



*Making Social Care
Better for People*

inspection report

DOMICILIARY CARE AGENCY

Harmsworth House DCA

**Ridgeway Road
Dorking
Surrey
RH4 3AY**

Lead Inspector
Wendy Mills

Unannounced Inspection
13th December 2007 11:30

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	Harmsworth House DCA
Address	Ridgeway Road Dorking Surrey RH4 3AY
Telephone number	01306 888077
Fax number	01306 874920
Email address	
Provider Web address	
Name of registered provider(s)/company (if applicable)	Journalists` Charity
Name of registered manager (if applicable)	Miss Helen Tomlinson
Type of registration	Domiciliary Care Agencies

SERVICE INFORMATION

Conditions of registration:

Date of last inspection N/A

Brief Description of the Service:

Harmsworth House is a domiciliary care agency providing services to older people living in a complex of five ground floor apartments within the grounds of Pickering House. Pickering House is a registered care home for older people. Both the domiciliary care agency and the care home are owned by The Journalists' Charity. This Charity is the registered provider. The registered manager is Miss Helen Tomlinson.

The charity also operates sheltered housing accommodation in the Surrey area but there are no plans to expand the agency to provide personal care to any other but the service users living in the apartments at Harmsworth House.

Harmsworth House was registered as a Domiciliary Care Agency, under the auspices of the Care Standards Act 2000, in September 2007.

At the time of this visit the hourly charges for this agency were given as a flat rate of £18 per hour. However, it should be noted that the fees are under review, as they may need to reflect the additional costs of providing services at night and over Bank Holidays.

Further information about services and charges can be obtained directly from the agency.

SUMMARY

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

As the domiciliary care agency (DCA) is newly registered, some notice was given prior to this visit. This meant that a mutually agreeable time could be arranged to meet with the registered manager, the service users and their relatives.

The visit formed part of the inspection process of the Commission for Social Care Inspection (CSCI) under the Regulations of the Care Standards Act 2000. This report has been compiled using information gained during this visit and information supplied prior to the visit from a variety of sources including the CSCI registration process and the CSCI's required Annual Quality Assurance Assessment (AQAA) that was completed by the registered manager.

During the visit in-depth discussion was held with service users, their relatives and the registered manager. Staff were interviewed in private and a sample of documentation, including care plans and risk assessments, was examined. Both direct and indirect observations were made throughout the visit.

The agency meets the National Minimum Standards well. All comments received about the service were very positive. In particular, service users and their relatives praised the skill and kindness of the staff. They also said that the service is very well managed and that the registered manager keeps them well informed. Documentation is in very good order and there are good templates for processes and procedures, including pre-service assessments and personal care.

The service users, their relatives, the staff and the registered manager are thanked for the welcome they gave and their help throughout this visit.

What the service does well:

The service listens to the views of the service users and their supporters. There are good systems for obtaining feedback from all those who use, or come into contact with, the service. Quality assurance systems are based on this feedback as well as internal audits that are in line with the National Minimum Standards (NMS) for domiciliary care agencies.

The registered manager is clear about the differences between domiciliary care services and those provided in a care home. She ensures that the DCA and care home are run as separate service. There is concise guidance in place to ensure that appropriate care is given at all times.

The service is very good at tailoring care to individual care needs. Each service user has a comprehensive care plan that sets out their individual

wishes and care needs. Good evidence was found to confirm that care provision had been fully discussed with the service users and their supporters before a service was offered. Care plans take into account the diverse cultural, religious and intellectual needs of each service user, providing that they are happy to share this information.

The care provided by the agency is of a high standard. Service users and their supporters said, "I feel very well cared for, it's working incredibly well. Relatives said that they feel more reassured now. One said, "There's a lot of caring here, I can trust the staff to do their job well without having to worry".

What has improved since the last inspection?

This was the first inspection since the agency was established. Therefore this section is not applicable.

What they could do better:

All necessary documentation is in place. However, some policies and procedures could be written in a way that is clearer and more easily understood.

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)

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Scoring of Outcomes

Statutory Requirements Identified During the Inspection

User Focused Services

The intended outcomes for Standards 1 – 6 are:

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

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

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

1 & 2

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

The agency provides the service users and their supporters with the information they need to be able to make a decision about using the service.

Thorough assessments of need, including those of equality and diversity, are made before a service is offered.

EVIDENCE:

The agency submitted a Statement of Purpose providing detailed information on the services they will provide the time of registration. This includes information on the staffing structures, facilities and services to be offered. The organisation is an experienced provider of registered care services and has a good history of meeting the NMS and of compliance with regulations under the care Standards Act.

Service users and their relatives said that they had received visits from the registered manager prior to being offered a service. They said they had received good information upon which to base their decision to take use the service.

Care plans were examined and contain comprehensive assessments of need. They state clearly how these needs are to be met. The service users and their supporters said that they had been able to contribute to the care plans and felt able to state their wishes about the way the care is delivered. They said that the care staff are flexible. Staff said that they use the care plans and understand the importance of ensuring that the service users maintain as much independence of choice as possible.

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):

8 & 10

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

The standard of personal care is very good. It is delivered in the way the service users wish. It promotes their independence and preserves their privacy and dignity.

