

Quality Assurance Report

Version 1.0 . April 2014

Introduction

To help us understand how our clients are receiving our services we have a system to review what we are doing and how we are doing it. This is part of our quality assurance process.

This report provides a review of the last twelve months against several key service indicators. We hope that this gives us and our clients a good idea of the kind of service that we are providing.

Our aim is to support people in the community: working with our clients and others involved in their lives. We support to clients who live in the boroughs of Fareham and Gosport. We have been providing domiciliary care services since 1983. Over this time we have established ourselves as a provider of good quality care. It is important to us that we continue to develop our services.

What we did

We gathered and used information from several sources to write this report, including:

- A survey of all our clients;
- Information about our carers and management team,
- A review of complaints, compliments and comments that we have received, and;
- Data from our visits which has been logged electronically.

We wrote to every one of our clients and asked them to complete a questionnaire about our services. This was a slightly updated version of the questionnaire that we have used before. By doing this have been able to look at what clients have told us in previous years to help identify how our service has changed.

Why we did it

This project is part of our quality assurance programme. We will use the comments and feedback from this project to help us develop improvements to our service and shape the direction that we go in.

We think that we know the areas that we perform well in. The last time that we completed the survey, it gave us a great deal of valuable information and we have used that to help improve what we do. It is important that we listen to our clients and carers to find out what their thoughts are.

It is however important not to be complacent. We know that there are areas where our service is weaker than we would like it to be. We have been working for some time on some of these areas and are always keen to explore new ideas to resolve issues.

What our clients said

Three in five people who we sent questionnaires to returned them to us completed. Of those who responded over a significant number of people made additional comments about the service we provide.

Some people chose not to answer all the questions we asked. Sometimes this was because it was not appropriate to the care that we are providing.

The responses were from a range of geographical areas and reflect the spread of clients that we have across Fareham and Gosport. The responses also reflected the length of time that we have been visiting people. The level of care packages (only in terms of visits per week) is also approximately correct for the clients that we currently visit. Generally the more hours we provide to a client, the more likely that we received a response.

We asked people to rate various aspects of our service: from whether the carers ask what help is required, to feeling assured that someone will visit and if the carers treat clients with respect and dignity. This was broken up into four key areas. We have set targets against each of these performance areas. Last year we achieved most of our targets. This year we have adjusted our targets to reflect the scores that we should achieve.

We asked for opinions about our service. We know that because everybody is different, people will rate same service differently. As well as the target score we set, we also looked at the spread of scores that we were given. This helps us to see a pattern within the responses that we received. A smaller spread of scores means that clients agree with each other, whereas a larger spread of scores indicates a divergence of opinion.

We asked clients about our carers and if they were dressed appropriately, and wearing the correct identity and name badges. Our target was to score 1.25 or less. The best score we could achieve is 1 and the worst is 5. You told us that sometimes carers are not wearing name badges or ID badges, scoring us above our target. We also missed this target last year, and our score slightly worsened.

We think that this is because we changed our policy on this subject. We do not require carers to display identity badges at all times any more. We changed our policy because the ID badges could cause an infection control problem and also may get caught in equipment whilst a carer is working. Instead we require our carers to have their identity badges with them at all times and they must be able to produce them when asked. We introduced this subtle change last year. We check that carers have their ID badges with them when we supervise them in the community. Given the change in our policy we are reviewing this target.

When we asked you about how our carers treated you, we again hoped to score 1.25 or less. The best score we could achieve is 1 and the worst is 5. We met our target in all the areas, scoring between 1.02 and 1.09. You felt that our carers treated you with respect, dignity, professionally and in a caring manner. We are pleased about this, as these are central parts of the core values of the organisation.

In the next section of the questionnaire we asked clients to rate their agreement with specific statements about the service that we provide. This time the best score that we could achieve is 1 and the worst is 6. We set ourselves the target of scoring 1.5 in all these areas. The target here is slightly lower than for our other areas of questioning because there is a wider range for answers and this is based more on opinion rather than fact (eg you can see a name badge, but feeling reassured some one will visit is subjective).

