



Making Social Care
Better for People

inspection report

DOMICILIARY CARE AGENCY

Preferred Care Ltd

**Unit 9c Darwin Court
Hawking Place
Blackpool
Bispham
Lancashire
FY2 0JN**

Lead Inspector
Pauline Caulfield

Key Unannounced Inspection
7th July 2008 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	Preferred Care Ltd
Address	Unit 9c Darwin Court Hawking Place Blackpool Bispham Lancashire FY2 0JN
Telephone number	01253 357727
Fax number	05601527824
Email address	
Provider Web address	
Name of registered provider(s)/company (if applicable)	Preferred Care Ltd
Name of registered manager (if applicable)	Mr Malcolm Alan Douglas
Type of registration	Domiciliary Care Agencies

SERVICE INFORMATION

Conditions of registration:

Date of last inspection Not applicable as this is the first key inspection since this service was registered

Brief Description of the Service:

Preferred Care is a domiciliary care agency, which provides personal care to service users in their own homes, who require support in order to remain independent.

The agency is situated on the Blackpool Technology park in Bispham, Blackpool. The premises can be accessed easily by car, and is on a bus route. The office is currently on the first floor although there are plans to move to the ground floor. It is not accessible to anyone with mobility problems but the directors will meet anyone with problems accessing the premises wherever they wish.

A copy of the Statement of Purpose and the Service User Guide is given to prospective service users. Copies are available for anyone wishing to see these documents.

The written information explains in detail the service that the agency offers, information about the management team, staff and what the service users can expect if they decide to choose Preferred Care domiciliary care agency.

Information received on the visit confirmed that the fees are from £6.50 - £7.50 per half hour. Hourly rates range from £10.50 to £12.50. The emergency call out charge is £15.

SUMMARY

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

The quality rating for this service is **2 star**. This means that the people who use this service experience **good** quality outcomes.

This was an unannounced visit that took five hours as part of the key inspection process. A site visit was undertaken at the agency's premises looking at the agency's policies and procedures, staff and care records, as well as discussions with some service users, relatives and staff.

Every year the registered person is asked to provide us with written information and to make an assessment about the quality of the service they provide. This information, in part, has been used to focus our inspection activity and is included in this report.

This is the first key inspection of the agency. It is a small agency at present gradually developing and increasing the number of people it assists. The inspection involved case tracking one service user as a means of assessing some of the National Minimum Standards. This process allows the inspectors to focus on a person or a small group of people receiving support from the agency. All records relating to these people are inspected. They are invited to discuss their experience of the home with the inspector.

During the key inspection, one service user and the two directors who are also the registered manager and lead carer were spoken to.

From the comments received and the written documentation seen, the information has been put together to form this report.

What the service does well:

Service users have a plan of care that is followed by staff. Information is regularly updated to make sure it still meets service users needs and preferences. A service user said that she was meeting with the agency and others soon to talk about how everything was going but was very clear that "the agency does whatever I request and fits in with me. They are great".

The agency is providing a flexible, consistent and reliable personal care service, which is meeting the needs of service users. A service user said that she felt that she remained very much in charge of what happened and that the agency works around her to provide care when she needs it. She also said that she could change the help that she receives at any time by talking to the registered manager.

People who use the service said the carer always arrives on time, never misses a visit and stays for the correct amount of time and added that she was pleased that she always had the same carer. She then said of the carer, "She is wonderful, so caring and willing to do anything to help. "She added "She always stays here the full time, even when I say she can go early she tells me, ""No we will always stay our full amount of time. There is always something we can do to assist and make things easier for you".

Staff at the agency have been well trained and have regular access to training courses to ensure their knowledge and skills are updated.

The registered manager and lead carer were spoken to. They showed a good understanding of the needs of service users and felt they were providing a service in a caring and sensitive way. A service user said, "The carers are always respectful and cheerful. They are wonderful. The agency have made it possible for me to come home".

The agency has a robust recruitment procedure and good training in place for when staff are appointed. This reduces the risk of unsuitable people working for the agency and protects service users.

The agency has a detailed complaints procedure and service users are regularly asked if the service is meeting their support needs and preferences.

What has improved since the last inspection?

This is the first key inspection of the agency.

What they could do better:

The information about religious and cultural needs was in the care plan in the service users home but not in the office copy. The manager should make sure that it is in both copies so everyone has appropriate information.

Staff should continue working towards achieving national recognised management and care qualifications.