There are sound policies and procedures in place to allow the service users to maintain as much control as possible in the way they manage their medicines.

EVIDENCE:

Comprehensive care plans are in place. These note care needs and take into account the diverse cultural needs and wishes of the service users. Individual wishes are recorded. Staff confirmed that they comply with the way the service users wish to receive their care.

The service users and their relatives said that could not fault the care that is given to them. They spoke very positively about the registered manager and the staff. Some of the comments were, "The carers treat us they way they would like their own relatives to be treated"; "The carers are very respectful - we feel much safer now"; "It's al working very well, everything's working out"; and, "The carers all go that extra mile".

The service users and their supporters are aware that there are care plans in place. They said that they had been consulted about these and know they can discuss any wish to change things if necessary. The care plans contain detailed information about care needs and individual choices. Appropriate risk assessments are in place.

The registered manager said that she is working hard to forge good relationships with local health and social care professionals. Specialist nurses and therapists have visited to make assessments and give advice. Records show that their advice has followed. Some initial difficulties were experienced with the provision of specialist equipment, for example, pressure-reliving mattresses to prevent pressure sores developing. This not due to the way the agency operates. It was because the local community services that are responsible for providing such equipment have rules that they must apply before providing equipment.

There are sound policies and procedures in place to cover the way the agency supports the service users to maintain as much independence in taking their medicines as possible. At present no service user requires assistance from the care staff with their medication.

Staff have received training in the management and administration of medicines. At present all the staff providing the domiciliary care services also work at Pickering House. They benefit from the training available and from the expertise of the nursing and senior care staff there.

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.

The service does all in its power to promote the health and well-being of the service users and to protect them from harm.

EVIDENCE:

There are sound health and safety policies and procedures in place. Staff have all received statutory training that has enabled them to understand the actions they must take to protect the service users from harm and to ensure they are using safe working practices when working with them in their own homes.

There are environmental risk assessments in place and there are further risk assessments for care procedures and individual choices.

Policies and procedures in place for the Protection of Vulnerable Adults (POVA). These are clear and comprehensive. Staff have received POVA training. They are clear about their responsibility to report any concerns they may have in respect of POVA to the appropriate person. Conversation with the registered manager confirmed that she is very well aware of all issues concerning POVA.

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.

Staff training, staff morale, staffing levels and staff recruitment practices are all good. This means that cheerful, well-qualified and carefully vetted staff team provides the service.

EVIDENCE:

The agency has rigorous recruitment procedures. At present, all the staff providing personal care also work at Pickering House. Examination of staff files confirmed that all staff have been appropriately vetted. References for each staff member have been taken up and Criminal Records Bureau (CRB) checks have been made.

All staff working for the agency have received foundation training. All hold the National Vocational Qualification (NVQ) at level II or above. Staff confirmed that they had received training in all the important areas of care such as moving and handling, infection control and in care practice that respects privacy and dignity. The service users said that the staff are very well trained. Some compared their care practice very favourably to that which they had experienced in other areas.

The service users and their relatives said that they always receive their service at the agreed time and that there are always enough staff to help them. They said that they feel very unlikely that staff will ever let them down. They said that the proximity of Pickering House gives them confidence as they know there is always someone nearby.

Staff spoken to showed a good understanding of individual needs and choices. Good examples were given of how these needs are met. For example, one member of staff spoke about the importance of ensuring that tables and trays are laid correctly, with the correct cutlery, for service users who are used to such attention to detail.

The manager said that staff receive regular supervision. At present, as the agency is so small, she is meeting with staff very frequently and deals with any concerns on a daily basis. As the service becomes more established there are plans to ensure there is a more formal basis for staff meetings and supervision.

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, 25 & 26

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

The agency is well managed. The views of the service users and their supporters are listened to and acted upon. This means that the agency keeps the best interests of the service users to the forefront of their care provision.

EVIDENCE:

The responsible individual and registered manager are experienced and have been assessed by the Commission for Social Care Inspection as being fit for their roles.

Miss Helen Tomlinson, the registered manager, is very well qualified for her role. She is a Registered General Nurse who maintains her registration with the Nursing and Midwifery Council. She also holds a social work qualification and is experienced in working both in social and nursing care. In addition she has some years experience of working in the regulation of care services.

Conversation with Helen showed that she has an excellent knowledge of best practice in nursing and care. She is very knowledgeable about the National Minimum Standards (NMS) and the role of the Commission for Social care Inspection. She has maintained her continuing professional development and nursing and care practice competencies.

Policies and procedures, in line with the National Minimum Standards (NMS), for domiciliary care agencies are in place. These include policies to ensure that the equality and diversity of the service users is acknowledged and valued.

Helen is well organised in her approach to the administrative procedures and was able to produce all documentation requested during the course of this visit.

There is a comprehensive complaints policy and procedure that is easy to understand and follow. The service users and their supporters said that they had not yet had to make any complaints and did not envisage having to do so. They said they had no complaints, only compliments. They said that they see Helen, the manager, frequently and know they can talk to her about any concerns if necessary.

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	X
5	X
6	X

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

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

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

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

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.

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	D025	Whilst the agency has comprehensive policies and procedures, some would benefit from rewriting to ensure that the policies are easy to understand and the procedures are easy to follow.

Commission for Social Care Inspection

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