We achieved our target in all but one area. You told us that you were generally happy with the service, scoring us 1.20. You said that you could contact us easily (scoring us at 1.16). You also told us that you feel comfortable in the way that care is provided, scoring us at

1.09. You also told us that you were involved when the care package was set up, scoring us at 1.2. All of these scores saw an improvement on the last time that we asked clients to complete a questionnaire.

The only area where we missed our was around arrival times. We asked if carers arrive when clients expect them to and we scored 1.64. This represented an improvement on last time (when we scored 1.85). The spread of scores that we were given was also higher than for other questions but not significantly so. This means that more people are more likely to give us a lower score. Some people also commented on this separately (see below). We know that this is a serious issue for our clients. We are constantly working to address this problem and planning our service to try and ensure that carers arrive when clients expect them to.

We also asked if the information we have provided clients with was sufficient and understandable and over 90% of respondents agreed. We asked if people knew how to complain to us about something, and if people knew about the Care Quality Commission (who regulates our service). Perhaps most surprisingly, of those who answered the question, two in ten did not know how to complain directly to us, and more than four in ten people did not know about the role of the Care Quality Commission.

A full summary of the responses is appended to this report.

Comments from clients, and our responses

At the end of the questionnaire we invited any additional comments and many respondents did. Some were expressions of thanks. One response highlighted a deeper problem and we have approached that client directly.

Our responses to comments should not be seen as excusing particular instances, rather explaining the logic behind some of our decisions. We think carefully about the way that our service is provided. Sometimes we have to make operational decisions about, for example, how to effectively deploy our staff team, and in some cases we have not explained this fully to our clients. We think that we are honest about the information we give to clients and we believe strongly that we should not make promises that we cannot keep.

We checked all the results to see if there was any pattern to people's scoring: we did not find one. We checked to see if clients in the same geographical area, same group of carers or similar client groups gave us similar scores. We think that this means that the issues you highlight are not down to one single factor but a range of issues across the whole service.

We asked clients to score their responses subjectively on a scale of one to five, or one to six. Those clients who scored us below average generally did so consistently for the entire service and not just parts of it. This would suggest that we are not meeting expectations about the service. We invite people to contribute to reviews in their care and involve people in care planning. We think that it is a critical point in the process where we can understand what a client expects and how we are able to meet those expectations. This further highlights the need for us to be clear and honest about the service that we provide.

Complaints, Compliments and Comments

In the last twelve months we have received one formal complaint from a client's family member. As part of our Complaints procedure we investigate and respond to complaints in detail. From the investigation we look to see how we can develop or improve our service.

The complaint had several elements, but focused around poor completion of a care plan. We found that the complaint was partially upheld. As a result of the complaint we are reviewing how we write care plans.

We are pleased that we have very few complaints and think that this is an indicator of a good service. Our regular reviews and constant communication with carers means that we are able to identify issues and work to resolve them before the need for a formal complaint arises.

We received several compliments through the year from clients and family members. We have improved the logging of these compliments through our electronic records.

In the last 12 months we have received no formal feedback from our feedback forms in ever client folder. We would use feedback to help us understand what issues our clients have. We do receive constant feedback from clients and their family members about their care, which is recorded on the client's record. We are however unable to report on this as it is not recorded separately.

Data from our electronic monitoring system

We had hoped to be able to use data from the electronic monitoring system to help us review some key performance indicators.

Through writing this report, we have found several issues in the standard reports what are available to us. Some of this is due to the way that calls are logged and then automatically matched up within the system and some of this is due to the way that we manage frustrated calls (where a client declines part of the care plan) and cancelled calls. We noted that these visits were unfairly skewing the statistics.

We plan to use this data and complete an audit for a sample of clients. We can use the data available to review a particular package where we can then take into account logging issues. We can also use the data to review the continuity of the care that we provide.

