

We are the regulator: Our job is to check whether hospitals, care homes and care services are meeting essential standards.

Pristine Recruitment

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We inspected the following standards as part of a routine inspection. This is what we found:

Care and welfare of people who use services	✓	Met this standard
Requirements relating to workers	✓	Met this standard
Supporting workers	✓	Met this standard
Assessing and monitoring the quality of service provision	✓	Met this standard
Records	✓	Met this standard

Details about this location

Registered Provider	Pristine Recruitment Ltd
Registered Manager	Mrs. Auxilia Selhaoui
Overview of the service	<p>Pristine Recruitment is a domicilliary care agency that provides personal care and treatment to people in their own homes. There is a registered manager in post. At the time of the inspection, the organisation had a contract with another domicilliary care agency to provide personal care to people receiving reablement services in Barnet. Reablement services are provided to people recovering from operations or acute conditions for up to six weeks, and include personal care.</p>
Type of service	Domiciliary care service
Regulated activities	Personal care Treatment of disease, disorder or injury

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When you read this report, you may find it useful to read the sections towards the back called 'About CQC inspections' and 'How we define our judgements'.

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Summary of this inspection

Why we carried out this inspection

This was a routine inspection to check that essential standards of quality and safety referred to on the front page were being met. We sometimes describe this as a scheduled inspection.

This was an announced inspection.

How we carried out this inspection

We looked at the personal care or treatment records of people who use the service, carried out a visit on 18 July 2013, checked how people were cared for at each stage of their treatment and care and talked with people who use the service. We talked with carers and / or family members and talked with staff.

What people told us and what we found

We asked people who use the service and their relatives what they thought about the support they received from the agency. Everyone responded positively and said they felt supported by the staff and that they were included in decisions about their care as far as possible. One person told us, "the staff are brilliant."

People told us they were very appreciative that the agency provided a consistent care package and made sure the same staff visited and provided support as much as possible. People described the staff as, "reliable, friendly, kind and caring." One person told us, "they have been absolutely fantastic."

People who use the service confirmed that the manager and staff asked them how things were going and if they were satisfied with the care and support they received. One person told us, "the manager is very proactive."

Effective recruitment and selection processes were in place and appropriate checks were undertaken before staff began work. Staff told us they felt supported by the registered manager and confirmed they received regular supervision and that there were good training opportunities for them to improve their knowledge and skills.

You can see our judgements on the front page of this report.

More information about the provider

Please see our website www.cqc.org.uk for more information, including our most recent judgements against the essential standards. You can contact us using the telephone number on the back of the report if you have additional questions.

There is a glossary at the back of this report which has definitions for words and phrases we use in the report.

Our judgements for each standard inspected

Care and welfare of people who use services

✓ Met this standard

People should get safe and appropriate care that meets their needs and supports their rights

Our judgement

The provider was meeting this standard.

People experienced care, treatment and support that met their needs and protected their rights.

Reasons for our judgement

We asked people who use the service and their relatives what they thought about the support they received from the agency. They responded positively and said they felt supported by the staff and that they were included in decisions about their care as far as possible. One person told us, "the staff are brilliant." People told us they were very appreciative that the agency provided a consistent care package and made sure the same staff visited and provided support as much as possible. One person commented, "I have the same carer at the same time."

We saw evidence of pre-assessments, carried out by the registered manager. We saw that people using the service or their representatives had been involved in these initial assessments. One person commented that the manager, "spent time with us."

People using the service had their own individual support plan. These plans gave information to staff about the care and treatment needs of people. People confirmed that they were involved in setting up these support plans. One person commented, "they follow the care plan." Staff we spoke with had a good understanding of the needs of the people they supported.

Support plans contained risk assessments for each person. These assessments acknowledged the risks faced by people using the service and included strategies for minimising those potential risks. For example, we saw that, where people were at risk because of their poor mobility, staff had been given clear guidance to ensure the person was using their mobility aids when moving around. We saw that the registered manager had assessed potential environmental risks to both staff and people using the service during the initial assessment of people's needs.

The manager told us that care provision was regularly monitored through spot checks and regular discussion with the person and their relatives. People told us that there was very good communication between themselves and the registered manager.

Requirements relating to workers

✓ Met this standard

People should be cared for by staff who are properly qualified and able to do their job

Our judgement

The provider was meeting this standard.

Effective recruitment and selection processes were in place and appropriate checks were undertaken before staff began work.

Reasons for our judgement

People we spoke with were very positive about the staff who supported them. People described the staff as, "reliable, friendly, kind and caring." One person told us, "they have been absolutely fantastic."

