



*Making Social Care
Better for People*

inspection report

DOMICILIARY CARE AGENCY

Helping Hands Home Care

Arrow House

8-9 Church Street

Alcester

Warwickshire

B49 5AJ

Lead Inspector

Deirdre Nash

Unannounced Inspection

25th June 2007

10:00

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	Helping Hands Home Care
Address	Arrow House 8-9 Church Street Alcester Warwickshire B49 5AJ
Telephone number	01789 762121
Fax number	01789 762143
Email address	enquiries@helpinghandshomecare.co.uk
Provider Web address	
Name of registered provider(s)/company (if applicable)	Midshires Care Ltd
Name of registered manager (if applicable)	Mrs Ilze Careless
Type of registration	Domiciliary Care Agencies

SERVICE INFORMATION

Conditions of registration:

Date of last inspection 24th August 2005

Brief Description of the Service:

Established in 1989, Helping Hands Home Care specialises in the provision of round the clock live in care for service users who want support within their own homes. Service users may include those that are elderly and frail, physically disabled, mentally infirmed, and service users with learning disabilities or mental health problems. Services can be provided on a long-term basis or are available as a temporary measure such as short term care for convalescence. The agency also provides care on a 24 hourly live in basis. The Live-In service extends across England, with care managed from the Head Office in Alcester. Fees are currently from £10:30 to £ 12:80 hourly for visiting carers and £86:00 to £87 per 24 hours for live in carers.

SUMMARY

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

We looked at all of the information that we have received about the agency over the past two years and sent out some comment cards to service users, relatives and questionnaires to staff. Only eight of these in total were returned to us and the views expressed in them are reflected in this report. A questionnaire to bring us up to date with facts and figures about the agency and improvements made to the service was completed by the manager.

We called at the registered office without notice and then gave a date to return and complete the inspection. We looked at records kept about service users, staff files and policy documents. We spoke to the Registered Manager, the Responsible Individual, a Care Manager and the Human Resources Manager of the service. Three service users agreed to receive a visit from our Inspector to talk about the service that they receive and we also spoke to four staff that regularly look after those people. In this way the care of four service users was 'tracked' to find out if the agency is providing care in the way that people need.

What the service does well:

The manager of the agency is registered with us and the service is well managed and run in the interests of its service users. Records and files are properly kept. Staff and managers get to know the service users. The service is reliable and service users say that a regular team looks them after. The agency can offer 24 hour live in carers.

Each service user has his or her needs assessed before the agency offers them a service so that it can find out exactly what help they need. This information is updated regularly.

A written care plan is produced for each person for staff to follow. Risks involved in daily living are assessed and managed so that individuals can continue to live in their own home as independently as possible. Staff receive training and are properly supervised. The agency regularly asks service users about the quality of the service that they are getting.

One relative said, 'My mother works with the carer to keep my father as comfortable and as happy as possible'. Another said, 'The usual carer is very kind and considerate and does her job well.'

What has improved since the last inspection?

The format that the agency uses and provides to service users that describes their care and guides staff has been improved. Significant changes have been made in the way that the agency organises its calls and covers for staff leave of absence and this has improved reliability.

What they could do better:

Service users with learning disabilities may benefit from having their care plans put in a form that makes more sense to them for example photographs or DVD recording.

Where it is the explicit aim of an agreed care plan to develop the service users independence and self-management, examples of how this is being achieved should be shown in daily records made by care staff. Care plans could then be reviewed using these records to see how well they are working.

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

CONTENTS

User Focused Services (Standards 1-6)

Personal Care (Standards 7-10)

Protection (Standards 11-16)

Managers and Staff (Standards 17-21)

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

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 provides good information about its service, does not take on service users without an assessment of their needs and offers a responsive service with skilled and competent staff. Service users receive an appropriate level of care to stay in their own homes.

