inspection report

DOMICILIARY CARE AGENCY

Laurels Home Care

Low Flanders
Dalston
Carlisle
Cumbria
CA5 7AF

Lead Inspector
Nancy Saich

Unannounced Inspection
11th September 2008  2:30pm
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

Reader Information

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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](http://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](http://www.tso.co.uk/bookshop)

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SERVICE INFORMATION

Name of service: Laurels Home Care

Address: Low Flanders
Dalston
Carlisle
Cumbria
CA5 7AF

Telephone number: 01228 527972
Fax number: 01228 592161
Email address:
Provider Web address:

Name of registered provider(s)/company (if applicable):
Kathleen Burns
Mr Wilson Nicholas Briggs

Name of registered manager (if applicable):
Mr Wilson Nicholas Briggs

Type of registration: Domiciliary Care Agencies
SERVICE INFORMATION

Conditions of registration:

Date of last inspection

Brief Description of the Service:

The Laurels Domiciliary Care Agency was registered in April 2008 to provide care for older people in the Carlisle district. This is a family run business and the providers also operate a residential care home for older adults. The agency has suitable information available for people who want to buy services. This can be obtained from the above address. The charges range from £13.50 to £15.60 per hour depending on whether the service is in an urban or a rural area.
SUMMARY
This is an overview of what the inspector found during the inspection.

The Quality Rating for this service is two star. This means that people who use the service experience good quality outcomes.

This was the first 'key' inspection for this service that was registered in April 2008. The lead inspector Nancy Saich asked the manager to fill out a form called the Annual Quality Assurance Audit (the AQAA). This asks for details of what has happened in the service since registration and for the plans for the coming year. This was completed promptly with plenty of detail.

We then sent out postal surveys to people who use the service and to the staff group. We had a good response to these surveys and we quote from them in the report. The responses were very positive and gave us a good picture of the business.

We visited the office, met with the responsible individual and the manager and looked at files and documents that backed up what was said and what was seen.

What the service does well:

This is a new service and they have started in a small way with a handful of service users and a small team of staff. The manager has been working on developing good systems and he now feels the business is ready to expand. So far the people who use this service are very satisfied with the care given:

- "They are prompt, friendly and helpful."
- "The home carers are aware of her interests and hobbies and use this knowledge to engage and encourage her."
- "The staff seem to have genuine caring concern for my relative. They take time with her and are gentle and encouraging."
- "Their care work is very good as you would expect from their previous experience with the care home."

We also had positive responses from staff surveys. These are told us that:

- "We are good and assessing the needs of service users correctly”.
- "This is a new agency but so far everything is going well.”
This agency is good at making sure they only take on new service users after they are sure that they will be able to meet their needs.
We had evidence to show that the management assess all risks to service users and staff and then create a care plan that minimises risks, encourages independence and details how the person wants their care delivered.
There are suitable systems in place to make sure that people get health care support and that medication is taken correctly.
People who use this service are protected from harm and abuse. Staff are trained in understanding this and are aware of how to report anything of this nature.
There are suitable numbers of staff employed and they have received a good level of training in the first six months.
The agency has good systems in place that will allow the business to be organised correctly.

What has improved since the last inspection?
This was the first inspection of the new service.
The manager told us that he was in the process of improving recruitment so that he could get the right people on to the team and only then would he expand the business.

What they could do better:
There was nothing seen at this inspection that needed to be changed. This agency is working within the guidelines of the National Minimum Standards to good effect.

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):

2  
Quality in this outcome area is **good**

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

The agency makes sure they understand and can manage the needs of each individual before the service starts.

**EVIDENCE:**

The surveys we had returned to us showed that people were fully involved in choosing the agency and that they received a visit before the service started. Everyone was happy with the way this was done.
When we visited the agency we looked at all the service user files and we found that everyone had a full assessment and there were plenty of details about the type of care and support needed. The providers told us that they planned to continue to do this so that they would always know before the service started what level of support the person would prefer.
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.

People who use this service tell us that they get good levels of care and support that allow them to have as independent a life as possible.

EVIDENCE:

People told us in surveys that they were aware of the content of their care plan and had been involved in drawing these up. When we visited the service we checked on all the current care plans and found them to be detailed and to be active documents that staff used.

