



*Making Social Care
Better for People*

inspection report

DOMICILIARY CARE AGENCY

Freshford Home Care Limited

**18 Clinton Place
Seaford
East Sussex
BN25 1NP**

Lead Inspector
Kathy Flynn

Key Unannounced Inspection
15th November 2006 11:00

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	Freshford Home Care Limited
Address	18 Clinton Place Seaford East Sussex BN25 1NP
Telephone number	01323 491999
Fax number	
Email address	
Provider Web address	
Name of registered provider(s)/company (if applicable)	Freshford Homecare Limited
Name of registered manager (if applicable)	Jacqueline Gough
Type of registration	Domiciliary Care Agencies

SERVICE INFORMATION

Conditions of registration:

1. That the agency provides personal care for service users aged sixty-five (65) years or over, including those who have a dementia type illness or have a sensory impairment, are terminally ill, are ill or recovering from an illness.
2. That the agency provides personal care for service users between eighteen (18) and sixty-five (65) years of age who have a dementia type illness or have a sensory impairment, are terminally ill, are ill or recovering from an illness.
3. That the agency may not provide personal care for children under eighteen (18) years of age.

Date of last inspection 24th October 2005

Brief Description of the Service:

Freshford Home Care Limited is registered as a domiciliary care agency to provide a range of services for adults, over 18 years of age, in their own home.

The agency is based in Seaford with its office on the main street and covers Seaford and the surrounding area including Alfriston, Peacehaven, Newhaven, Denton and Bishopstone.

SUMMARY

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

This announced inspection was carried out on the 15th and 24th November and took place over 14 hours.

The inspection included a visit to Freshford Home Care Ltd, a review of prospective service users assessments, care plans, staff records and training, service user records, policies and procedures, and visits to service users homes.

The agency provides support for 254 individuals who live in their own home and this includes personal care and bathing, shopping and housework. This inspection is concerned with the personal care services provided and does not include information or feedback from individuals who have domestic support only.

A pre-inspection questionnaire was sent to the offices prior to the inspection, from the information provided 20 service user surveys were sent out, 16 were returned and visits were arranged to 4 service users at home in order to obtain their feedback on the services provided.

The comments received from the surveys and discussions were positive and complementary about the services provided by the agency. 20 care workers surveys were sent out, 16 were returned and eight care workers, the manager and responsible person were spoken with during the Inspection.

What the service does well:

Freshford Home Care Ltd is an established domiciliary care agency and provides a flexible service for people in Seaford, Newhaven, Peacehaven, Alfriston and the surrounding areas.

The agency wherever possible encourages and supports service users to be independent and make choices about their day to day lives, including involvement in the assessment of their needs and planning of the care they are to receive. Where appropriate relatives may be involved in decisions regarding the services provided by the agency.

Feedback from service users was positive 'I am very happy with the care I receive', 'best possible' and 'Freshford provides a good service and they do their best to fit the times of the service to the wishes of the clients'.

Personal support is provided in such a way as to ensure that the service users privacy and dignity are maintained.

What has improved since the last inspection?

The training in moving and handling has been reviewed, staff spoken with were able to demonstrate a good understanding of the training provided, the assistance that service users may require and how they can meet their needs safely.

What they could do better:

No requirements have been listed in this report.

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.

DETAILS OF INSPECTOR FINDINGS

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Personal Care (Standards 7-10)

Protection (Standards 11-16)

Managers and Staff (Standards 17-21)

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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 at least once during a 12 month period.

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.

Prospective service users are assessed prior to commencement of the service to ensure that the agency can meet their care needs.

EVIDENCE:

The manager or senior staff visit prospective service users to carry out a full needs assessment prior to agreeing to provide personal support. The manager confirmed that service users and relatives, where appropriate, are directly involved in the assessment and the care planning process.

Service users spoken with said that the assessment is used to decide what help they need and can be changed if they need more help.

Feedback from service users was positive, they were happy with the overall care provided, and felt that staff understand their needs.

Some of the comments received were, 'over the years Freshford have taken very good care of me', 'I am very satisfied with the care I receive', 'I get very good holistic care from Freshford'. Some stated that they do not like any changes in staff, although they realise that if their usual carer is on holiday or sick then the changes are necessary, 'it is a common problem'.

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 at least once during a 12 month period.

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

7,8 and 10

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

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

Care staff are provided with detailed information, which enables them to meet the service users health, personal and social care needs.

Care staff provide care and support in a way that maintains and respects the privacy and dignity of the service users, encourages them to be independent and make decisions about the services provided by the agency.