EVIDENCE:

We saw a service user guide and statement of purpose that has been updated this year. These documents are available in other formats on request. We looked at the care files of a sample of four service users. Each

has an assessment of their needs undertaken by the agency. We looked at the training file for a care worker living with or in most regular contact with each individual. There are certificates of training in each that meet the assessed needs of the individual that they care for. One file contains a social services enquiry letter requesting a male carer and the agency has provided a male carer for the individual.

Only one service user in the sample has a contract on file although the relative of another, who is privately funded, says that she had seen, read and signed a contract with the agency. The manager says that all service users offered a service since 2006 have a new format contract on file.

All service users and relatives that we spoke to said that the agency and its staff respect their private information and staff that we interviewed understand the boundaries of information sharing.

Service users and relatives that we spoke to and those that returned a comment card say that the agency and its staff are flexible and responsive and we heard some examples of this.

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, 9, 10

Quality in this outcome area is **good**

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

The agency produces written plans of care for each individual that promotes and supports independence. Service users can continue to live in their own homes with the help that they need.

EVIDENCE:

We saw a service user plan in the file of each service user and also saw them in the homes of the three that we visited. They are basic tasks lists but the format for capturing the assessment, the plan and the risk assessments and reviews is good and easy to use as a working document. The service user or their main decision maker had signed them. Each plan also shows regular review at least annually. Aims of plans address independence and autonomy

and service user confirm that carers help them to be independent. Staff that we spoke to were able to offer examples of good practice around this although it is not reflected in the daily records that they make which tend to be mainly task based.

One service user in our sample is learning disabled and unlikely to be able to read his care plan. The plan could be made in a form that means something to him such as photographs.

All service users that we spoke to confirm that staff handle them with dignity and respect when they carry out personal care. We upheld one complaint made against the agency in September 2006 that a live in carer had treated one service user in an undignified way. Staff that we spoke to during this inspection talked about their service users as 'whole people' and know them well.

The agency has developed a system of regular workers for service users that receive visits. This is part of the outcome from complaints made last summer about 'call cramming' that we investigated and upheld. This has helped to improve the reliability of the service.

We saw medication risk assessments in the files of all four service users and the staff files that we looked at contain evidence of training in safe administration of medication. All four workers that we interviewed understand the agency policy on medication and were able to give examples of good and not good practice when we asked. The agency has a nurse assessor that sees new service users and signs off the medication risk assessments.

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, 14, 15, 16

Quality in this outcome area is **excellent**

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

The agency has procedures in place to safeguard service users and staff and record keeping is good. Service users are protected and supported to remain safely in their homes

EVIDENCE:

We saw written risk assessments for manual handling, medication, environment, security, finance and communication in the files of service

users and saw copies of these in the three homes that we visited. The agency has a number of trained risk assessors.

Service users confirm that staff use protective clothing and equipment when carrying out personal care and that they are moved and handled safely.

One staff member that we interviewed is new to the agency and she spoke about how her skills and knowledge were brought up to date during induction training particularly around moving and handling practice.

All four staff that we spoke to understand policy and procedures around protection from abuse and are clear about their role even in the complex and sensitive scenarios that we put to them. This is covered in induction training.

The agency has a bound logbook for daily notes for each service user and we saw these in their homes and retrieved from archive at the office when we asked. All records made by staff are respectfully written and complete. One book that we saw does not carry the year of the record. These important statutory records should be clearly identifiable other wise they have no value as historical documents of how the agency looked after individuals in their care.

The needs assessment process is based upon a 'vulnerability' score and we saw this in all care files that we looked at.

The agency has made a number of appropriate referrals to social services through the vulnerable adult protection procedure since the last inspection. It has dismissed and referred to the List of people unsuitable to work with vulnerable people individual workers found to be untrustworthy, as it should to protect people in the future.

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, 19, 20, 21

Quality in this outcome area is **excellent**

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

Staff are properly recruited, trained and supervised. A professional team looks after Service users.

EVIDENCE:

We looked at the personnel files of the four workers in our sample and each has all of the documents required to safeguard service users including three references.

