



Making Social Care Better for People

Inspecting for better lives

Key inspection report

Domiciliary care agencies

Name:	Home Life Carers Limited
Address:	Unit 1 Cedar Court Lowman Way Tiverton Devon EX16 6GT

The quality rating for this domiciliary care agency is: three star excellent service

A quality rating is our assessment of how well a care home, agency or scheme is meeting the needs of the people who use it. We give a quality rating following a full assessment of the service. We call this a 'key' inspection.

Lead inspector:	Date:
Vivien Stephens	0 5 0 3 2 0 0 9

This is a report of an inspection where we looked at how well this agency is meeting the needs of people who use it. There is a summary of what we think this service does well, what they have improved on and, where it applies, what they need to do better. We use the national minimum standards to describe the outcomes that people should experience. National minimum standards are written by the Department of Health for each type of care service.

After the summary there is more detail about our findings. The following table explains what you will see under each outcome area.

Outcome area (for example User focussed services)

These are the outcomes that people using domiciliary care agencies should experience. They reflect the things that people have said are important to them:

This box tells you the outcomes that we will always inspect against when we do a key inspection.

This box tells you any additional outcomes that we may inspect against when we do a key inspection.

This is what people using this domiciliary care agency experience:

Judgement:

This box tells you our opinion of what we have looked at in this outcome area. We will say whether it is excellent, good, adequate or poor.

Evidence:

This box describes the information we used to come to our judgement.

Copies of the National Minimum Standards – Domiciliary Care Agencies 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 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

Our duty to regulate social care services is set out in the Care Standards Act 2000.

Reader Information

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Internet address	www.cqc.org.uk

Information about the agency

Name of agency:	Home Life Carers Limited
Address:	Cedar Court Unit 1 Lowman Way Tiverton Devon EX16 6GT
Telephone number:	01884233700
Fax number:	01884233701
Email address:	enquiries@homelifecarers.co.uk
Provider web address:	

Name of registered provider(s):	Home Life Carers Limited								
Conditions of registration:									
Date of last inspection									
Brief description of the agency	<p>The agency offers personal care support, shopping, meal preparation, and domestic tasks to people who live in and around the Tiverton area. They also provide a night sitting or night sleeping service. It operates from an easily accessible office in Tiverton.</p> <p>Charges at the time of this inspection range from £8.60 per half hour on weekdays to £13.25 for per hour at weekends. Charges for night services range from £70 per night for the sleeping-in service to £110 per night for awake service.</p> <p>Mileage is charged at 28p per mile.</p>								

Summary

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

The quality rating for this agency is:

three star excellent service

Our judgement for each outcome:



How we did our inspection:

Several weeks before this inspection took place we asked the agency to complete an Annual Quality Assurance Assessment (AQAA). The returned form gave us detailed and useful information about every aspect of the management of the agency. We also sent some survey forms to the agency and asked them to distribute these to a random selection of care workers and to people who receive a care service. We received 15 completed forms from people who receive a care service and 6 from care workers.

This inspection took place over two days. On the first day we visited four people who receive a care service. During these visits we also met two care workers. On the second day of this inspection we visited the agency office where we talked to the manager and the person who acts as the Responsible Individual of the company.

We looked at the records the agency is required to keep, including assessment and care plan files, records of medicines administered, staff recruitment, training and employment records, complaints and compliments, and office administration procedures.

What the agency does well:

This agency has demonstrated that they take a pride in providing a professional and reliable service that runs smoothly. They have efficient and effective systems in place and this has resulted in satisfied customers and a positive and contented staff group.

All of the people who completed a survey form before this inspection, and each of the four people we visited, told us they were happy with the service. Some of the comments we received included, "I am enormously impressed with the caring organisation and efficiency of the service." (The agency) "makes sure family are happy with carers provided. Always on time." "In my opinion they are excellent." "Someone always at the end of the phone if you wish to speak and always listen." "It is a friendly, professional and well managed agency."

