



Making Social Care
Better for People

inspection report

DOMICILIARY CARE AGENCY

The Home Care Provider Ltd

**Unit 4a Kirklea Farm
Badgworth
Axbridge
Somerset
BS26 2JU**

Lead Inspector
Kathy McCluskey

Unannounced Inspection
5th September 2007 09:30

The Commission for Social Care Inspection aims to:

- Put the people who use social care first
- Improve services and stamp out bad practice
- Be an expert voice on social care
- Practise what we preach in our own organisation

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This is a report of an inspection to assess whether services are meeting the needs of people who use them. The legal basis for conducting inspections is the Care Standards Act 2000 and the relevant National Minimum Standards for this agency are those for *Domiciliary Care*. They can be found at www.dh.gov.uk or obtained from The Stationery Office (TSO) PO Box 29, St Crispins, Duke Street, Norwich, NR3 1GN. Tel: 0870 600 5522. Online ordering: www.tso.co.uk/bookshop

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SERVICE INFORMATION

Name of service	The Home Care Provider Ltd
Address	Unit 4a Kirklea Farm Badgworth Axbridge Somerset BS26 2JU
Telephone number	01934 733337
Fax number	01934 733557
Email address	office@thcp.fsnet.co.uk
Provider Web address	
Name of registered provider(s)/company (if applicable)	The Homecare Provider Ltd
Name of registered manager (if applicable)	Mrs Nicola Dawn Norville
Type of registration	Domiciliary Care Agencies

SERVICE INFORMATION

Conditions of registration:

Date of last inspection 5th April 2006

Brief Description of the Service:

The Homecare Provider is a limited company which is registered with the Commission for Social care Inspection as a small domiciliary care agency.

The agency is registered to provide personal care to adults in their own homes. The agency is not registered to provide nursing care nor is it registered to provide services to children or other persons under the age of 18yrs.

Since the last inspection the agency have moved offices and the Commission for Social Care Inspection have approved an application for Mrs Nichola Norville to be registered manager.

The agency's office is well equipped and provide adequate parking.

The agency can be contacted 24hrs a day seven days a week.

A statement of Purpose and Service user guide are available and provide detailed information about the services provided and fees charged.

Current fee levels for privately funded service users range between £9 & £12.50 per hour.

Additional charges are incurred for bank holidays and call outs.

A range of fees are available to service users receiving direct payments and funding from social services. Information regarding fees should be obtained from the agency.

SUMMARY

This is an overview of what the inspector found during the inspection.

The focus of this inspection visit was to inspect relevant key standards under the Commission's 'Inspecting for Better Lives 2' framework. This focuses on outcomes for service users and measures the quality of the service under four general headings. These are; - excellent, good, adequate and poor.

The agency's last inspection took place on 5th April 2006.

This key unannounced inspection was conducted over one day (4.5hrs) by CSCI regulation inspector Kathy McCluskey.

As part of this inspection, the registered person supplied the Commission with an Annual Quality Assurance Assessment and the Commission sent comment cards to service users, staff and relatives. Responses were good and comments have been incorporated throughout this report.

No service users or relatives requested to speak to the inspector.

The registered manager Nicky Norville was present throughout this inspection all records requested were made available to the inspector.

Records relating to the care of service users, staff recruitment and training were viewed. All of the key national minimum standards were assessed.

The inspector would like to thank service users, relatives, care staff, the registered manager and administrative team for their time and cooperation with the inspection process.

The following is a summary of the inspection findings and should be read in conjunction with the whole of the report.

What the service does well:

The agency well run and effectively managed.

Service users are satisfied with the service they receive and know how to raise concerns.

The agency provides service users with a reliable service. Care staff are appropriately trained and service users were positive about the staff and the care they received. 'They treat me like a person', 'The staff are kind and reliable'.

Service users and prospective service users are supplied with information which enables them to make informed decisions.

Service users, staff and relatives are kept up to date and well informed.

The agency ensures that service users assessed needs can be met by the staff team. Service users have copies of their care plans.

The agency takes appropriate steps to minimise any risks to service users.

The agency ensures that service users are protected by their staff recruitment procedures.

What has improved since the last inspection?

NA

What they could do better:

Care plans are good and contain detailed information but the agency needs to ensure that service users are involved in this process and that they sign their care records and reviews to confirm their agreement.

Some of the agency's policies and procedures need to be reviewed.

Please contact the provider for advice of actions taken in response to this inspection.

The report of this inspection is available from enquiries@csci.gsi.gov.uk or by contacting your local CSCI office. The summary of this inspection report can be made available in other formats on request.

