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Crofton Care Partnership

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Inspection summary

CQC carried out an inspection of this care service on 01 November 2016. This is a summary of what we found.

Overall rating for this service	Good •
Is the service safe?	Good •
Is the service effective?	Good
Is the service caring?	Good
Is the service responsive?	Good
Is the service well-led?	Good

The inspection took place on 1 November 2016 and was announced. At the previous inspection of this service on 24 September 2014 the service was meeting the regulations for the areas we inspected.

Crofton Care Partnership is a domiciliary care agency. They provide care and support to people, in their own homes, in the Fareham and Gosport area of Hampshire. On the day of the inspection the service provided care and support to 78 adults with a range of needs including those living with dementia and older people. They employed 26 care workers.

There was a registered manager at this service. A registered manager is a person who has registered with the Care Quality Commission to manage the service. Like registered providers, they are 'registered persons'. Registered persons have legal responsibility for meeting the requirements in the Health and Social Care Act 2008 and associated Regulations about how the service is run.

There was clear leadership and management at this service. The registered manager and general manager were described as fair, easy to talk to and part of the team. They promoted the values of the service and we saw that they led by example. They had met their obligation to notify CQC of any events that affected the running of the service.



There was sufficient staff with appropriate skills and knowledge working at the time of the inspection to meet people's needs. They were recruited safely. We saw that checks of their background had been completed and two references had been obtained to ensure that they were suitable to work with people who may be vulnerable.

Measures had been taken by staff to ensure that the security of people's homes was maintained.

Risk assessments were completed for the environment to ensure the safety of people who used the service and staff.

Risks to people's health were clearly identified. These were recorded in people's records and there was clear guidance for staff about how to manage those risks. People's medicines were managed safely.

Accidents and incidents were recorded and reviewed with appropriate actions taken to prevent any reoccurrence.

Staff received an induction and training which gave them the skills and knowledge required to carry out their role. They were supported through supervision and appraisal. They were clear about their roles.

The service had good links with Hampshire local authority. They attended a provider group with the council where they could share good practice.

The risk of infection was minimised because staff were provided with personal protective equipment such as gloves in order to carry out personal care.

A variety of methods of communication were used to ensure staff received information and were kept up to date. Staff carried their own telephones and the service sent them text message to update them about calls.

Staff were working within the principles of the Mental Capacity Act and sought people's consent before providing any personal care. When staff handled anyone's money it was with their consent or that of the person with lasting power of attorney for finance.

People received support from staff to make sure they received their meals. They had pre-prepared meals which staff heated for them. They made sure that people received drinks when that was required.

Staff were aware of peoples current healthcare needs. If someone required a visit from a GP staff would arrange that for them.

People told us that staff were caring, kind and friendly. We saw that staff were focused on the person and people mattered to them.

People were given information about the service and clear explanations about any care provision. They were involved in decisions about their care. They contributed to their care planning.

The care plans reflected people's current needs with associated risk assessments. They were reviewed every six months unless changes were made before that when they would be reviewed.



Staff took care to maintain people's privacy and dignity.

The service had a policy allowing 15 minutes either side of the planned call time. This allowed for any unplanned events. If staff were late someone else would carry out the call. People told us that staff stayed for the full time booked.

Complaints were dealt with in line with the service policy and procedure. People were encouraged to give feedback and the provider was proactive in asking people for their views.

The general manager was undertaking a research project looking at quality assurance within the service as part of their leadership and management training. There was a quality assurance system in place and the general manager felt that this could be an area which would benefit from further development.

You can ask your care service for the full report, or find it on our website at www.cqc.org.uk or by telephoning 03000 616161