People have been given well written and professional information about the service when they made an initial enquiry about the service. The agency had followed very careful assessment procedures by gathering relevant information about the person's care needs and using this to draw up a clear and comprehensive care plan. The plans have always been put in place before the service has begun. In some instances the manager has carried out the first care visit to ensure the care plan is correct and provided sufficient information for the care plans. We found they included good information about how the person wanted each task performed, and demonstrated that the agency has recognised the importance of respecting people's privacy and dignity.

We met some people with significant health problems and complex care needs and found that the care workers had been well trained and they worked closely with health professionals to ensure the person received a very high standard of care.

The agency had good systems in place to reduce the risk of people suffering harm or abuse. The staff have received training during their induction to help them recognise the signs of abuse, and what to do if they have any concerns.

There are good systems in place to plan and monitor the training needs of the care staff team. Many of the care staff have already achieved a professional qualification and more staff are working towards a qualification.

The agency operates from modern, well equipped and accessible office accommodation. They have good computer and telephone systems in place and people can contact them easily.

They have good systems in place to gather information about the quality of the service and have used this to plan any improvements necessary.

What has improved since the last inspection?

No requirements or recommendations were made at the last inspection. At that time they only had 8 clients, but since then the service has expanded considerably.

The agency identified a number of areas where they have made improvements since the last inspection, including better documentation for new Service Users, and

improved administrative systems for pay and recruitment processes. They have appointed a Care Coordinator to support the Registered Manager. They have recently purchased additional training material on Challenging Behaviour.

What they could do better:

While medicine administration systems were generally very good a few improvements would provide even greater safety. These include better risk assessments and instructions on the administration of creams and lotions. The guidance should also include information about the storage and disposal of creams. They should seek guidance from a pharmacist where they have been asked to administer medicines that are not in the original packaging from the pharmacy.

The agency generally took care when recruiting staff to carry out pre-recruitment checks, but at times new staff had begun work before they had written evidence of least two satisfactory references. The induction process has been thorough, and in most instances the written references have been received before new staff have worked unsupervised. However, the agency should tighten up this process to ensure they have clear evidence to show that new staff are entirely suitable before they begin work.

They should improve their record of complaints and grumbles so that they can provide evidence to show that all concerns and issues have been taken seriously and acted upon.

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 set out 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 our findings

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User focussed services

These are the outcomes that people using domiciliary care agencies should experience. They reflect the things that people have said are important to them:

People are confident that the agency can support them. This is because there is an accurate needs assessment, which they, or someone close to them, have been involved in. This tells the agency all about them and the support they need and is carried out before they are offered a personal domiciliary care service.

People and their relatives can decide whether the agency can meet their support needs. This is because they, or someone close to them, have got full, clear, accurate and up to date information about the agency. People know that the agency can meet their needs because staff have the skills and experience to give them the care they need. If they decide to use the agency they know about their rights and responsibilities because there is an easy to understand contract or statement of terms and conditions between them and the agency that includes how much they will pay and what the agency provides for their money. People are confident that the agency handles information about them appropriately. This is because the agency follows their policies and procedures. They get a consistent, and flexible care service from reliable and dependable staff members.

This is what people using this domiciliary care agency experience:

Judgement:

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

People can be confident that their needs will be fully assessed before the service begins and the agency will agree with them the level of service they can provide. The agency provides a reliable and consistent service to meet each person's needs

Evidence:

The agency told us in their Annual Quality Assurance Assessment (AQAA) that, before any care is provided, the registered manager will always complete a service user needs assessment, risk assessment, and, if appropriate, a COSSH form.

We visited four people who receive a service from this agency to find out if their assessment procedures were thorough. We heard how the manager had visited them

Evidence:

before the service began and we saw a care plan file in each home that included a thorough initial assessment. This information had been used to draw up and agree a care plan. We heard that the manager sometimes carried out the first care visit. In this way she could be certain that she had a clear understanding of the person's needs and that the information gathered in the assessment was correct.