DETAILS OF INSPECTOR FINDINGS

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Scoring of Outcomes

Statutory Requirements Identified During the Inspection

User Focused Services

The intended outcomes for Standards 1 – 6 are:

1. Current and potential service users and their relatives have access to comprehensive information, so that they can make informed decisions on whether the agency is able to meet their specific care needs.
2. The care needs requirements of service users and their personal or family carers when appropriate, are individually assessed before they are offered a personal domiciliary care service.
3. Service users, their relatives and representatives know that the agency providing their care service has the skills and competence required to meet their care needs.
4. Each service user has a written individual service contract or equivalent for the provision of care, with the agency, except employment agencies solely introducing workers.
5. Service users and their relatives or representatives know that their personal information is handled appropriately and that their personal confidences are respected. In the case of standards 5.2 and 5.3, these do not apply to employment agencies solely introducing workers.
6. Service users receive a flexible, consistent and reliable personal care service. In the case of standards 6.3 and 6.4 these do not apply to employment agencies solely introducing workers.

The Commission considers Standard 2 the key standard to be inspected.

JUDGEMENT – we looked at outcomes for the following standard(s):

1, 2, 3, 4, 5 & 6

Quality in this outcome area is Good

This judgement has been made using available evidence including a visit to this service.

The agency ensures that current and potential service users have access to a range of information which will enable them to make informed decisions.

Prospective service users are appropriately assessed by the agency to ensure that assessed needs and requirements can be fully met.

The agency ensures that all information pertaining to a service user is handled in accordance with the Data Protection Act 1998.

The agency's arrangements for ensuring that service users receive a flexible and reliable service is good.

EVIDENCE:

The agency has produced a Statement of Purpose and service user guide which is made available to service users and prospective service users. These documents contain detailed information about the agency and services offered. The registered manager is in the process of reviewing these documents to ensure that they are fully reflective of the changes in the management structure of the agency.

Fourteen relatives completed comment cards for the Commission and all confirmed that they received enough information about the agency to enable them and their relative to make an informed decision. Fifteen service users completed comment cards and nine confirmed that they were fully involved in the making the decision to use the agency. Many service users stated that arrangements were made by social services on their behalf but that they were aware that they could make choices as to which agency to use.

The agency takes appropriate steps to ensure that it can meet an individual's needs prior to the service being offered. Following an initial referral, a senior member of the care team will arrange to meet with the prospective service user to discuss and ascertain the individual's assessed needs and requirements. Assessments are also obtained from other healthcare professionals where available.

Documented evidence of this was seen in the four service user care plans examined at this inspection.

Seven relatives stated in comment cards for the Commission, that the agency 'always' met the needs of their relative. Six responded 'usually' and one, 'sometimes'. Additional comments indicated that 'the younger staff were not as knowledgeable'.

Comments were discussed with the registered manager at the time of the inspection who confirmed that all staff now follow a more detailed induction programme.

Contracts, detailing the agreed provision of care, were seen in all four care plans examined.

The agency takes appropriate steps to ensure that service users are protected by the agency's policies on confidentiality. Staff have access to these policies and the agency ensures that staff understand and work in accordance with them. The inspector was able to see evidence that matters around maintaining confidentiality were reiterated at a recent staff meeting.

Storage arrangements at the agency's office ensure that all records pertaining to service users are stored in accordance with the Data Protection Act 1998.

The agency has appropriate systems in place to ensure that service users receive a flexible and reliable personal care service. The agency endeavours to ensure that service users are allocated regular carers wherever possible. Pre-inspection information supplied to the Commission by the registered manager, identified that the agency was aware that this was an area they could improve on. Staff annual leave and sickness means that the agency cannot always provide service users with the same carer.

Fifteen service users completed comment cards for the Commission and one comment identified under, 'How do you think the agency can improve' was 'by giving me a regular carer'.

Under the heading, 'What does the agency do well?', comments included; 'reliable and caring', 'Always turn up at the allocated times', 'Reliable and the carers are nice'.

Fourteen relatives completed comment cards and some comments received included; 'The carers are kind and respectful and the provision of the service is reliable', 'Carers will always alter their times to fit in with appointments we may have', 'They supply us with a weekly list of carers'.

During the inspection, the inspector heard administrative staff contacting service users to inform them that their carer would be late due to traffic congestion. Contact between carers and service users appeared efficient, professional and well organised.