We are pleased to note that approximately 85% of our visits are logged by carers calling into the monitoring system. Adult Services have set us a target of 90% and we are working with carers to achieve this.

What we think

We believe that we are providing a good service, and the comments we received generally back this up. Some issues have been highlighted about the service that we provide.

Some clients noted that there is a significant variation in the times that a carer may arrive. We are looking at ways to ensure that as far as possible carers arrive an appointed time. We have already changed the way that we zone our clients to try and reduce travel time between clients. We are also looking at how we plan staffing levels. Weekends cause us some difficulty as we have fewer staff available. We have been working with carers to help formalise their working hours. There are sometimes circumstances beyond our control that may stop this from happening (for example traffic congestion, or a staff member being off sick). We think that we need to do more work in this area. Most people understand the challenges we face in ensuring carers arrive on time. We think that making sure that we talk to clients at the time will go some way to help this issue.

We will be contacting our carers to remind them of our dress standards and that they must wear their name badges and have readily. Given our change in policy, we are reviewing this target.

We will also be working hard to make sure that the information we provide to clients about how to complain and about the Care Quality Commission is clear and easily understood.

We are developing leaflets which will be provided to all clients and made available on our website.

We plan to send out the questionnaire next year as part of our quality assurance process. We will use the same questions and rating systems, but we will refine our target scores for each area. This means that we have to carefully consider how we are going to improve our service. It does not mean that we will become target driven. We think that the questions we ask our clients are indicators of how good our service actually is. If we can improve the scores, then we are improving our service. We will not cut corners in one aspect of the service to improve our scores in target areas.

Every one of our clients is an individual who has their own needs and deserves a care package suited to them. We have never believed that a 'one size fits all' approach will work: either for the service that we provide our clients, or the way we employ our carers. We are proud of our staff team and their achievements. We offer a high degree of flexible working to our staff and in return we find a high degree of loyalty and commitment . which directly benefits our clients through the service they receive. This is indicated, for example, through our staff sickness levels. Some similar organisations report sickness at a rate of 10% or more (ie for every nine carers another is off sick) our sickness level is approximately 5%.

Having a reliable workforce means that we can manage staff more effectively and provide a more reliable and quality focused service. A perceived negative aspect of this is that we ask more than one carer to visit a client. However it also means that the impact of sickness and holiday is lessened as a team of carers knows each client. Having flexible working practices for our staff also means that we are able to employ and retain carers who might otherwise not be able to sustain employment. The management team have a careful balancing act to perform: managing our staff team well so that we can fulfil our commitments to our clients. We think that we get the balance right most of the time.

We have noted that there has been an increase in unplanned absence from last year. We plan to review our policy on managing unplanned absence and work with staff where issues are identified to improve their availability.

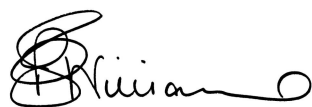
What we will do now

The questionnaire indicates we are doing well, but there is some room for improvement. We have developed an action plan to improve our performance. We will monitor our progress in a year and ask our clients what they think again.

We would welcome any further contributions, from clients, their families and others involved in what we do. Additional comments should be addressed to:

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Crofton Care Partnership
49 Cuckoo Lane
Stubbington
Fareham
Hampshire
PO14 3PE

Attached to this report is a full summary of the comments that we received from respondents and our action plan.



Penny Williams
Managing Partner

Mark Williams
Partner

Our action plan

From the results of the questionnaires, we have developed an Action Plan. Here is a summary of the actions we will be taking:

Action 1

<i>Issue</i>	Carers not always wearing name and identity badges.
<i>Standard</i>	All staff members wear a name badge and have with them an identity badge at all times.
<i>Action</i>	We will remind carers of this requirement and continue to carry out spot checks and as part of our appraisal and supervision sessions.
<i>By who</i>	JR Service Manager.
<i>Review date</i>	Ongoing . review with next client survey.
<i>Outcome</i>	The target score for our next questionnaire will be 1.5.