The care workers we talked to told us that a care plan was always in place in each person's home whenever they visited. This meant that they always had very good information before they began to provide care for a new client. We also heard that new care workers have always been introduced personally to a new client

The agency had a brochure that has been given out to every person who made an enquiry. The document has been professionally printed and provided useful information about the services they provide. In addition each person has been given a file containing their care plan, recording documents for the care workers to complete, and further information about the agency and how it operates, including the complaints procedure and some key policies. Each person had a file in their home.

The agency told us that they always provide new people who pay their fees directly with a clear and detailed contract. (Those people whose care is funded by a local authority will receive a contract from the authority, not from the agency.)

The people who completed a survey form before this inspection, and those people we visited, told us that the service has been reliable and the care workers could be relied on to visit at the right time, or as near as possible to the expected time. Each person had been sent a weekly timetable that showed the days and times of each visit planned and the name of the care workers who would be visiting the following week. People told us that the care workers were usually on time, and on the rare occasions they were likely to be more than 15 minutes late they have always received a telephone call to let them know what is happening. We also saw that people had very small teams of care workers who visited them on a regular basis. This meant that people knew each of their care workers well and built up a good relationship based on trust and mutual understanding.

We heard that some clients had received help from other agencies in the past and had changed to Home Life Carers because they had been unhappy with the service provided by the previous agency. Comments included "Having used one previously this one is a vast improvement. Staff caring and teamwork excellent."

Personal care

These are the outcomes that people using domiciliary care agencies should experience. They reflect the things that people have said are important to them:

Each person is treated as an individual and the agency is responsive to his or her race, culture, religion, age, disability, gender and sexual orientation. Their right to privacy is respected and the support they get from workers is given in a way that maintains their dignity. If people take medicine, they manage it themselves if they can. If people cannot manage their medicine, the agency supports them with it in a safe way.

People's needs and goals are met. The agency has a plan of care that the person, or someone close to them, has been involved in making. They are able to make decisions about their life, with support if they need it, as the staff promote their rights, choices and independence.

This is what people using this domiciliary care agency experience:

Judgement:

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

Care plans have been kept up to date and contain good information so that care workers know how each person wants to be assisted.

Any person who needs assistance with medication can be confident the care workers will follow safe procedures and will be trained and competent.

Evidence:

We looked at three care plans files in people's homes. We also looked at four care plans held in the agency office (including those we had already seen in people's homes). We talked to each person about their care plans and we found the plans were accurate, up to date, and gave the right amount of information to give the care workers an easy to read list of the tasks each person wanted assistance with. The level of detail was just right, and provided the care workers with enough detail about each task to be carried out so that they knew exactly how the person wanted the task to be performed. There were clear explanations about how the care workers should respect the person's privacy and dignity when carrying out personal care tasks.

Evidence:

The four people we visited in their homes praised the standard of care provided. They said they felt the care workers were experienced and well trained. We heard about care workers who people looked upon as a friend, and who had developed a close empathy and understanding of the person. We visited two people who have severe disabilities including sensory deprivations. We heard care staff interacting with one person in a professional, but also friendly and relaxed manner and they were able to communicate clearly. Another person who was blind told us how their care worker helped with many daily tasks and understood clearly the difficulties and frustrations they experienced due to their blindness.

We saw evidence of good communication systems between care workers and health professionals that demonstrated that people with complex health care needs have received a high standard of care. Care staff have received training from health professionals on specific health care needs and specialised tasks.

We looked at the daily reports completed by care workers in the care plan files of the people we visited. We found that the reports provided good detail of the tasks carried out and the care provided and demonstrated that the care plans had been followed. We saw that the care plans have been reviewed and updated regularly by the manager.

Where the agency administered or assisted with medication we found that the agency had good procedures in place. The care workers have completed an administration record showing the name and dosage of each medication and the time and date the medication has been given. A medication policy was in place that had been purchased from a specialist company. We advised the agency to check that the policy was in line with current guidance provided by the Commission. The manager printed off the information from the Commission website during our visit and said she would look at this in the next few weeks.