Appropriate policies and procedures are in place to manage medicines and training is provided for staff to ensure the protection of service users.

EVIDENCE:

Care plans provide information concerning the service users needs, including risk assessments, and a record of the support and care provided by the care staff each time they visit. The service users confirmed that the staff understood their needs and were able to provide appropriate support. One service user stated that 'the staff know what I need and are able to help me very well'.

The staff spoken with demonstrated an understanding of the importance of ensuring service users privacy and dignity at all times. The feedback from service users and their relatives confirmed that they are consulted with regard to how the care is provided. They are encouraged to be as independent as they can be and they are treated with respect.

Medication policies and procedures are in place. The manager confirmed that training is provided and the staff spoken with were able to demonstrate an awareness of the policies, showing an understanding of the limitations in terms of assistance with medicines.

It was noted that the Medication Administration Record sheet for one service user was not completed appropriately, in accordance with the prescribed instructions. The manager advised that this may be because the residents medical needs change daily, and may not need assistance some days, and this should be made clear in the care plan. The manager confirmed that clarification of what medication is needed will be addressed during the review of the care plan.

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 during a 12 month period.

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

11,12 and 14

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

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

Policies and procedures relating to health and safety are in place and training is provided for care staff to ensure the health and safety of service users and staff.

Policies and procedures are in place for the protection of vulnerable adults and training to underpin these is provided for staff to promote the protection of the service users.

EVIDENCE:

A range of policies and procedures with regard to health and safety are kept in the office and are included in the staff handbook. A rolling programme of training is provided for staff and includes health and safety, infection control, food awareness and manual handling. Staff spoken with confirmed that they had received the relevant training and service users said they 'feel safe and well supported' and staff 'help as much as I need'.

Part of the assessment process, completed prior to providing support and care for individuals in their own home, includes assessing their home environment, which includes moving and handling assessments. The assessments are recorded in the care plans and are updated when the care plans are reviewed.

There are policies and procedures in place for the protection of vulnerable adults, and staff spoken with were able to demonstrate an understanding of these and advised that training is ongoing and commences during induction.

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 at least once during a 12 month period.

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

17,19 and 21.

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

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

Appropriate policies and procedures for the recruitment of staff are in place to protect service users.

Care staff are provided with training to develop their skills to enable the care needs of service users can be met.

Regular supervision provides the support, which enables staff to develop their role as care workers.

EVIDENCE:

Robust recruitment procedures are in place and staff are not employed until all checks have been completed, including POVA/CRB checks and references. Staff files examined during the inspection contained all the relevant information.

The staff spoken with said that the agency provides induction training, that they work with more experienced staff for a minimum of three days and then only provide individual care when they are assessed as competent by senior staff.

Staff are given a job description and those spoken with were able to describe their roles and the support they offer to each of the service users. They demonstrated that the needs of the service users are different and that training is provided to ensure that they can be flexible when meeting service users individual needs.

Staff are encouraged to work towards additional qualifications when they have completed the induction and foundation courses. 25 have achieved a relevant NVQ and 33 are currently undertaking NVQ courses.

Supervision, regular team meetings and yearly appraisals ensure that staff receive appropriate support with regard to developing their role as care workers, and meeting the needs of service users.

During the inspection it was noted that a care worker has been working for the agency for over two months and they had not yet had any supervision with their line manager. They said that they were unable to attend the first session and there has been no agreement for another date. The manager confirmed that it is their intention to make sure that all staff are supervised on a regular basis and this will be arranged.

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 during a 12 month period.

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

22 and 26

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

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

The service is well managed and provides appropriate care and support for service users.

The complaints procedure enables service users and their representatives to raise any concerns.

EVIDENCE:

There was evidence of a clear management structure with the registered manager and the responsible person managing a team of care co-ordinators, personnel and training staff as well as administrative staff, to ensure that the services offered are provided for each of the service users.

Feedback from the care staff was positive, they said that they receive a good level of support from all the staff working in the office, and if they have any

concerns or questions about the care they provide they are able to discuss these at any time.

A copy of the complaints procedure is included in the service users guide, which is given to every service user or their representative. The manager advised that service users are encouraged to raise any concerns they may have, so that they can be dealt with as soon as possible.

Service users who were spoken with and expressed an opinion said that if they had any concerns they talked to the carers or could contact the office if they want to. A service user explained that she hasn't got any concerns, but if she did have she would contact the office.

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	X
2	2
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	3
8	3
9	X
10	3

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

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

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 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

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