

Key inspection report

DOMICILIARY CARE AGENCY

Dignicare Limited

**1 Wilmer Drive
Heaton
Bradford
West Yorkshire
BD9 4AR**

Lead Inspector
Steve Marsh

Key Unannounced Inspection
10th August 2009 09:30

This report is a review of the quality of outcomes that people who use this agency experience. We believe high quality care should:

- Be safe
- Have the right outcomes, including clinical outcomes
- Be a good experience for the people that use it
- Help prevent illness, and promote healthy, independent living
- Be available to those who need it when they need it.

We review the quality of the service against outcomes from the National Minimum Standards (NMS). Those standards are written by the Department of Health for each type of care service.

Copies of the National Minimum Standards – Domiciliary care agency can be found at www.dh.gov.uk or bought from The Stationery Office (TSO) PO Box 29, St Crispins, Duke Street, Norwich, NR3 1GN. Tel: 0870 600 5522. Online ordering from the Stationery Office is also available: www.tso.co.uk/bookshop.

The mission of the Care Quality Commission is to make care better for people by:

- Regulating health and adult social care services to ensure quality and safety standards, drive improvement and stamp out bad practice
- Protecting the rights of people who use services, particularly the most vulnerable and those detained under the Mental Health Act 1983
- Providing accessible, trustworthy information on the quality of care and services so people can make better decisions about their care and so that commissioners and providers of services can improve services.
- Providing independent public accountability on how commissioners and providers of services are improving the quality of care and providing value for money

Reader Information

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SERVICE INFORMATION

Name of service	Dignicare Limited
Address	1 Wilmer Drive Heaton Bradford West Yorkshire BD9 4AR
Telephone number	01274 548776
Fax number	
Email address	
Provider Web address	
Name of registered provider(s)/company (if applicable)	Dignicare Ltd
Name of registered manager (if applicable)	Mrs Sharon Mankoo
Type of registration	Domiciliary Care Agencies

SERVICE INFORMATION

Conditions of registration:

Date of last inspection 13th August 2008

Brief Description of the Service:

Dignicare Domiciliary Care Agency provides care and support to people throughout Bradford and Airedale from office premises in the Heaton area of the city.

The agency operates between the hours of 7am and 10pm. People that use the service are provided with an emergency contact number, which can be used outside normal office hours.

The agency provides care/services to a wide range of people including people, who are elderly, people with physical disabilities, people with sensory loss including dual sensory impairment and people with learning disabilities.

Charges for the service range from £14:00 per hour Monday to Friday to £16:00 per hour at the weekend. The charge is based on one carer attending and would be doubled if two carers are required to provide care and support.

SUMMARY

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

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

As part of the inspection process we visited the office to review the policies and procedures with the manager. We looked at some records including people's assessment of needs, care plans, risk assessments and staff training and employment files.

At the time of inspection the agency was providing care and support to twenty-four people living in their own homes and employed thirteen staff. We sent out survey questionnaires to fifteen people that use the service all members of staff. We received questionnaires back from five people that use the service and four from staff. We also contacted three people using the service by telephone. The information provided has been used in the body of the report.

The manager had also completed an Annual Quality Assurance Assessment (AQAA) form. The AQAA is a self-assessment form that focuses on how well outcomes are being met for people using the service. It also gives us some numerical information about the service. Information provided in the self-assessment form has been used as evidence in the report.

We have reviewed our practice when making requirements, to improve national consistency. Some requirements from previous inspection reports may have been deleted or carried forward as recommendations, but only when it is considered that people who use the service are not being put at significant risk of harm. In future, if a requirement is repeated it is likely that enforcement action will be taken.

No requirements have been made as a result of this inspection visit.

What the service does well:

The agency is well managed and effective quality assurance monitoring systems are in place, which allow people to air their views and opinions of the service provided.

Information about the services provided is good and helps people to decide if the agency can meet their needs.

The needs of all people that use the agency are assessed before any service begins and there are systems in place to refer people back for a re-assessment of their needs if necessary.

There is a commitment to making sure that staff receive the training they need to carry out their roles effectively, therefore people using the service can be

confident that their support is provided by staff that are suitably trained to meet their needs.