Information provided by the agency during our visit showed that all staff have received training on the safe administration of medicines during their induction. This training appeared to be thorough and included a test to check on the staff members understanding and competence. We suggested that the agency should check to make sure the training meets with the standards advised by the national training agency known as Skills for Care.

We also talked about the procedures followed where people need help with the administration of creams and lotions. The care workers have recorded when this task has been carried out. While this demonstrated satisfactory care had been provided we discussed how further safeguards could be implemented by including this task in the

Evidence:

initial risk assessment, and by providing more detailed instructions in the care plan and the medicine recording forms.

The agency normally follows a safe procedure by insisting that care workers always administer medicines straight from the original pharmacists packaging. Where they have been unable to follow this we advised them to seek further professional guidance from the Commission's pharmacist in order to help them reach a satisfactory outcome.

Protection

These are the outcomes that people using domiciliary care agencies should experience. They reflect the things that people have said are important to them:

People using the agency are safeguarded. This is because the agency follows health and safety procedures, keeps records appropriately and ensures their staff follow policies and understand the importance of assessing risks. The agency safeguards people from abuse, neglect and self harm and takes action to follow up any allegations.

People are confident that their property and money will always be safe as the agency follows the right procedures. Their health and rights are safeguarded as the staff keep an accurate record in their home of all the support they give them.

This is what people using this domiciliary care agency experience:

Judgement:

People using this 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 has taken good measures to ensure that people are safeguarded from harm or abuse.

Evidence:

Care workers have received good induction training and regular updates on all health and safety related topics. The manager gave us a copy of their training provided to all care staff. It showed that care workers have received thorough induction training covering health and safety topics, record keeping and adult abuse. We also suggested that the agency considers sending staff on a training course provided by Devon Social Services.

The agency provided detailed information in their Annual Quality Assurance Assessment (AQAA) that showed they have carefully considered all aspects of protection including induction, risk assessment, handling service users money, adult abuse, and thorough documentation.

The agency has measures in place to protect people's valuables and property. They have good recording systems in place when care workers handle cash when carrying

Evidence:

out shopping and they also have policies and procedures in place covering this topic.

Managers and staff

These are the outcomes that people using domiciliary care agencies should experience. They reflect the things that people have said are important to them:

People have confidence in the staff at the agency because checks have been done to make sure that they are fit to do the job. Their needs are met and they are supported as the staff get relevant training, support and supervision from their managers.

People have safe and appropriate support because the staff providing their care are qualified and competent. They are confident that the staff that provide their support are clear about their roles and responsibilities.

This is what people using this domiciliary care agency experience:

Judgement:

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

People receiving a care service have been safeguarded from potential harm or abuse by good recruitment procedures, although procedures for obtaining satisfactory references before new care workers begin work should be improved.

Care workers are competent and well trained.

Evidence:

At the time of this inspection the agency employed 28 staff. We looked at the recruitment records of 4 staff recruited since the last inspection. We checked their employment files and found that they had obtained two satisfactory references and a protection of vulnerable adults (POVA 1st check) for new care workers, but the written references were not always in place before they began work. Criminal Records Bureau (CRB) checks are also requested but these have usually arrived after the staff had begun work.

In some instances we found that the agency had received a reference that did not give sufficient information. We talked to the manager and responsible individual about obtaining further information by following written references up by a telephone call. We heard that on many occasions they have telephoned former employers for verbal information, or to chase up written references, but these conversations have not been

Evidence:

recorded and therefore we could see sufficient evidence to show they had always obtained good evidence of the applicant's trustworthiness or character before they began work.

We heard that office-based induction normally lasts for one week. In this time the references have usually been received. The next stage of the induction is usually to shadow an experienced member of staff for one week.

We saw evidence of the induction training provided and found that it was thorough and met with nationally recognised standards.

The care workers we met or who completed a survey form before this inspection told us they were recruited in a thorough and professional manner. They also confirmed that they had received regular training.

At the time of this inspection 11 staff either held, or were in the process of completing a nationally recognised qualification in care known as NVQ's. 4 members of staff were about to begin this training.

