



Making Social Care
Better for People

inspection report

DOMICILIARY CARE AGENCY

Dame Alice Court

**Newham Street
Bedford
Bedfordshire
MK40 3NR**

Lead Inspector
Vanessa
Rumball

Announced
06 September 2005

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
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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	Dame Alice Court
Address	Newham Street Bedford Bedfordshire MK40 3NR
Telephone number	01234 210 320
Fax number	
Email address	
Name of registered provider(s)/company (if applicable)	Bedfordshire County Council
Name of registered manager (if applicable)	Lorraine Wisby
Type of registration	Domiciliary Care Agency (DCA)
No. of places registered (if applicable)	N/A
Category(ies) of registration, with number of places	Domiciliary Care

SERVICE INFORMATION

Conditions of registration:

- 1 Large agency.
- 2 The agency shall only provide domiciliary care to adults over 18 years.
- 3 The agency shall not provide domiciliary care to children.
- 4 The agency shall ensure that the staff, individually and collectively, have the skills and experience to deliver the care required. (To be removed)
- 5 The registered person shall produce a Statement of Purpose specific to the agency which meets the standards and regulations must be produced by 1/5/04. (To be removed)
- 6 Satisfactory compliance with the requirements of the Planning Department, Fire Authority and Environmental Health Officers and Health & Safety Executive is obtained by 1/07/04. (To be removed)
- 7 The manager must obtain an NVQ 4 in management by 31/03/08. (To be removed)

Date of last inspection N/A

Brief Description of the Service:

Dame Alice Court is a registered domiciliary care agency, run by Bedfordshire County Council. The agency provides care and support to people living at Dame Alice Court, a property which is owned and managed by Anchor Housing Association.

The service is provided onsite with care workers working allocated shift patterns throughout the day and emergency cover at night.

Service users who are supported by this service include those who are over 55 years, and have a range of support needs including physical disabilities, dementia type illnesses and those needing social and emotional support.

SUMMARY

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

This announced inspection took place over 6 hours on 9th September 2005 and included a visit by the inspector to the service where the inspector met with four service users, two care workers and two team leaders. It also includes survey responses from service users and their representatives, and care workers. The registered manager and responsible individual assisted the inspector during this inspection.

The inspector was grateful for the help of all those who participated in this inspection.

This inspection report should be read in conjunction with the National Minimum Standards for Domiciliary Care Agencies.

What the service does well:

Service users were very complimentary about the service provided by the agency. Because care workers are onsite, service users were able to receive several short calls each day when their care needs required this. One service user said 'The carers are my lifesavers. I don't know what I'd do without them'.

Care records were of a good standard and the agency had written good service user plans so that both service users knew what to expect and care workers knew what to do. One service user said that 'carers only need to read that to know what to do.'

Thorough risk assessments had been completed for all situations where care workers needed to help service users to move. Good instructions were in place to ensure all help was given in a safe way.

Care workers treated service users with respect and were mindful of maintaining their privacy.

Service users were confident that any issues relating to their care would be addressed by the agency.

Care workers were trained and aware of service users conditions and needs.

What has improved since the last inspection?

This was the first inspection of this service.

What they could do better:

The registered persons had identified the need to review the medication procedures to ensure that, where care workers were administering medication to service users, a record of all medication given is recorded.

The agency should increase the amount of information available to service users to include information about the agency's terms and conditions of providing the service and information relating to the agency's policies and procedures.

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.

DETAILS OF INSPECTOR FINDINGS

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User Focused Services (Standards 1-6)

Personal Care (Standards 7-10)

Protection (Standards 11-16)

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Organisation and Running of the business (Standards 22-27)

Scoring of Standards

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 at least once during a 12 month period.

JUDGEMENT – we looked at outcomes for standard(s) 1,2,3,5,6

The agency provided basic information to service users about the service the agency provides.

Good care needs assessments were carried out prior to service users accessing the service which meant that the agency was aware of service users needs as far as possible before the service was offered.

Service users had confidence that staff were maintaining confidentiality and personal information was handled appropriately.

Care and support was provided flexibly in accordance with the needs and where possible wishes of service users.

EVIDENCE:

The service users visited all had a copy of the Statement of Purpose, Service User Guide and complaints procedure. The Statement of Purpose contained all information required by the Regulation. The Service User Guide had limited information regarding fees, key policies and procedures, key terms and conditions and the process for the delivery of care from the initial referral.

Care needs assessments had been obtained from social workers, and the manager or team leader also visits service users, prior to the care package being agreed. Care workers described an instance where as a result of new furniture being purchased, it was not possible to safely assist the service user to transfer. The agency did manage the care appropriately until long-term arrangements were made.

Staff had received appropriate training for the care they were providing. Specialist training had been obtained as the need arose.

Service users stated that care workers did not talk about other service users personal information with them. Care workers were aware of protection of information and records were stored securely.

Service users described how care workers were able to provide several very short calls throughout the day when this was required.

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 at least once during a 12 month period.

JUDGEMENT – we looked at outcomes for standard(s) 7,8,9 & 10

Service users received a good standard of care. They were treated with respect and offered choices about their care whenever possible.

Service user plans were detailed and provided good information about the level of care and support each service user required.

