



*Making Social Care
Better for People*

inspection report

DOMICILIARY CARE AGENCY

Keystone Healthcare Ltd

**3b Cartwright Court
Bradley Business Park
Dyson Wood Way
Bradley
Huddersfield
HD2 1GN**

Lead Inspector
Susan Vardaxi

Key Unannounced Inspection
27th November 2007 10:55

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	Keystone Healthcare Ltd
Address	3b Cartwright Court Bradley Business Park Dyson Wood Way Bradley Huddersfield HD2 1GN
Telephone number	01484 545990
Fax number	
Email address	
Provider Web address	
Name of registered provider(s)/company (if applicable)	Keystone Healthcare Limited
Name of registered manager (if applicable)	Mr Martyn Stuart Young
Type of registration	Domiciliary Care Agencies

SERVICE INFORMATION

Conditions of registration:

N/A

Date of last inspection New service.

Brief Description of the Service:

The agency operates from a new, office purpose built building situated in Bradley Business Park Bradley Huddersfield, which is accessible by public transport and has access to main roads and motorways.

The office is located on the first floor of the building is spacious and well-equipped, disabled facilities are available on the ground floor.

The service is delivered on a needs led basis to support people living in their own homes.

The provider's fees and the role of the Commission are detailed within the agency's service user guide and when people make enquiries about the service.

SUMMARY

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

An unannounced visit was made, as part of the key inspection, on the 29th November 2007. This took place over five hours starting at 10:15am. This was the first visit since the agency was registered in May 2007.

At the time of the visit sixteen people used the service and eight staff were employed.

Prior to the visit a survey, of people using the service and professionals, was carried out. One person who receives the service, and four relatives replied. Comments made were generally positive. Five surveys were sent out to health professionals, only one was returned which had not been completed.

Prior to the visit the provider supplied the information that had been requested through an Annual Quality Assurance Audit (AQAA).

During the visit there was discussion with the provider and some staff, and some records were examined.

The inspectors would like to thank all concerned for their cooperation and hospitalities during the inspection process.

What the service does well:

Assessments to establish people's needs and care plans are completed prior to people using the service ensuring their needs can be met appropriately. The daily events log records completed by staff detailed how people's needs had been met.

The agency completes risk assessments and safety checks of equipment used in people's homes to ensure staff and people using the service are safe. The agency's trainers provide staff training and staff development programmes are in place. Some staff supervision had occurred whilst staff were working in people's homes to support staff meeting people's needs, records seen showed that people who use the service were satisfied with the care provided.

What has improved since the last inspection?

This was the first visit to the agency. All policies and procedures and the staff handbook have been reviewed over the past six months. They have been written to a good standard to provide staff and people who use the service with guidelines and up to date information in respect of the service and how it is to be delivered.

What they could do better:

Records should be available for checking to confirm robust recruitment checks have been completed to ensure people are safe.

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 and 2.

People who use this service experience **good** quality outcomes in this area. We have made this judgement using a range of evidence, including a visit to the service.

People's needs are identified before the service is provided ensuring needs can be met appropriately.

EVIDENCE:

The statement of purpose and service user guide developed at the time the service was registered in May 2007 had been reviewed. The provider said a copy of the up statement of purpose is given to people who use the service so they kept fully informed about the service the agency provides. Comments made on surveys received confirmed this.

Copies of assessments completed prior to the service being provided were seen on the files checked. The manager and care coordinator went out to people's homes to complete assessments at the time of the visit.

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 and 10.

People who use this service experience **good** quality outcomes in this area. We have made this judgement using a range of evidence, including a visit to the service.

Risk assessments and information on care plans ensures people's needs can be met appropriately

EVIDENCE:

The care plans seen had been generated from needs assessments and the daily events logs seen showed that staff had delivered the planned care. A comment received from someone who uses the service stated " more information is needed on the care plan", this has been brought to the attention of the provider who is reviewing care plans on an ongoing basis.

Risk assessments had been completed and outcomes recorded in the plans. The daily events logs records the care given by staff on a daily basis, the agency's procedure for maintaining records includes guidelines to staff for recording information in "terms that the client can understand".