People using the service told us that the agency is generally reliable, they are treated with respect and their privacy and dignity is respected at all times. Comments included "I would recommend this agency to anyone requiring care and support" and "I receive a very good service provided by caring, considerate and experienced staff."

What has improved since the last inspection?

At the last key inspection visit the service was not fully operational and the small number of staff employed only worked as members of the patch teams employed by the Local Authority. However, the agency is now fully operational resulting in the management structure and staffing levels being improved to meet the change in circumstances and operational needs.

Policies and procedures have been reviewed in light of changes in legislation and good practice guideline.

What they could do better:

Care plans need to be more specific and give clear guidance to staff on how to meet people's needs, so that they can be confident that their care and support is provided in line with their preferences.

The medication policy should be amended to give clear guidance to staff on their roles and responsibilities in relation to other health care tasks they may be asked to undertake.

Written references should always be obtained before a new employee starts work and at least one reference wherever possible should be from their last employer. This will make sure that people that use the service are cared for and supported by staff that are suitable to work in the caring profession.

All staff should attend further adult protection (safeguarding) training to make sure they are fully aware of their roles and responsibilities in this area of their work.

If you want to know what action the person responsible for this agency is taking following this report, you can contact them using the details on page 4.

The report of this inspection is available from our website www.cqc.org.uk. You can get printed copies from enquiries@cqc.org.uk or by telephoning our order line – 0870 240 7535.

DETAILS OF INSPECTOR FINDINGS

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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, 3, 5 and 6

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

The assessment process and information provided about the service is good and helps people to decide whether or not the agency can meet their needs.

The service is flexible, reliable and responsive to the needs, wishes and preferences of people that use it.

EVIDENCE:

The agency has produced a statement of purpose and service user guide and is in the process of producing a brochure for the service, which will be made

available to all people considering using the service. Information about the service is currently only published in English but the manager confirmed that it would be made available in other languages and formats on request.

The agency provides services to people that are either self funding, on direct payments, referred through the Social Services Care Management arrangements or by other professional agencies.

The needs of all people considering using the agency are assessed before any service starts, and procedures are in place to allow a re-assessment of their needs to be made if necessary.

Feedback from people that use the service showed that they feel the agency is reliable and the staff are kind, caring and professional. Comments included "I receive an excellent service from the agency – the girls never let me down and are always polite and cheerful" and "I have no complaints at all about the service." However, one person was concerned that the agency does not always let them know if staff are going to arrive late, resulting in their family having to contact them to find out what is happening. This matter was discussed with the manager who confirmed that she would in future make sure that people were contacted as soon as possible if staff were delayed for any reason.

The manager confirmed that the agency is sensitive to the religious and cultural needs of people from minority ethnic communities. Wherever possible staff from the same cultural background and who speak the same language will provide care and support. This makes sure that people using the service and/or their families are able to discuss their needs without the use of an interpreter.

The agency has a policy document on confidentiality and feedback from people that use the service indicates that staff never shared information about other people with them.

Personal Care

The intended outcomes for Standard 7 – 10 are:

- 7.** The care needs, wishes, preferences and personal goals for each individual service user are recorded in their personal service user plan, except for employment agencies solely introducing workers.
- 8.** Service users feel that they are treated with respect and valued as a person, and their right to privacy is upheld.
- 9.** Service users are assisted to make their own decisions and control their own lives and are supported in maintaining their independence.
- 10.** The agency's policy and procedures on medication and health related activities protect service users and assists them to maintain responsibility for their own medication and to remain in their own home, even if they are unable to administer their medication themselves. In the case of standards 10.8 and 10.9, these do not apply to employment agencies solely introducing workers.

The Commission considers Standards 8 and 10 the key standards to be inspected.

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

7, 8, 9 and 10

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

Care and support is delivered in a manner that respects people's privacy and dignity although how this is achieved is not always reflected in the care planning documentation completed by the agency.

EVIDENCE:

Care plans are in place for all people using the service and are generated from the initial Social Service Care management assessment or the assessment of needs completed by the manager or assistant manager.