Records relating to medication were of a poor standard and as a result it was not clear what medication had been given to service users.

EVIDENCE:

Service user plans were detailed and provided information to carers and service users showing how the care agreed would be delivered. Service users verified that a team leader had gone through this information with them to ensure they agreed with it. These documents should be signed and dated by the person completing them and where possible by the service user or their representative if appropriate. Additional, very detailed, information was also provided which explained the way each service should be assisted to move when this was required.

Service users described care workers always knocking before they entered flats. Care workers observed with service users offered choice and treated the service users with respect. Service users verified this was always the case.

The inspector attended a team meeting where care workers talked about ways of enabling service users and discussed how to ensure the safety of one service user's property without placing restrictions on her.

Medication was administered from a monitored dosage systems provided by a local pharmacy. Care workers were signing that medication had been given from this system, but there was no record of what medication had been received and administered on each occasion. The registered persons had identified the need to review the practice and procedure in relation to medication administration.

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 during a 12 month period.

JUDGEMENT – we looked at outcomes for standard(s) 11, 12,14,15 & 16

The agency was proactive in assessing risks to service users and staff and identified ways of reducing identified risks to ensure the service was provided safely.

Records in service users homes were of a good standard with the exception of medication records (see standard 10).

EVIDENCE:

Risk assessments had been carried out for the environment and moving and handling of service users. The risk assessments identified clear outcomes and actions to be taken. However, one service user was receiving a service for 5 days before the environment risk assessment was completed. All care workers

did have basic health and safety awareness training but the agency was reviewing systems to ensure that these were done sooner.

The agency had been proactive in ensuring the safety of care workers working at night.

All care workers had been offered pova (protection of vulnerable adults) training. Those who had not yet attended this session were booked to attend later this month.

The records in service users homes were of a good standard. Care records described what care had been offered and provided. These were detailed, signed and dated by care workers. Copies of the service user plans and risk assessments were all on file. As mentioned elsewhere in this report (standard 10), the record keeping in relation to medication administration did not meet the standard and was under review.

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 at least once during a 12 month period.

JUDGEMENT – we looked at outcomes for standard(s) 17, 19, & 21

Good recruitment procedures were followed before care workers were allowed access to service users or their information.

Care workers were trained for the role they carried out and were satisfactorily supervised by the management team.

EVIDENCE:

Three care workers files were inspected. These showed appropriate checks had been carried out and almost all the required information had been obtained. There was one minor shortfall, but this was being addressed at the time of the inspection.

Care workers were inducted inline with the TOPPS (Training Organisation for Personal Social Services) induction standards.

The manager had completed a training plan for statutory training which showed that where there were shortfalls. This had been identified and training

sessions planned. NVQ in care was included in this plan. In addition care workers described other short courses that they had attended. These courses included information on conditions that service users had such as dementia and multiple sclerosis.

Care workers had formal supervision sessions with the manager, and had had appraisals in the last twelve months. Regular team meetings were also held.

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 during a 12 month period.

JUDGEMENT – we looked at outcomes for standard(s) 22, 24, 25,26 & 27

This agency was found to be very well organised and managed. The service users were benefiting from a consistent and reliable service. The standard of record keeping overall was good and showed that service users were protected.

Care workers were aware of the agency's policies and procedures. The complaints procedure was satisfactory and complaints made were taken seriously.

The agency was proactive in getting feedback about the service provided.

EVIDENCE:

The management structure was appropriate for this type of agency. The manager and team leaders were able to access information easily and showed that they were proactively managing the service. There was evidence that they were seeking the views of service users about the care provided, and the views of care workers on how the service to individual service users could be improved through supervision and team meetings.

On the whole, records were signed, accurate, and up to date. As mentioned elsewhere in this report the one shortfall was in relation to medication (standard 10) and the registered persons had already identified this and the processes were under review.

The agency had had one complaint in the last twelve months. A log had been made of this at the agency office. However, the full investigation record was stored at County Hall and not viewed during this inspection. Service users were confident that any issues they raised were taken seriously and addressed by the agency.

The registered persons sought feedback from service users through one-to-one interviews, seeking information about how the service was provided and if any improvement could be made. Bedfordshire County Council also carried out customer satisfaction surveys. At the time of the inspection these systems were being reviewed and ways of obtaining further information and producing an annual report was being explored.

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 Number	Score
1	2
2	3
3	3
4	x
5	3
6	3

Managers and Staff	
Standard Number	Score
17	3
18	x
19	3
20	x
21	3

Personal Care	
Standard Number	Score
7	3
8	3
9	3
10	1

Organisation and running of the business	
Standard Number	Score
22	3
23	x
24	3
25	3
26	3
27	2

Protection	
Standard Number	Score
11	3
12	3
13	x
14	3
15	3
16	3

NA

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 2003 and the National Minimum Standards. The Registered Provider(s) must comply with the given timescales.

No.	Standard	Regulation	Requirement	Timescale for action
1.	10	14	The registered persons must review the medication policy and associated procedures, practice and documentation to ensure that both staff and service users are safeguarded.	01/01/06

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.	1	The registered persons should review the service user guide to ensure information about the agency's policies and procedures, key terms and conditions and fees are included.

Commission for Social Care Inspection

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