Personal Care

The intended outcomes for Standard 7 – 10 are:

- 7.** The care needs, wishes, preferences and personal goals for each individual service user are recorded in their personal service user plan, except for employment agencies solely introducing workers.
- 8.** Service users feel that they are treated with respect and valued as a person, and their right to privacy is upheld.
- 9.** Service users are assisted to make their own decisions and control their own lives and are supported in maintaining their independence.
- 10.** The agency's policy and procedures on medication and health related activities protect service users and assists them to maintain responsibility for their own medication and to remain in their own home, even if they are unable to administer their medication themselves. In the case of standards 10.8 and 10.9, these do not apply to employment agencies solely introducing workers.

The Commission considers Standards 8 and 10 the key standards to be inspected.

JUDGEMENT – we looked at outcomes for the following standard(s):

7, 8 & 10

Quality in this outcome area is Good.

This judgement has been made using available evidence including a visit to this service.

Care plans are detailed and reflect assessed needs. The agency's arrangements for involving service users in this process needs improving.

The agency follows appropriate procedures where service users require assistance with medication.

EVIDENCE:

Four service user care plans were examined in detail at this inspection. The registered manager and staff spoken with confirmed that care plans are also maintained in each individual's home.

Care plans were found to be comprehensive and clearly identified the individuals' assessed needs and preferences. Instructions for staff were recorded in a clear manner. Risk assessments were in place as appropriate. Care plans reflected a person centred approach to care. Clear protocols and signed consent forms were in place for service users who required assistance with medication.

Staff complete running records following their visit to the service user. These records were found to be very detailed and appeared to cover all aspects of the care delivered. Information was reflective of the assessed needs of the individual. Staff also record the time of arrival at the service users home and the duration of the visit.

The inspector was informed that service users were fully involved in agreeing their plan of care but the inspector was not able to see evidence of this in the care plans examined.

It has been required that service users sign their care plans to confirm that they are in agreement. This was also required at the last inspection.

Care plans examined did not evidence that they were reviewed with the service user at least annually. Of the four care plans examined, one contained an up to date review sheet but this had not been signed by the staff member nor had it been signed by the service user. A requirement has been raised.

Fifteen service users completed comment cards for the Commission and all confirmed that they had received a copy of their care plans. Five responded 'Always' to the question; 'Does your care plan match what you want from the service and is your care plan flexible?' Nine responded 'Usually' and one 'Sometimes'.

In response to the question, 'What does the agency do well?', service users commented; 'The staff are kind, gentle and caring', 'They treat me as a person', 'I am never rushed', 'The staff are reliable, friendly and pleasant mannered', 'The assistance I have with personal care is very good'.

Fourteen relatives completed comment cards and stated that; 'really pleased with the care at all times', 'Carers will always alter times when needed to fit in with appointments', 'We are happy with everything', 'The agency always keeps us informed of issues'.

Eight relatives confirmed that the agency 'Always' give the support/care that was agreed/expected. Five responded 'Usually' and one 'Sometimes'.

'Sometimes when carers are late, I have to help relative with breakfast', 'Good care and support given'.

In response to the question, 'Do you feel your privacy and dignity is respected by the home carers?' nine service users stated 'Always' and six 'Usually'. One commented that they were 'treated as a person'.

Protection

The intended outcomes for Standards 11 - 16 are:

- 11.** The health, safety and welfare of service users and care and support staff is promoted and protected, except for employment agencies solely introducing workers.
- 12.** The risk of accidents and harm happening to Service Users and staff in the provision of the personal care, is minimised, except for employment agencies solely introducing workers.
- 13.** The money and property of service users is protected at all times whilst providing the care service, except for employment agencies solely introducing workers.
- 14.** Service users are protected from abuse, neglect and self-harm, except for employment agencies solely introducing workers.
- 15.** Service users are protected and are safe in their home, except for employment agencies solely introducing workers.
- 16.** The health, rights and best interests of service users are safeguarded by maintaining a record of key events and activities undertaken in the home in relation to the provision of personal care, except for employment agencies solely introducing workers.

The Commission considers Standards 11, 12 and 14 the key standards to be inspected at least once.

JUDGEMENT – we looked at outcomes for the following standard(s):

11, 12, 13, 14, 15 & 16

Quality in this outcome area is Good.

This judgement has been made using available evidence including a visit to this service.

The agency has appropriate policies in place to ensure the health and safety of service users.

Service users are protected from the risk of harm or abuse though some of the agency's policies need to be reviewed.

EVIDENCE:

Staff spoken with confirmed that they have received training in health and safety, first aid, manual handling and food hygiene. The agency provides gloves, aprons and alcohol gel for staff use. During the inspection, staff were observed collecting supplies from the agency's office. Staff confirmed that there were always good supplies of equipment.

