

**Quality Consultation with those that use our Services**

**Harlow Branch June 2019**

In June 2019, we circulated a total of 66 Questionnaires, to every person who receives our Services. This includes both people whose care is commissioned by Essex County Council as both Live at Home and Supported Living.

27 responses were received.

52 were sent to individuals receiving the Live at Home Service – 22 were returned.

14 were sent to individuals who reside in Supported Living – 5 were returned.

In total of 41%

Questions were written as required by Essex County Council and additionally to seek other information, we consider relevant, to measuring the quality and reliability of our services.

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| **Q** | **Essex County Council Questions** | **Live at Home** | | **Supported Living** | |
| **Agree** | **Disagree** | **Agree** | **Disagree** |
| **1.** | I understand the outcomes within my Care and Support Plan and I feel my Care Worker helps me to meet these outcomes. | 100% |  | 100% |  |
| **2** | I am treated with dignity and respect by Care Workers. | 100% |  | 100% |  |
| **3** | I feel safe while the Service is being provided. | 95.5% |  | 100% |  |
| **4** | I can easily contact my agency to discuss all aspects of my care | 100% |  | 100% |  |
| **5** | I am listened to and my concerns/requests are responded to by my Care Worker | 91% |  | 100% |  |
| **6** | The people that I want to be involved in my Care and Support are | 100% |  | 100% |  |
| **N.B. Percentages are calculated Per Service – not as an overall.** | | | | | |

For the Questions asked by North London Homecare & Support answers have been collectively calculated across the two services:

70% of responses stated they were very satisfied with the service they receive, the remaining 30% were quite satisfied.

100% liked the staff that support them.

38.5% advised their care staff arrived on time.

58% advised they arrived on time, most of the time.

3.5% informed they never arrived on time.

Additional comments recognised, we allow a 30-minute period before or after the allocated call time, before a call is considered too early or late, to accommodate circumstances that are out of our control e.g. the needs of other Service Users, heavy traffic etc.

Others asked that we improve communications, in keeping people informed about changes to their call times. One comment indicated staff did not always stay the full time of the call.

Only 27% of responses advised they used Telecare equipment.

48% informed we assist them with Personal Care. When doing so, 100% confirmed staff wore personal protective equipment, but 40% informed, staff did not always wear the disposable aprons, provided.

15% advised they had requested we wear foot covers in their home. They all confirmed we did.

81.5% requested our staff do not wear uniform.

100% confirmed they know the staff who visit them.

Only 18.5% advised they would ask new staff to show their ID. The same 18.5% had asked staff for their ID and they confirmed staff had and that they had their ID, on their person.

18.5% felt that staff did not keep things they tell them Private. The questions, did specify that at all times we have to disclose information, if we believe someone is at risk of them.

3.5% confirmed they had heard staff discussing confidential matters, whilst supporting them

92.5% confirmed they knew how to make a complaint. 44.5% had complained of which 83.5% were satisfied with how it was resolved.

100% felt our staff have the skills to support them and 100% of staff appear clean and tidy, when they arrive to support them.

55.5% of responses informed, our staff use their mobile phones during their call, of which 23.5% stated the calls were not work related. One comment received advised staff sometime text or use their mobile phones for personal reasons without excusing themselves, this they consider annoying.

Other comments received included:

“Overall the service provided by NLHS is excellent.”

“I am very pleased how things are, Thank You.”

“Your support is wonderful. Thank You.”

“I have only gratitude and thankfulness for all the staff.”

**Managing Director Comments**

Overall, the findings of this survey, evidence that the people who use our service are mostly very satisfied with their service from North London Homecare & Supports Ltd. Those that weren’t very, were mostly satisfied.

It evidences that people feel involved in planning and delivery of the service and the service helps them to achieve, what they want it to do by people that they like. Our staff treat people with dignity and respect.

The survey does however, identify areas where we need to improve and we will work with the staff over coming months to be responsive in these areas.

We will strive to improve our communications, when a call time is changed, recognising that this can be out of office hours when only one Manager is on duty. They are often concentrating on managing the cause of the lateness and seeking alternative arrangements. That said, we will address this with the Management Team and continue to monitor all late calls and encourage both Staff and Service Users to inform Managers, when the full call time is not required and report this to the commissioning officers.

The use of Telecare equipment is surprisingly low. We are encouraged to consider suitability of equipment to maximise independence and safety. We will discuss this further with the Care Management Team and seek appropriate training opportunities as required.

We need to address with care staff the correct use of personal protective equipment and monitor this, taking formal action if required. This is essential to avoid cross infection.

We will respect the majority decision regarding no staff uniform, comments received stated that “I would rather people were not aware I need support, a uniform would make it obvious.”

Another comment received contradicts the above, stating “Uniform would confirm their identity as without this, care staff could be anyone.” All our staff carry company ID Cards. They will be reminded of the importance of presenting this, to Service Users that don’t know them. We will also encourage Service Users to expect and request this and report it, if it does not happen.

All staff will be reminded, in supervision of the need to maintain Professional Confidentiality and the consequences of breaching this. Likewise, they will be reminded that it is not acceptable to use their phones for personal use, in a Service Users call/ support time. This will be monitored and any further reports investigated.

Whilst we will address what we need to improve, I feel it is important to recognise what the service and staff team does well.

One response commented that “we work as a team”. I am pleased to confirm this is evident, in reading the mostly positive comments received in the survey.

Additionally, we must recognise the fantastic achievement of the team, in achieving the “Outstanding” CQC Grading, when inspected in March 2019.

Congratulations Harlow Branch!



Catherine McBride

Managing Director

**Quality Audit – Action Plan**

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| --- | --- | --- | --- | --- |
| **Action Required** | **How** | **By Whom** | **By When** | **Review** |
| Improved communications to inform of any changes in planned call times | Staff Training and Supervision  Monitoring late calls | Care Management Team  Registered Care Manager  Managing Director | Immediate  On Going | Quarterly Audit |
| Encourage staff and service users if the call time is not sufficient or is excessive and report to commissioning officers. | Staff Supervision  Monitoring visits to Service Users | Care Management Team | Immediate  On Going | Weekly Team Meetings |
| Promote effective use of telecare equipment to maximise service users safety and independence. | Staff Training  Care Assessments and Reviews | Quality Innovation Team  Registered Care Manager  Care Management Team | Nov 2019 | Quarterly Audit |
| To use personal protective equipment fully and correctly to prevent cross infection. | Refresher Training  Supervision  Monitoring Visits | Company Trainer  Care Management Team | Immediate  On Going | Weekly Team Meetings |
| To enforce professional confidentiality and ensure staff do not use their phones for personal use in care/support time | Supervision  Monitoring Visits  Disciplinary Procedures | Care Management Team  HR Team | Immediate  On Going | Weekly Team Meetings |
| Promote the use of Company ID.  Encourage service users to request this.  Staff to offer ID upon arrival to unknown service users  Staff to carry company ID at all times.  Be responsive to reports of bad practise | Staff Supervision  Monitoring visits  During visits/delivery of the service. | Care Management Team  All Staff  Service Users | Immediate  On Going | Weekly Team Meetings |