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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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, 4 & 6

Quality in this outcome area is **good**. This judgement has been made using available evidence including a visit to this service

The assessment procedures of the agency are clear and carers have a good understanding of the service users care needs to ensure the care needs of service users are met

EVIDENCE:

The agency issues a contract showing the terms and Conditions of the provision to all service users. All contracts are produced in duplicate and signed by the service user and the agency. There is also a detailed statement of purpose and service users guide. Mr Douglas –the registered manager and one of the Directors of the agency said service users keep a copy and there is

a copy kept in the service users file in the office.

The agency is a new service; currently only supporting one service user but has other prospective service users interested in the agency's help. The service user care assessment was examined.

Mr Douglas, the registered manager and one of the directors of the agency, has compiled a comprehensive care needs assessment format and has carried this assessment out with the service user. Information is provided in a clear easy to understand format. The service user had signed the assessment confirming that she had been involved in the assessment process.

The assessment process covers a wide section of personal care, spiritual, social and domestic needs. It includes the frequency and times services are wanted, preferred gender of carer and the maximum number of different carers that the service user will accept. This is so that service users become familiar with and feel comfortable with their carers. The Care Needs Assessment ensures that carers have all the necessary factual information on the needs of each service user. There is a very small staff team at present who know the service user well but the good care planning will ensure consistency when the service expands and more staff are appointed to the agency.

Service users' are directly involved in all assessments to ensure that their assessed needs are met, with the consent of the service user the agency will also engage with all those who may already or may potentially be involved with the delivery of care and support to that individual, this may include a family member, representative or advocate and other Health and Social Professionals. Mr Douglas said the agency ensures that service users are aware of their rights to be accompanied or represented at every assessment and review conducted by the agency.

A wide range of risk assessments accompany each care needs assessment to ensure that in meeting identified care needs the service user, employees, family or visitors to the service users home are not put at risk.

We spoke to the service user who was very happy with the care provided and felt that the service was very reliable and flexible. Computer log records which show the time a carer arrives and leaves a client' home were seen which showed staff always stayed the correct amount of time.

The service user told us that she always had the same carer. She said, " She is wonderful, so caring and willing to do anything to help. "She added "She always stay here the full time, even when I say she can go early she says, "No we will always stay our full amount of time. There is always something we can do to assist and make things easier for you".

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.

The agency meets the needs and preferences of service users sensitively and respectfully and detailed care plans are in place ensuring carers are aware of service users needs.

EVIDENCE:

We spoke to the service user about the agency. She said she is so grateful for such a wonderful service. The service users care plan was examined. The agency has two copies of all information one kept at the service users home and the other kept in the office.

The care records were of a very good standard. The plans contained detailed information to make carers aware of the service user's care needs and personal preferences. Information includes personal details, property access, personal preferences; health, allergy and medical alerts and specific care

needs, times and length of support a comprehensive description of the tasks to be undertaken and the outcomes to be achieved. However the office care plan was missing the instructions to carers in relation to the individual client's cultural and religious needs. This should be in place. The manager was clear that the copy in the service user's home had this information in it and provided detailed information on this. This information reflected the information the service user had given me earlier in the day. The Care Needs Assessment is reviewed and updated routinely on a frequent basis and also as needs change.

The service user was clear that she felt that she remained very much in charge of what happened and how the agency works around her to provide care when she needs it. She also said that she could change this at any time by talking to the registered manager. She said that she was meeting with him and others soon to talk about how everything was going but was very clear that "the agency does whatever I request and fits in with me. They are great".

The service user said how pleased she was to be back in her own house after a stay in hospital and in a care home. She said the staff in the hospital and care home were kind – but it was not home and she enjoys her own company in her own home. She said, "The carers are always respectful and cheerful. They are wonderful. The agency have made it possible for me to come home".

Mr Douglas explained how important he felt it to be to work alongside service users and their relatives to promote and enable independence rather than create dependency. He said they look at where the service user can take control of their lives and where practical and appropriate this may involve direct support with transport or escorting the service user to wherever they needed to go.

There is a comprehensive medication procedure. The service user administers her own medication but staff will be involved in assisting some service users to administer their medication. All service users medication administration record will be provided by the Pharmacy issuing the medication, even if the agency does not routinely provide medication support or assistance. This is so that the agency is able to assist if needed.

In an emergency the agency would provide individual printed medication administration records for employees to complete. Mr Douglas said that under no circumstances is medication administered or assistance given in the absence of a medication administration record.

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):

Standards 11, 12 & 14

Quality in this outcome area is **good**. This judgement has been made using available evidence including a visit to this service.

The agency safeguards and protects the welfare and rights of the service users and staff.