We checked that recruitment procedures were being followed appropriately so that unsuitable staff were not being employed at the service. We checked the files of the seven staff currently working for the agency. These files contained all the information required by this standard. This information included proof of identity, two written references, medical history statements and criminal record checks. Staff we spoke with confirmed that they had not been allowed to start working with people until all relevant employment checks had been carried out. All staff had written contracts on file.

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

Our judgement

The provider was meeting this standard.

People were cared for by staff who were supported to deliver care and treatment safely and to an appropriate standard.

Reasons for our judgement

People told us that they felt safe with the staff who supported them. One person commented that the staff were, "very knowledgeable." Another person told us that they felt the staff were, "effective."

Staff told us they felt supported by the registered manager and confirmed they received regular supervision. We saw records of staff supervision. Staff told us that the manager was accessible and they could phone her to discuss any issues they might have.

Staff were positive about the training opportunities at the agency and told us about recent training they had undertaken and how this had benefited their work practices. The manager told us that staff had completed their mandatory training during their induction. Staff told us they felt this training was very useful and had given them confidence to perform their duties properly. We saw copies of relevant training certificates on staff files we examined. We saw that further training had been booked in order to update staff learning and development. The manager told us that most of the staff had completed a National Vocational Qualification (NVQ) and those staff who had not, were booked on this course. As the service had only recently been operating the manager said that staff appraisals would be taking place later in the year.

Assessing and monitoring the quality of service provision

✓ Met this standard

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

Our judgement

The provider was meeting this standard.

The provider had an effective system to regularly assess and monitor the quality of service that people receive.

Reasons for our judgement

People who use the service confirmed that the manager and staff asked them how things were going and if they were satisfied with the care and support they received. One person told us, "the manager is very proactive." Everyone we spoke with said the staff and manager were providing a good quality of service. One person commented, "they are good quality carers." People knew how to raise any concerns with the manager or staff and felt any concerns they might have would be dealt with properly. No one we spoke with had any concerns or complaints about the agency.

We saw that the agency had a quality assurance policy and procedure. This policy stated that surveys would be sent out to all people using the service and their representatives every year. The results of these surveys would then be collated and published, with an action plan to monitor any improvements, to all interested parties. We saw that quality assurance surveys had been sent out to people and returned with comments about the current service provision. The manager told us that these were yet to be collated and published due to the agency only recently being in operation. Views from these surveys were positive about the service. We also saw that staff had completed work satisfaction surveys. Staff we spoke with were positive about working for the agency.

Records

✓ Met this standard

People's personal records, including medical records, should be accurate and kept safe and confidential

Our judgement

The provider was meeting this standard.

People were protected from the risks of unsafe or inappropriate care and treatment because accurate and appropriate records were maintained.

Reasons for our judgement

People we spoke with confirmed that they had a care plan in their home which detailed their care needs and preferences. They told us that staff read and followed these plans. We saw that all records in relation to the care and treatment of people using the service were being reviewed and updated when needed.

Staff we spoke with understood the importance of keeping written information safe and only available to the individual concerned or their representative if appropriate. Records we examined that were held at the agency were up to date, kept securely and were accessible when needed. This meant that the service was protecting people's confidentiality.

About CQC inspections

We are the regulator of health and social care in England.

All providers of regulated health and social 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 essential standards are described in the Health and Social Care Act 2008 (Regulated Activities) Regulations 2010 and the Care Quality Commission (Registration) Regulations 2009. We regulate against these standards, which we sometimes describe as "government standards".

We carry out unannounced inspections of all care homes, acute hospitals and domiciliary care services in England at least once a year to judge whether or not the essential standards are being met. We carry out inspections of other services less often. All of our inspections are unannounced unless there is a good reason to let the provider know we are coming.

There are 16 essential standards that relate most directly to the quality and safety of care and these are grouped into five key areas. When we inspect we could check all or part of any of the 16 standards at any time depending on the individual circumstances of the service. Because of this we often check different standards at different times.

When we inspect, we always visit and we do things like observe how people are cared for, and we talk to people who use the service, to their carers and to staff. We also review information we have gathered about the provider, check the service's records and check whether the right systems and processes are in place.

We focus on whether or not the provider is meeting the standards and we are guided by whether people are experiencing the outcomes they should be able to expect when the standards are being met. By outcomes we mean the impact care has on the health, safety and welfare of people who use the service, and the experience they have whilst receiving it.

Our inspectors judge if any action is required by the provider of the service to improve the standard of care being provided. Where providers are non-compliant with the regulations, we take enforcement action against them. If we require a service to take action, or if we take enforcement action, we re-inspect it before its next routine inspection was due. This could mean we re-inspect a service several times in one year. We also might decide to re-inspect a service if new concerns emerge about it before the next routine inspection.

