, as well as the manager, and viewed two staff files. Recruitment was carried out by Medway Council, and followed their guidance to recruit suitably qualified and experienced social workers to provide support to the carers and those they were caring for. Recruitment was seen to follow equality and human rights processes, and included taking up checks and references such as an enhanced Criminal Record Bureau (CRB) check, and health checks. The most recent recruitment process had included the involvement of a panel of Shared Lives carers, whose views had been included as part of the selection process. Recruitment processes were stored on an electronic system enabling the manager to view all of the documentation checked by the Council, and be fully involved with taking decisions about new staff members. We found that Shared Lives had a positive policy of including social work students and promoted training within the team. All students had current CRB checks and were interviewed by their practice assessor and team manager prior to a place being offered, to ensure their suitability. A set induction programme was provided for all staff and carers and this met the

requirements of Skills for Care and was produced by the National Association of Adult Placement.

**Our judgement**

The service had suitable recruitment procedures in place.

Overall, we found that Shared Lives was meeting this essential standard

# 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**  
We talked with five of the staff, who told us that there were sufficient numbers of social workers to support the Shared Lives carers. Shared Lives also had two family support workers for the people being cared for, and we were informed that with increasing numbers of people being cared for, it might be necessary to increase the number of these staff members in the future.

**Other evidence**  
The scheme had a knowledgeable and experienced staff team, which consisted of five qualified social workers, two trainee social workers, two family support workers, and an administration support assistant.  
The carers were self-employed workers who were approved by the service. As part of a lengthy assessment process, Shared Lives staff assessed the knowledge and skills of the carers to identify any specific areas where they needed to develop their skills and their knowledge, and ensured they received relevant training or options for shadowing more experienced carers. Potential service users were offered a choice of carers from those who had the necessary skills to meet their needs.  
We viewed two carers' files to confirm the processes of their assessment and recruitment.

**Our judgement**

Shared Lives had suitable numbers of trained and experienced staff to support the carers and service users.

Overall, we found that Shared Lives was meeting this essential standard.

# 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**  
We talked with five staff in a group together, and they informed us that there were good processes in place to support them with ongoing training.

**Other evidence**  
All new members of staff received an induction into Medway Council and into the Shared Lives service, and through this they received information about standards, policies and procedures. Staff were suitably qualified and experienced, and received monthly supervision to support them in their roles and to enable them to develop their skills and knowledge further. Six monthly Performance Development Reviews were held, and these helped to identify specific learning and development needs. Records of training attended were recorded by the individual worker and were held on their training record by the council. Qualified social workers were enabled to attend appropriate training for their role and to maintain their registration with GSCC.

All staff had risk assessment and risk management training. They had recently attended a two day risk assessment training course which ensured that the management of risk remained foremost in people’s minds when supporting adults with a learning disability.

**Our judgement**  
Staff were enabled to take part in training which was relevant to their roles and skill

development.

Overall, we found that Shared Lives was meeting this essential 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**  
We viewed some responses from the recent carers' surveys. These showed that all the respondents were happy with the service provided by Shared Lives. Respondents said that they found the staff to be "approachable, professional, and very helpful".

**Other evidence**  
Each carer had an allocated social worker who visited them every six to eight weeks to offer support, and to monitor their progress and ensure standards for care were being maintained. They also had an annual review, which was carried out by the manager. Prior to this review, service users were given the opportunity to give their views on the care they received and any changes they would like.  
Regular carer support groups enabled the team to pass on information to carers in an informal setting to ensure that their practice was up to date. The support and monitoring visits by qualified social workers gave carers the opportunity to discuss issues in greater depth and at a more personal level.  
All carers were given a handbook which contained guidance, and policies and procedures to support them in their work. Carers were also provided with a paper-work manual, and instructions on how to accurately record the care given to service

users.

The service carried out quality assurance surveys each year, obtaining views from service users, carers, their family members, care managers and social workers. All information was gathered and analysed, and used to further develop and improve the service. We viewed some of the survey results for the most recent survey which was carried out in January 2011. This showed that respondents were overall satisfied with the carers' assessment and approval processes, and happy with the matching process for service users to carers.

Service users had six monthly care management reviews from their care manager, and regular visits from their allocated family support worker, to discuss their experience of care.

The service carried out a twenty-four hour on-call service so that carers could contact someone at any time for support and advice.

### **Our judgement**

Shared Lives had effective processes for monitoring the care that people received. Overall, we found that Shared Lives was meeting this essential standard.

# Outcome 17: Complaints

## What the outcome says

This is what people should expect.

People who use services or others acting on their behalf:

- Are sure that their comments and complaints are listened to and acted on effectively.
- Know that they will not be discriminated against for making a complaint.

## What we found

### Our judgement

**The provider is compliant** with outcome 17: Complaints

### Our findings

**What people who use the service experienced and told us**  
We did not obtain any information from people who used the service about this standard.

**Other evidence**  
Medway Council had a clear policy and procedure for managing complaints, and the manager informed us that this was publicised widely in council buildings, libraries, and on the web site.  
Carers were provided with information about how to complain, in the carers' handbook. Service users were also provided with this information, which was provided as an easy-read leaflet for them if this was indicated.  
The Provider Compliance Assessment informed us that the manager would investigate any complaints promptly and sensitively. The details were shared with the Council's central complaints department to ensure that there was an audit trail of the investigation. Each complaint and the action taken was documented separately to preserve confidentiality. The administrative assistant maintained a separate file of complaints details, and this meant that the collation of all complaints details and records was a straightforward process.

**Our judgement**

The service ensured that the complaints procedure was accessible to all parties, and took appropriate steps to deal with each complaint.

Overall, we found that Shared Lives was meeting this essential standard.

# Outcome 21: Records

## What the outcome says

This is what people who use services should expect.

People who use services can be confident that:

- Their personal records including medical records are accurate, fit for purpose, held securely and remain confidential.
- Other records required to be kept to protect their safety and well being are maintained and held securely where required.

## What we found

### Our judgement

**The provider is compliant** with outcome 21: Records

### Our findings

**What people who use the service experienced and told us**  
We did not obtain any information from people who used the service about this standard.

**Other evidence**  
We viewed a variety of records to confirm processes that we had read about in the Provider Compliance Assessment. This included some carer and service user assessment processes, carers' records and staff records.  
We found that records contained clear details, and were appropriately signed and dated. Paper files were kept in suitably locked areas.  
Electronic records could only be accessed by staff with the appropriate passwords.

**Our judgement**  
The service maintained records to a good standard, and ensured that peoples' confidentiality was protected.  
Overall, we found that Shared Lives was meeting this essential standard

# 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

<b>Document purpose</b>	Review of compliance report
<b>Author</b>	Care Quality Commission
<b>Audience</b>	The general public
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