The plan is drawn up with the involvement of the person using the service and/or their relatives and forms the basis for the care and support to be provided. This means that people are consulted about how they want their care and support to be provided.

Additional supporting documentation including risk assessments and moving and handling plans are completed as required. These are made available to the staff providing the care and support.

The care plans we looked at were generally completed to a satisfactory standard although in some instances the information provided did not give clear guidance to staff on how to meet people's needs. For example the care plan for one person just stated "assist to wash and dress." It did not inform the staff how they were expected to do this, how the individual was to be encouraged to maintain their independence or how dignity and privacy was to be maintained. We discussed this matter with the manager who confirmed that the care plans in use would be reviewed to make sure that they provide staff with the information they need to carry out their roles affectively and in the best interest of people using the service. The manager also confirmed that the senior care co-ordinator who is mainly responsible for completing the plans is to attend a care planning course in the near future to update his skills and knowledge base.

Survey questionnaires returned from people that use the service did however show that they feel well supported by the staff and their privacy and dignity is always respected. Comments included "you could not wish for more kind and caring staff" and "the staff are wonderful - without the help and assistance I would not be able to live independently in my own home."

The agency has a policy and procedure document on assisting people with medication, which at the current time staff only prompt and do not administer. However, the document requires amending to gives clear guidance to staff on their roles and responsibilities in relation to other health care tasks they may be asked to undertake.

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, 13, 14 and 15

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

Comprehensive health and safety and adult protection policies and procedures make sure that individuals are safe, listened to and protected from any form of abuse.

EVIDENCE:

The agency has comprehensive health and safety policies and procedures in place to safeguard people that use the service and to make sure staff follow safe working practices.

Potential health and safety hazards are identified during the initial assessment of needs visit and risk assessments are routinely completed for all new people accessing the service. The risk assessments we looked at were generally completed to a satisfactory standards although in some instances they needed to be more specific about the action taken to minimise identified risks either to the person using the service or staff.

Policies and procedures are in place to make sure that people are left safe and secure in their own home and all staff are required to carry identity badges with them when on duty, so that only authorised personnel can gain entry to people's homes.

Adult protection (safeguarding) policies and procedures are in place and information provided in the self-assessment form shows that no safeguarding referrals have been made in the last year. The manager confirmed that all the staff have either achieved or are studying for a National Vocational Qualification and therefore have received some training on the recognition and reporting of abuse as part of the course. Further training is planned for later in the year to make that staff are fully aware of their roles and responsibilities in this area of their work. Survey questionnaires returned by staff show that they are aware of the agency's policy on "whistle blowing" and know what action to take if they feel people are at risk of being abused.

Procedures are in place to protect people from financial abuse and when shopping is undertaken by staff as part of an agreed care package financial transaction sheets are completed.

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, 18, 19, 20 and 21

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

People that use the service are protected by the agency's recruitment and selection procedure.

EVIDENCE:

The agency has a thorough staff recruitment and selection procedure, which includes obtaining at least two written references and a Criminal Record Bureau (CRB) check before new staff start work. This makes sure that people that use the service are cared for and supported by staff that are suitable to work in the caring profession. We looked at the recruitment files for four recently appointed staff and found that they were generally kept in good order. However, the manager was reminded that written references must always be obtained before a new employee starts work and at least one reference should be from their last employer.

All staff are initially employed for a three month probationary period following which they are provided with terms and conditions of employment. There is staff handbook available which is at the present time is being updated to make sure it contains all relevant information.

Survey questionnaires returned by staff showed that they felt the recruitment process was thorough and they feel well supported by the manager and senior staff team. Comments included "the manager and senior care co-ordinator are very approachable and always contactable in an emergency" and "although I have not worked for the agency very long there seems to be a good team spirit and a good relationship between staff and management."

The manager confirmed that all new staff initially work alongside more experienced members of staff for a period of time until both they and the agency are confident that they are able to work without direct supervision.

All staff starting work at the agency receive induction training in line with the Skills For Care Common Induction Standards. These are nationally agreed induction standards designed to help new staff get the skills and experience they need to care for people. Following induction and mandatory training there is then an expectation that staff will study for a National Vocational Qualification (NVQ) at level two or above.