Action 2

<i>Issue</i>	Carers do not arrive when clients expect them to.
<i>Standard</i>	A carer should arrive within fifteen minutes of the stated visit time.
<i>Action</i>	We will be honest about when we expect to be able to provide care from the outset of the service starting. We recognise that we will not arrive on time every time, but we can reduce the variation in times for clients. We will audit the visit times of random clients to assess when carers are arriving. We will also ensure that clients know how to contact the duty manager when a carer has not arrived at the time they are expected.
<i>By who</i>	Management team.
<i>Review date</i>	April 2015
<i>Outcome</i>	The target score for our next questionnaire will be 1.5.

Action 3

<i>Issue</i>	Clients do not know how to complain to us.
<i>Standard</i>	Clients will be provided with information on our complaints policy
<i>Action</i>	We will review our literature and make sure that our complaints process is clear. We will give carers information about how clients can make a complaint, and how they can support a client in making a complaint. We will ensure that during our review process, the views of our clients are included and valued in the process.
<i>By who</i>	MW Partner
<i>Review date</i>	December 2014
<i>Outcome</i>	The target score for our next questionnaire will be 90%.

Action 4

<i>Issue</i>	Clients do not know about CQC
<i>Standard</i>	Clients should be aware of CQC and be able to access information about it.
<i>Action</i>	We will review our literature and make sure that information about CQC is clear. We will give carers information about CQC and its role to enable them to answer any questions that a client may ask.
<i>By who</i>	MW Partner
<i>Review date</i>	December 2014
<i>Outcome</i>	The target score for our next questionnaire will be 90%.

Action 5

<i>Issue</i>	Develop audit of visits for a sample of clients from EDCM data
<i>Standard</i>	Carers should arrive within 15 minutes of the expected time.
<i>Action</i>	We will review the data available to us and develop an audit tool to examine the promptness of carers. This will then be included in the next QA report.
<i>By who</i>	MW Partner
<i>Review date</i>	December 2014
<i>Outcome</i>	Data is available for the next QA report.

Action 6

<i>Issue</i>	Carers logging visits
<i>Standard</i>	Carers should log calls using the EDCM system
<i>Action</i>	We will work with carers to support good logging of visits by reviewing data and identifying trends and discussing issues through supervision.
<i>By who</i>	MW Partner
<i>Review date</i>	April 2015
<i>Outcome</i>	90% of calls are logged electronically.

The results of the questionnaire

Here are the consolidated results from all the clients who responded to the questionnaire. Please note that all figures are given as a percentage of the total responses:

Where do you live?

15.2% Fareham	8.7% Gosport	8.7% Lee on the Solent
56.5% Hill Head / Stubbington	2.2% Locks Heath	0.0% Warsash
2.2% Bridgemarky	0.0% Portchester	2.2% Park Gate
4.3% Titchfield		

How long have we been visiting you?

6.5% Less than one month	13.0% 1 to 6 months	19.6 6 months to 1 year
6.5% 1 to 2 years	13.0% 2 to 3 years	37.0 More than 3 years
4.3% Did not respond		

How many visits do you have a week?

8.7% 1 visit	17.4% 2 . 4 visits	8.7% 5 visits
26.1% 6 . 10 visits	21.7% 10 . 20 visits	17.4% more than 21
0.0% Did not respond		

Your Views

When our carers visit you, are they

	All of the time	Most of the time	Some-times	Rarely	Never	DNR
Dressed appropriately?	91.30%	6.52%	0.00%	0.00%	0.00%	2.17%
Wearing an ID badge?	78.26%	2.17%	6.52%	0.00%	0.00%	10.87%
Wearing a name badge?	76.09%	6.52%	6.52%	0.00%	0.00%	10.87%
Polite and courteous?	93.48%	6.52%	0.00%	0.00%	0.00%	0.00%

Do you think that our carers treat you

	All of the time	Most of the time	Some-times	Rarely	Never	DNR
With respect?	95.65%	2.17%	0.00%	0.00%	0.00%	2.17%
With dignity?	89.13%	6.52%	0.00%	0.00%	0.00%	4.35%
Professionally?	89.13%	6.52%	0.00%	0.00%	0.00%	4.35%
In a caring manner?	89.13%	8.70%	0.00%	0.00%	0.00%	2.17%

Comments from respondents

Some respondents made further comments. We have abridged or slightly paraphrased some of these comments and one was not appropriate to include here (because of the personal nature of the comment).