Staff confirmed that they are aware of the agency's policies relating to health, safety and welfare. This was confirmed by staff spoken with and by all eight staff members who completed comment cards for the Commission.

The care plans viewed contained good risk assessments which provided clear information.

Where there is an assessed need, to ensure the health and safety of service users and staff, two staff are allocated to assist service users with moving and handling needs. This was evidenced in one of the care plans examined.

The agency maintains appropriate records relating to any accident involving staff or service users. Records were found to be detailed and contained any follow up action. Each accident report is seen by the registered manager at the time.

Accident records comply with the Data Protection Act 1998.

The agency has clear policies in place to ensure that service users' finances are protected. These were found to be up to date. All staff are required to read these policies and understanding is monitored through the induction process and supervision sessions.

Staff were clear about action to be taken should they suspect any form of abuse. Policies are available to staff and were seen to be clearly displayed in the office. The agency has a copy of Somersets policy on Safeguarding Adults. The registered manager replaced this document with the updated version (May 2007) at the time of the inspection.

The whistle blowing policy was last reviewed in September 2005. This needs updating to ensure that it is reflective of current legislation. The document should also identify the contact detailed of the Commission and other appropriate external agencies.

The registered manager advised that she is due to attend a training course in safeguarding adults which will enable her to train other staff.

Staff training records confirmed that staff had either received or were due to receive training in abuse.

Staff spoken with at the inspection were very positive about the training they received and were clear about action to be taken should they suspect any form of abuse.

Staff are supplied with a uniform and photo identification card. Clear procedures are in place relating to ensuring the safety/security of a service users home.

As previously mentioned in this report, care plans and records of visits by the agency's staff, are maintained in the service users' home.

Managers and Staff

The intended outcomes for Standards 17 - 21 are:

- 17.** The well-being, health and security of services users is protected by the agency's policies and procedures on recruitment and selection of staff.
- 18.** Service users benefit from clarity of staff roles and responsibilities, except for employment agencies solely introducing workers.
- 19.** Service users know that staff are appropriately trained to meet their personal care needs, except for employment agencies solely introducing workers.
- 20.** The personal care of service users is provided by qualified and competent staff, except for employment agencies solely introducing workers.
- 21.** Service users know and benefit from having staff who are supervised and whose performance is appraised regularly, except for employment agencies solely introducing workers.

The Commission considers Standards 17, 19 and 21 the key standards to be inspected.

JUDGEMENT – we looked at outcomes for the following standard(s):

17, 18, 19, 20 & 21

Quality in this outcome area is Good

This judgement has been made using available evidence including a visit to this service.

The agency's procedures for staff recruitment are robust and reduce the risk of harm or abuse to service users.

Staff are clear about their roles and responsibilities.

The agency ensures that staff receive the training they need to meet the needs of service users.

EVIDENCE:

The agency follows robust procedures for staff recruitment. Four staff recruitment files were examined at this inspection and all contained required information. It was evident that staff did not commence employment until two

satisfactory references and a criminal records(CRB) and protection of vulnerable adults check (POVA) had been received. There was evidence that references had also been verified by the registered manager.

Recruitment files contained signed contracts and a clear job description. All staff sign to confirm that they have received a copy of the General Social care Council code of conduct.

Eight staff completed comment cards for the Commission and all confirmed they felt they were recruited fairly and thoroughly.

New staff are required to undertake a period of induction where they do not work unsupervised. This is for a period of two weeks. The registered manager informed the inspector that newly appointed staff now follow the Skills for Care Common Induction Standards.

Staff comment cards and staff spoken with all confirmed that they had received an appropriate induction programme which gave them the training they needed.

Staff spoken with were very positive about training opportunities available to them.

In addition to mandatory training, records showed training in abuse, medication, risk assessments & the Mental Capacity Act. The agency has a copy of the training bulletin issued by North Somerset Council. This provides staff with a range of training opportunities.

Pre-inspection information supplied to the Commission by the registered manager indicated that 30% of the permanent care team hold an NVQ level 2 in care or above. The registered manager stated that arrangements are currently being made to enrol a further twelve staff.

Since taking up post earlier this year, the registered manager has taken steps to ensure that staff are appropriately supervised. All staff will receive one to one time at least three monthly. The registered manager has arranged dates with staff and this was confirmed by the staff spoken with.

In completed comment cards, all staff stated that they received very good support.

Progress will be followed up at the next inspection.