Training records show that staff have attended a number of training courses relevant to post they hold and additional course are planned in the near future. The manager confirmed that she intends to produce a training matrix to assist when planning future training and to identify when updates are required.

There was evidence to show that the manager has started to have formal one-to-one supervision meetings with staff on a three monthly basis and the manager confirmed that the agency intend to incorporate direct observation of staff providing care and support as part of the supervision process.

Organisation and Running of the Business

The intended outcomes for Standards 22 – 27 are:

- 22.** Service users receive a consistent, well managed and planned service.
- 23.** The continuity of the service provided to service users is safeguarded by the accounting and financial procedures of the agency.
- 24.** The rights and best interests of service users are safeguarded by the agency keeping accurate and up-to-date records.
- 25.** The service user's rights, health, and best interests are safeguarded by robust policies and procedures which are consistently implemented and constantly monitored by the agency.
- 26.** Service users and their relatives or representatives are confident that their complaints will be listened to, taken seriously and acted upon.
- 27.** The service is run in the best interests of its service users.

The Commission considers Standards 22 and 26 the key standards to be inspected at least once.

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

22, 24, 25, 26 and 27

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

The agency is well managed and the management structure in place makes sure that the service is delivered effectively.

People that use the service can be assured that all complaints are taken seriously and action will be taken to address matters.

EVIDENCE:

The agency is based in office premises on the lower ground floor of the Orchards Care Home and is equipped with all the equipment necessary for the effective and efficient management of the service.

The registered manager Mrs Sharon Mankoo has many years experience in the caring profession and has achieved a recognised management qualification. She has a positive attitude to the inspection process and during the course of

the inspection showed a willingness to work with us to maintain and improve standards at the home.

The manager is supported in her role by a senior care co-ordinator, and four senior home care assistants who make up the senior management team. There are clear lines of accountability within the agency and the management structure ensures the effective and efficient management of the service.

There is a clear complaints procedure in place and questionnaires returned by people that use the service or their relatives indicate that they knew who to contact if they had any concerns about the standard of care and support provided. The manager confirmed that the agency has a positive approach to dealing with complaints and is open to suggestions about how the service could be improved. Information provided in the self assessment form shows that no complaints have been received by the agency since the last inspection.

Policies and procedures are in place regarding the storage and processing of personal information, held either in manual form or on the computer, which comply with the Data Protection Act 1998.

The agency has recognised quality assurance monitoring systems in place and the manager confirmed that people using the service are sent out annual survey questionnaires. The questionnaire gives people the opportunity to air their views of the service and is an important part of the quality assurance monitoring process. The last surveys questionnaires were sent out at the end of May 2009 and the agency is currently analysing the results, following which they will be published and an action plan completed if required.

Senior staff are also in regular contact with people that use the service and their families and continually measure the success of the agency by using their feedback.

SCORING OF OUTCOMES

This page summarises the assessment of the extent to which the National Minimum Standards for Domiciliary Care have been met and uses the following scale.

4 Standard Exceeded (Commendable) **3** Standard Met (No Shortfalls)
2 Standard Almost Met (Minor Shortfalls) **1** Standard Not Met (Major Shortfalls)

"X" in the standard met box denotes standard not assessed on this occasion
 "N/A" in the standard met box denotes standard not applicable

User Focused Services	
Standard No	Score
1	3
2	3
3	3
4	X
5	3
6	3

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

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

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

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

Are there any outstanding requirements from the last inspection?

NO

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 Agencies 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	Care plans should be more specific and give clear guidance to staff on how to meet people's needs, so that they can be confident that their care and support is provided in line with their preferences.
2	DO10	The medication policy should be amended to gives clear guidance to staff on their roles and responsibilities in relation other health care tasks they may be asked by people to undertake.
3	DO14	All staff should attend further adult protection (safeguarding) training to make sure they are fully aware of their roles and responsibilities in this area of their work.
4	DO17	Written references should always be obtained before a new

		employee starts work and at least one reference must be from their last employer. This will make sure that people that use the service are cared for and supported by staff that are suitable to work in the caring profession.
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