The surveys also told us that people felt staff treated them with respect and privacy and encouraged them to be as independent as possible. Staff surveys also showed us that team members were aware of their role in helping people
and that their aim was to assist and support people to stay in their own homes.
The care plans and the daily notes gave evidence that staff supported people to access health care. Currently no one is assisted with their medication by staff but we saw evidence to show that there are good policies and procedures in place and that staff have suitable knowledge and training.
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
Quality in this outcome area is good

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

People who use the service are protected from harm by a properly trained staff team who understand how to safeguard vulnerable people.

EVIDENCE:

We had evidence from surveys, training files, daily notes and assessments to show that staff were aware of their responsibilities in health and safety. We saw risk assessments and care plans about manual handling and we cross-checked this with staff training files. We could see that staff had suitable
training, their competence had been checked and good manual handling plans drawn up. Each service user had a risk assessment on file and where risks had been seen a plan was in place to remove or lessen the risks. Staff have had suitable training in this and are given the opportunity to talk to management about any concerns.
The agency has good policies and procedures in place that will help the staff team to recognise and deal with any potential abuse. These follow the local agreements and staff have access to the contact details of outside agencies. There had been no incidents of abuse reported to the agency or to ourselves. Service users and staff told us in surveys that they understood whom to contact if they had any concerns.
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.

This service is suitably managed and staffed so that service users receive good levels of care and services.

**EVIDENCE:**

Two people who have experience and training in caring for older people own this agency. In the past this has been in a residential care setting. They were both aware of the difference between delivering care in a home and supporting people in their own homes. We were impressed with their understanding and application of the National Minimum Standards for domiciliary care in this new setting. The manager has suitable training and experience to be able to move this agency forward.
The manager told us that they continue to recruit staff to this new agency. He told us that they were being very careful about recruiting the right kind of people and that this had meant they had been expanding the business slowly. There had been a number of recruitments, both of people new to them and of staff who had previously worked in their care home. We checked on the recruitment files for all of the staff and we found that these were in order. Each file had information about the person's identity and background, training and experience. All new staff had two references and Criminal Record Bureau checks.

All staff had received training in things like health and safety, manual handling and other core tasks needed for the job. One person who is new to care work was being given a thorough induction. Other staff already have NVQ qualifications in care but they too have received suitable induction and training for domiciliary care work.

We looked at staff supervision records and saw that the management had made a good start at giving staff the right kind of support. The written supervision showed that staff could talk about the people they cared for and could ask for further training if necessary. Each member of staff had also been observed whilst at work so that management could be sure that they were competent enough to do the tasks expected of them. Surveys confirmed that staff were happy with these arrangements. One of the service user surveys also show that staff were getting the right level of support.

The agency has just received an 'Investors in People' award that shows they recruit, train and develop staff appropriately and that they have good terms and conditions of employment.
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, 27
Quality in this outcome area is good.

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

This business has been established with good quality systems that will allow care to be delivered correctly.

EVIDENCE:

The agency is currently based in the home of one of the partners. There is a separate office space where information about the agency is kept. Paper files are kept securely and electronic information is protected by a password. There is a very good telephone system in place that is easy to use. Service users are also given the mobile phone number for the manager. The manager told us that they are looking for suitable business premises, as they are aware that once the business expands they will need larger premises. Until this time the current arrangements are suitable for the numbers of service users and staff. The providers decided to buy themselves the best possible system so that they could start this business as they mean to go on. They have an integrated,
computerised system that helps them to run all aspects of the business. We saw evidence on the day that this particular package is well suited to the business they are running. When we asked for information from the system it was easily accessible. It helps them to keep account of the way each individual service user receives care and how staff have been allocated to do the task.

The agency has a good complaints procedure, surveys tell us that both staff and service users feel confident that their complaints or suggestions will be acted upon and the service user handbook has details of how to complain outside the agency if necessary. Neither the agency nor ourselves have received any complaints about the service.

The manager has already completed a quality audit of the business. He had done this because he wanted an overview of how things were progressing. This had involved asking service users and their relatives their opinion of the care provided and he had also made sure that the targets set out in the initial business plan had been met. He told us that he planned to do this again after the business had been running for a year and to make appropriate changes once the service was established.
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.

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<tr>
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<tr>
<td>3</td>
<td>Standard Met (No Shortfalls)</td>
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<td>Standard Almost Met (Minor Shortfalls)</td>
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<td>1</td>
<td>Standard Not Met (Major Shortfalls)</td>
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“X” in the standard met box denotes standard not assessed on this occasion
“N/A” in the standard met box denotes standard not applicable

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Are there any outstanding requirements from the last inspection? N/A

### 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.

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<tr>
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### RECOMMENDATIONS

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

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<th>No.</th>
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