The Pre Inspection Questionnaire shows that the agency is making good progress towards NVQ for 50% of its care workers. Two staff in our sample have Level 2 Award certificates on file.

The agency has its own accredited training centre with work-based assessors and plans to train an internal verifier. Much training is done through distance learning and mentoring packs. The manuscripts are on workers files together with test results and assessors comments. All staff we spoke to say they find this is a very useful training method.

Records show 1:1 staff supervision including observations takes place on average 3 times a year and also an annual appraisal. Care managers meet their staff locally in groups every two weeks. Live in workers say that managers are also in regular touch by 'phone and by email.

All staff say they feel supported and professionally developed. We saw training pack results in files for specialist areas of care including Parkinson's disease, stroke, diabetes and dementia care and the Learning Disability Award Framework.

Work allocations were reorganised as a result of complaints upheld on call cramming last year. Staff that we spoke to who do regular daily calls say that they do not feel rushed or over committed. Coordinators now deal with day to day additions and amendments due to staff leave or sickness and care managers deal with workers on regular 'case loads'. Managers say this has solved the problem of over commitment and made the service and business better.

The manager is registered with us and well supported by the owners who work in the business also. Staff spoken to say the on call system is reliable.

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, 24, 25, 26, 27

Quality in this outcome area is **excellent**

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

Records are well kept, complaints addressed and quality is checked. Service users benefit from a service that is run in their best interests.

EVIDENCE:

The premises are of good quality and situated in the main street in Alcester town with some parking at the rear. The facilities for staff are good and the reception area is now accessible and situated away from the main business office and telephones. The agency has its own training centre and suite. There is boarding accommodation for live in workers if they need to use it for their breaks and live in workers stay there during their induction training with the agency.

The agency has its own compliance manager and accountants. It has demonstrated learning from the complaints made last summer by reorganising its system of staff control and allocation.

Four other complaints and concerns that have come to us have been sent to the agency to investigate and they have kept us informed of the outcomes. One of these, referred to already about undignified treatment of a service user by live in staff, was not upheld by the agency but when we reviewed the documents and records that they sent to us we found that it should be upheld.

There are a number of tiers of management including care managers and coordinators. Service users that we spoke to and who returned comment cards demonstrated that they know who is responsible for organising their care.

In comment cards service users and relatives told us, 'I did complain and it was dealt with properly'; 'The agency is good at communication'; 'sometimes there are problems with communication between office and staff'.

We paid particular attention to the live in service during this inspection as it has expanded and some service users live outside of the Midlands. There have been three complaints in the last twelve months including those already referred to that have come to our attention. Two are upheld and the third is still under investigation by the agency.

The two service users and relatives that we spoke to during this inspection and three from other parts of the country that returned comment cards to us speak very highly of it. They say that it meets their needs in a way that no other configuration of service could.

Both live in workers that we interviewed are clear about the boundaries of their role and position in the households and express themselves very professionally. They are both foreign nationals with good command of English and a good standard of education.

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	2
5	3
6	3

Managers and Staff	
Standard No	Score
17	4
18	X
19	4
20	3
21	3

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

Organisation And Running Of The Business	
Standard No	Score
22	4
23	X
24	3
25	3
26	3
27	3

Protection	
Standard No	Score
11	4
12	4
13	X
14	3
15	3
16	3

No

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

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.	D07	Produce a picture, audio or video/DVD version of care plans for learning disabled service users who would benefit from it so that they can understand and agree their own care plan.
2.	D09	Where improving/increasing independence is an aim of a service user plan staff should comment on this in their daily notes so that these notes can be used to review the plan and see if it is working well.
3.	D016	Properly date log books and other service user records so they are useful historical documents of how the agency has looked after the individuals in it s care.

Commission for Social Care Inspection

Birmingham Office

1st Floor

Ladywood House

45-46 Stephenson Street

Birmingham

B2 4UZ

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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