In between inspections we continually monitor information we have about providers. The information comes from the public, the provider, other organisations, and from care workers.

You can tell us about your experience of this provider on our website.

How we define our judgements

The following pages show our findings and regulatory judgement for each essential standard or part of the standard that we inspected. Our judgements are based on the ongoing review and analysis of the information gathered by CQC about this provider and the evidence collected during this inspection.

We reach one of the following judgements for each essential standard inspected.

✓ Met this standard This means that the standard was being met in that the provider was compliant with the regulation. If we find that standards were met, we take no regulatory action but we may make comments that may be useful to the provider and to the public about minor improvements that could be made.

✗ Action needed This means that the standard was not being met in that the provider was non-compliant with the regulation. We may have set a compliance action requiring the provider to produce a report setting out how and by when changes will be made to make sure they comply with the standard. We monitor the implementation of action plans in these reports and, if necessary, take further action. We may have identified a breach of a regulation which is more serious, and we will make sure action is taken. We will report on this when it is complete.

✗ Enforcement action taken If the breach of the regulation was more serious, or there have been several or continual breaches, we have a range of actions we take using the criminal and/or civil procedures in the Health and Social Care Act 2008 and relevant regulations. These enforcement powers include issuing a warning notice; restricting or suspending the services a provider can offer, or the number of people it can care for; issuing fines and formal cautions; in extreme cases, cancelling a provider or managers registration or prosecuting a manager or provider. These enforcement powers are set out in law and mean that we can take swift, targeted action where services are failing people.

How we define our judgements (continued)

Where we find non-compliance with a regulation (or part of a regulation), we state which part of the regulation has been breached. Only where there is non compliance with one or more of Regulations 9-24 of the Regulated Activity Regulations, will our report include a judgement about the level of impact on people who use the service (and others, if appropriate to the regulation). This could be a minor, moderate or major impact.

Minor impact - people who use the service experienced poor care that had an impact on their health, safety or welfare or there was a risk of this happening. The impact was not significant and the matter could be managed or resolved quickly.

Moderate impact - people who use the service experienced poor care that had a significant effect on their health, safety or welfare or there was a risk of this happening. The matter may need to be resolved quickly.

Major impact - people who use the service experienced poor care that had a serious current or long term impact on their health, safety and welfare, or there was a risk of this happening. The matter needs to be resolved quickly

We decide the most appropriate action to take to ensure that the necessary changes are made. We always follow up to check whether action has been taken to meet the standards.

Glossary of terms we use in this report

Essential standard

The essential standards of quality and safety are described in our *Guidance about compliance: Essential standards of quality and safety*. They consist of a significant number of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2010 and the Care Quality Commission (Registration) Regulations 2009. These regulations describe the essential standards of quality and safety that people who use health and adult social care services have a right to expect. A full list of the standards can be found within the *Guidance about compliance*. The 16 essential standards are:

Respecting and involving people who use services - Outcome 1 (Regulation 17)

Consent to care and treatment - Outcome 2 (Regulation 18)

Care and welfare of people who use services - Outcome 4 (Regulation 9)

Meeting Nutritional Needs - Outcome 5 (Regulation 14)

Cooperating with other providers - Outcome 6 (Regulation 24)

Safeguarding people who use services from abuse - Outcome 7 (Regulation 11)

Cleanliness and infection control - Outcome 8 (Regulation 12)

Management of medicines - Outcome 9 (Regulation 13)

Safety and suitability of premises - Outcome 10 (Regulation 15)

Safety, availability and suitability of equipment - Outcome 11 (Regulation 16)

Requirements relating to workers - Outcome 12 (Regulation 21)

Staffing - Outcome 13 (Regulation 22)

Supporting Staff - Outcome 14 (Regulation 23)

Assessing and monitoring the quality of service provision - Outcome 16 (Regulation 10)

Complaints - Outcome 17 (Regulation 19)

Records - Outcome 21 (Regulation 20)

Regulated activity

These are prescribed activities related to care and treatment that require registration with CQC. These are set out in legislation, and reflect the services provided.

Glossary of terms we use in this report (continued)

(Registered) Provider

There are several legal terms relating to the providers of services. These include registered person, service provider and registered manager. The term 'provider' means anyone with a legal responsibility for ensuring that the requirements of the law are carried out. On our website we often refer to providers as a 'service'.

Regulations

We regulate against the Health and Social Care Act 2008 (Regulated Activities) Regulations 2010 and the Care Quality Commission (Registration) Regulations 2009.

Responsive inspection

This is carried out at any time in relation to identified concerns.

Routine inspection

This is planned and could occur at any time. We sometimes describe this as a scheduled inspection.

Themed inspection

This is targeted to look at specific standards, sectors or types of care.

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