EVIDENCE:

The agency has clear policies and procedures in relation to health and safety, which comply with the relevant legislation. The service user's file was checked and confirmed that appropriate risk assessments had been carried out including moving and handling and falls. Assessments are also carried out on the service users environment to ensure the service users and staff working

there are safe. Records of all Risk Assessments and Risk Assessment Report Forms are printed in duplicate and copies of the risk assessments are kept in the service users home and the office. Risk assessment for members of staff are carried out as required. These measures increase the safety of service users and staff visiting the home.

The agency has a safeguarding adults policy in place to assist in any allegation or suspicion of abuse. All staff will receive training during induction and as part of their NVQ training. The agency will use a DVD as a safeguarding adults refresher. All employees will receive Health and Safety, Risk Assessment and Control of Infection training during the course of their Induction period, and during their continued employment. During induction, all employees will be made aware of the importance of being observant for signs of neglect or abuse, be it physical, financial or mental in character. Employees will be made aware of the importance of report incidents directly and ensured that Whistle Blowing is an acceptable part of their duty of care

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 & 21

Quality in this outcome area is **good**. This judgement has been made using available evidence including a visit to this service.

Recruitment procedures are robust and staff are well trained and supervised, which safeguards the welfare of people who use the service.

EVIDENCE:

Mr Douglas is working towards the Registered Manager's Award. The other director and lead carer is working towards National Vocational Qualification level 3. The agency currently has no employees other than the Directors. CRB and training records were in place for the directors. The agency maintains a strict system for the Recruitment and Selection of employees. Applicants are informed that they must complete the application form fully to be considered for a job with the agency. Police checks, PoVA checks are carried out and references sought. All potential employees undergo a face-to-face interview and selection process and driver & vehicle documents are checked.

The directors of the agency said, "Recruitment and selection is important. We need to make sure we have excellent staff who can and will provide a good service". One of the directors said she is getting great satisfaction at providing good quality care to service users. She said, "It is very rewarding when you see service users happy."

Mr Douglas said that the agency will provide Skills for Care Common Induction Standards via Skills for Care authorised DVD training for all new staff. This will take place over the first 12 weeks of employment. As the directors have not yet employed anyone, there were no completed induction training records in place but induction and training records and DVD's with tests marked and validated externally are in place waiting to be used when staff commence employment with the agency.

All these training materials will be delivered in house in organised sessions in a clear and easily understandable format, all the training materials will be made freely available to all employees on request and employees will be prompted and encouraged to continue to refresh their knowledge throughout their employment. All employees of Preferred Care Ltd will be registered for and begin their NVQ training on completion of a satisfactory Induction period.

Mr Douglas added that all employees will undergo a structured regular supervision that includes face-to-face supervision meetings with the registered manager four times a year at the end of each quarter unless a session is triggered by an event or concern being raised. They will also receive an appraisal on completion of their 12-week induction period and annually thereafter. They will receive a copy of their appraisal and written feedback

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 & 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 organised and the views of service users, relatives and staff are sought and acted upon resulting in a consistent and reliable service for people using it.

EVIDENCE:

The office is on the edge of an industrial estate in a large building centrally situated for Bispham, Cleveleys and Poulton. The premises are situated on the first floor of the purpose built office building. There is no lift to the office so anyone with physical disabilities may not be able to access the office. However the Statement of Purpose makes it clear that the manager is willing to visit anyone in a location of their choice, if they are unable to access the office. Mr Douglas hopes to move to a ground floor office in the future,

The office environment is light and airy with good quality furnishings. At present it is one large room but there are plans to divide this into two rooms to create one larger general office and a smaller private office.

The premises are secure and provide suitable storage for keeping confidential information. The space is large enough to provide space for interviews and training sessions.

The office is equipped with a sufficient equipment to run the business including a dedicated computer for the purpose of Electronic Call Monitoring. The company also has equipment for the running of the business away from the office if necessary. There is an on call system in operation at all times.

The agency has a detailed complaints procedure, which is provided to all prospective service users in the agency's Service User Guide. The service user contacted said she had a Service User Guide and was aware of how to make a complaint. She felt these would be listened to and acted upon. Although the agency has not yet had any complaints the agency has appropriate documentation and procedures and Mr Douglas said any complaints would be investigated thoroughly and appropriate action taken to ensure the complaint was resolved to the satisfaction of the complainant. Mr Douglas said that if a complaint were made against him as a director and manager that he would contact CSCI to advise them of this.

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	X
4	3
5	X
6	3

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

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

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

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

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	DO7	The agency should have a record of service users religious and cultural needs in the care record in the office and service users home so that all involved are aware of all relevant information.
2	DO20	Staff should continue working towards achieving national recognised management and care qualifications.

Commission for Social Care Inspection

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