We have grouped some of the comments together by theme. We have carefully considered all of the comments that were put forward, and have responded to some of them.

Positive Comments

- Your efforts are appreciated.
- Just thank you!
- Overall I am very satisfied with the service.
- Very happy with the staff and the service.
- Just to say thank you.
- I feel I am very fortunate to have such lovely people caring for me. Thank you.
- The carers are always happy to sit and listen to anything I have to say.
- The carers are always very friendly and make time to talk to me.
- They are all very nice and I get on very well, and I look forward to their visits and friendly chats. I am quite happy with them. Thank you.
- We know of the CQC but not much about it. All your carers are excellent and the management very good.
- All the carers who have called to date are to be complimented in the manner they find and use the requisite equipment. long may they continue to care for me. Well done.
- This is my first experience with carers and I cannot find words to express how grateful I am to Crofton Care. The carers, without exception, have been and are a pleasure to know, always cheerful and attentive and professional. The conversation (chat) during the visit is equally part of the care and looked forward to. Thank you Crofton Care, you have an excellent team.
- All the carers are lovely and I look forward to their visit.
- Very happy with the staff and the service.
- Thank you.
- My grandmother and I are very pleased with the service. [The carer] who visits most mornings is wonderful.

We are very pleased that so many clients get on well with our carers and are happy with the service that they received.

Comments about arrival time

- Making sure the client knows if a carer cannot attend for any reason.
- Morning times are quite often later than first agreed and can be erratic at times.
- When you know the carer will be late I would like to be told.

Our policy is not to cancel any visit without speaking to the client (or an appropriate person first). In addition where we know that a carer is running late we will try and contact the client first. We hope that reassures clients that a carer will visit.

Comments about the team who visit

- It would be nicer if I had the same person on a regular basis, but understand how difficult that would be.

We know that having several different carers can be unsettling for some clients. However, it allows us the flexibility to manage our staff team and maintain a very low turnover of staff. We employ a large number of part time staff who have their own family and personal commitments which affects their availability. We are committed to introducing as few staff as possible to a client. People with larger care packages (having several visits a day) will of course meet more carers.

Other Comments

- I wasn't involved in the set up of my care plan, I was at the end of my six week plan when I came out of hospital and I still needed care.

Even though Adult Services in many cases ask us to provide care, the client should still be involved in setting up the care. This will include writing the care plan, the days and times of visits.

- Making sure the keysafe is always closed and combination numbers moved.

Security for all our clients is a very important aspect of what we do. We regularly remind carers of safety and security arrangements for all our clients.

- We feel that sometimes the office work is a bit chaotic with carers sent when they have been cancelled and no information given when a carer is running late.

We acknowledge that on occasion we have failed to cancel a visit for a client. We have changed the way that we record cancellations and include a checking procedure. We are looking at cancellations made out of hours via our duty manager, where some messages have been lost in the handover. We will reinforce to our duty management team that we should let clients know carers are running more than fifteen minutes late when we know about it. It should be noted however that we are not always aware the carers are running late.

- I don't like it when the carers talk to each other about bad things or unhappy things while they are seeing to me. I think they are talking to me or about me and it keeps me awake at night.

We are addressing this point with the carers that attend this client. We believe that carers should not be discussing personal issues whilst they are supporting a client, particularly where those things may be distressing.

- Name badges have no safety clip and can come undone while moving [the client].

This is the reason that we changed our policy about wearing an ID badge at all times. Name badges have a standard pin and we know that they can get caught from time to time.