Some comments received from staff were; 'Regular memorandums to keep us updated', 'Training sessions are interesting and helpful', 'All staff are very supportive and easy to contact'.

Organisation and Running of the Business

The intended outcomes for Standards 22 – 27 are:

- 22.** Service users receive a consistent, well managed and planned service.
- 23.** The continuity of the service provided to service users is safeguarded by the accounting and financial procedures of the agency.
- 24.** The rights and best interests of service users are safeguarded by the agency keeping accurate and up-to-date records.
- 25.** The service user's rights, health, and best interests are safeguarded by robust policies and procedures which are consistently implemented and constantly monitored by the agency.
- 26.** Service users and their relatives or representatives are confident that their complaints will be listened to, taken seriously and acted upon.
- 27.** The service is run in the best interests of its service users.

The Commission considers Standards 22 and 26 the key standards to be inspected at least once.

JUDGEMENT – we looked at outcomes for the following standard(s):

22, 23, 24 & 26

Quality in this outcome area is Good

This judgement has been made using available evidence including a visit to this service.

The agency is well managed and organised.

Records are maintained in accordance with the Data Protection Act 1998.

The agency has ensured that service users know how to make a complaint.

EVIDENCE:

The agency runs from premises which are suitable and appropriately located.

The registered manager Nicky Norville was present throughout the inspection. Nicky was registered by the Commission in June of this year and appears committed to ensuring that service users receive a good service. Staff spoken with were very positive about the support they received.

The registered manager confirmed that she received good support from the responsible individual and director of the company. Staffing numbers and office based staff are appropriate to the numbers and needs of service users. No concerns were raised with the inspector.

The agency displays appropriate and up to date employers liability insurance which is valid until 11/12/07.

Records pertaining to service users are securely stored in accordance with the Data Protection Act 1998.

The agency has a clear complaints procedure which is given to each service user.

Fifteen service users completed comment cards for the Commission and all confirmed that they knew how to make a complaint. This was also confirmed by the fourteen comment cards received from relatives.

The agency has received two complaints since the last inspection and records evidenced that concerns were appropriately responded to within the agreed timescales.

The registered manager is in the process of sending questionnaires to service users as part of its' quality assurance process. It is the agency's intention to seek formal feedback on an annual basis. Progress will be followed up at the next inspection.

SCORING OF OUTCOMES

This page summarises the assessment of the extent to which the National Minimum Standards for Domiciliary Care have been met and uses the following scale.

4 Standard Exceeded (Commendable) **3** Standard Met (No Shortfalls)
2 Standard Almost Met (Minor Shortfalls) **1** Standard Not Met (Major Shortfalls)

"X" in the standard met box denotes standard not assessed on this occasion
"N/A" in the standard met box denotes standard not applicable

User Focused Services	
Standard No	Score
1	3
2	3
3	3
4	3
5	3
6	3

Managers and Staff	
Standard No	Score
17	3
18	3
19	3
20	3
21	3

Personal Care	
Standard No	Score
7	2
8	3
9	X
10	3

Organisation And Running Of The Business	
Standard No	Score
22	3
23	3
24	3
25	X
26	3
27	X

Protection	
Standard No	Score
11	3
12	3
13	3
14	3
15	3
16	3

yes

Are there any outstanding requirements from the last inspection?

STATUTORY REQUIREMENTS

This section sets out the actions, which must be taken so that the registered person/s meets the Care Standards Act 2000, Domiciliary Care Regulations 2002 and the National Minimum Standards. The Registered Provider(s) must comply with the given timescales.

No.	Standard	Regulation	Requirement	Timescale for action
1.	D07	14(3)	The registered person must ensure that service users are fully involved in agreeing and reviewing their plan of care. Service users should sign their care plans and reviews to evidence this. Previous timescale of 10/06/06 not met.	15/10/07

RECOMMENDATIONS

These recommendations relate to National Minimum Standards and are seen as good practice for the Registered Provider/s to consider carrying out.

No.	Refer to Standard	Good Practice Recommendations
1.	D014	The registered person should ensure that the whistle blowing policy is reviewed to contain the contact details of the Commission and other appropriate external agencies.

Commission for Social Care Inspection

Taunton Local Office

Ground Floor

Riverside Chambers

Castle Street

Taunton

TA1 4AL

National Enquiry Line:

Telephone: 0845 015 0120 or 0191 233 3323

Textphone: 0845 015 2255 or 0191 233 3588

Email: enquiries@csci.gsi.gov.uk

Web: www.csci.org.uk

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