“Client satisfaction records showed that they had been satisfied with the care provided and privacy was respected. The agency’s confidentiality policy gives clear guidelines for staff to follow ensure people’s privacy is respected at all times.

The agency has a medication policy; the provider said staff generally prompt people to take medications and would not administer medications until they had been given the appropriate training which the provider or manager, who are trained nurses, would deliver.

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 and 14.

People who use this service experience **good** quality outcomes in this area. We have made this judgement using a range of evidence, including a visit to the service.

Health and safety arrangements are satisfactory. Recruitment checks had been completed and action had been taken to obtain further information where applicable to ensure people are protected.

EVIDENCE:

Risk assessments in people's files checked included manual handling and environmental risk assessments to safeguard staff and people who use the service. Information received from the agency before the visit stated that a company specialising in occupational health had completed risk assessments

for the agency's offices and written the agency's health and safety section for the agency's mandatory training course. Records showed all equipment in use in people's homes is inspected to ensure it is serviceable and records are kept. The provider said staff carry alarms to help to protect them if needed when travelling particularly in the late evening and at night staff work in pairs. Procedures are in place for entering and leaving peoples homes and storing key codes and keys.

The provider said all staff wear identity badges, and this was seen at the visit.

Training records showed that staff had received induction training in health and safety and safeguarding of vulnerable adults. The staff handbook containing all the agencies policies and procedures was seen, which staff sign to confirm they have received them.

The infection control policy seen did not include the use of protective clothing, however gloves and aprons were seen in the office to be allocated to staff. The provider said the policy would be expanded to ensure staff are fully informed of the agencies policies and procedures to prevent cross infection.

Some staff recruitment records were seen, one person's checks were being processed, the provider said they would not start work until all checks had been completed and outcomes were satisfactory.

The provider said he knew discussion had occurred with an applicant in respect of information received prior to them starting work at the home however was unable to produce written confirmation at the visit. A copy of the document has since been provided confirming discussion had occurred.

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 and 21.

People who use this service experience **good** quality outcomes in this area. We have made this judgement using a range of evidence, including a visit to the service.

The provision of staff training and ongoing supervision should ensure staff have the skills and support needed to do their jobs effectively.

EVIDENCE:

The registered manager and provider are registered nurses, the manager has completed the NVQ level 4 management training and was awaiting the outcome. The provider said he too would be undertaking the management training.

The agency's trainers provide most of the training staff receive.

The staff induction process is over three days. This covers mandatory training, safeguarding, and Whistle blowing. Other training, including awareness of the legislation to which the procedures apply, is also covered over the first two days and new staff work "on site" with an experienced carer on the third day. Evidence to confirm staff induction and training development plans was seen, the provider said staff will sign to commence NVQ training six months after they have started working at the agency.

Records of staff supervisions that occurred in people's homes had been recorded and outcomes were positive.

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 and 26.

People who use this service experience **good** quality outcomes in this area. We have made this judgement using a range of evidence, including a visit to the service.

The management work to ensure a good quality service is always provided and maintained.

EVIDENCE:

The agency has been registered with the Commission since the summer of 2007. The premises from which the agency operates are located on the first floor of the building, which was purpose built and accessible by local transport. Car parking spaces are available to the front of the building.

A health and safety assessment was completed prior to the office being used to ensure staff were working in a safe environment. Staff interviews are generally held in a small private area. The provider said interviews generally occur on days when a separate office located on the same floor and from which the company's nursing agency operated is not being used.

All records not stored electronically are kept in locked facilities.

At the time of the visit the agency was providing a service to sixteen people and eight staff had been employed.

The agency has a complaints procedure, which is given to people when they start using the service. The complaints records were not available at the time of the visit. Discussion occurred with the provider in respect of the importance of recording all concerns raised by people in order to ensure people are satisfied with the service.

The provider said that all policies and procedures have been revised since the agency was registered. He said the National Minimum Standards for Domiciliary care were used as the baseline from which to develop the procedures.

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	X
26	3
27	X

Protection	
Standard No	Score
11	3
12	3
13	X
14	2
15	3
16	3

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	OP14	Records should be available for checking to confirm robust recruitment checks have been completed to ensure people are safe.

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