We heard that regular staff meetings are held. Two staff meetings were planned for the week that this inspection took place.

The staff we met and those who completed a survey form were all satisfied with the way they had been recruited, trained and supported. Comments included "They give good training to give you confidence to do the work well. If you have any queries or problems they are always readily available to give advice and sort it out."

Organisation and running of the business

These are the outcomes that people using domiciliary care agencies should experience. They reflect the things that people have said are important to them:

People get consistent and planned support from the agency because the manager runs it appropriately with an open approach that makes them feel valued and respected.

People using the agency are safeguarded because it follows financial and accounting procedures, keeps record appropriately and ensures that their staff follow policies. If people have concerns about the agency they, or people close to them, know how to complain. Their concern is looked into and action taken to put things right.

This is what people using this domiciliary care agency experience:

Judgement:

People using this service experience **excellent** 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. The agency is modern and well equipped and has good systems in place to ensure all aspects of the service runs smoothly and efficiently.

The agency has consulted with people to check on the quality of the service, and can demonstrate that they have made every effort to listen to people and ensure the service is always of a very high standard.

Evidence:

Home Life Carers is based in a modern office block on an industrial site on the outskirts of Tiverton. There is car parking outside and level access to the office. The manager of the agency, Kathy Hooper is experienced and well qualified. She has a good management team in place to support her.

We heard many comments from both care workers and people who received a care service that gave evidence of the good management of the agency. The comments included, "I am very happy working at Home Life. The office staff are always helpful and friendly as are my colleagues. My schedule is always received on time. Home Life have enabled me to continue doing a job I love and I am proud to work for and be associated with a reputable agency. The needs of the client are always put first." "It is a friendly, professional and well managed agency." "I am enormously impressed with

Evidence:

the caring organisation and efficiency of the service."

The office is well equipped with adequate computers and telephones.

We looked at the way the agency organises the billing process. The computer system generates bills monthly based on the information provided by care workers weekly time sheets. We heard that the system is efficient and errors have been minimal.

The agency told us they have not received any complaints since the last inspection. However, one person told us they had a problem but were completely satisfied with the way the manager dealt with it. The manager said they had not treated the matter as a complaint as it was dealt with promptly. However, on reflection she agreed the matter should have been recorded and dealt with as a complaint. They have maintained a record of all compliments they have received (there were a large number of these).

The agency has sent out survey forms to the people who receive their service. We saw the responses they had received in the last year and saw that these were positive and useful.

Are there any outstanding requirements from the last inspection?

Yes

No

Outstanding statutory requirements

These are requirements that were set at the previous inspection, but have still not been met. They say what the registered person had to do to meet the Care Standards Act 2000, Domiciliary Care Agencies Regulations 2002 and the National Minimum Standards.

No.	Standard	Regulation	Requirement	Timescale for action
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Requirements and recommendations from this inspection:

Immediate requirements:

These are immediate requirements that were set on the day we visited this domiciliary care agency. The registered person had to meet these within 48 hours.

No.	Standard	Regulation	Requirement	Timescale for action
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Statutory requirements

These requirements set out what the registered person must do to meet the Care Standards Act 2000, Domiciliary Care Agencies Regulations 2002 and the National Minimum Standards. The registered person(s) must do this within the timescales we have set.

No.	Standard	Regulation	Requirement	Timescale for action
1	17	12	<p>At least two satisfactory references must be obtained in addition to a Criminal Record Bureau (CRB) and Protection of Vulnerable Adults (POVA 1st) check before new staff are confirmed in post. Any doubts about the quality of written information in the references should be followed up by a telephone call and a record of the conversation should be made.</p> <p>This is to provide evidence that the prospective member of staff is of good character and suitable for the post.</p>	31/03/2009

Recommendations

These recommendations are taken from the best practice described in the National Minimum Standards and the registered person(s) should consider them as a way of improving their service.

No.	Refer to Standard	Good Practice Recommendations
1	10	<p>Where the agency provides assistance with creams or lotions this task should be covered by a risk assessment in the first instance, and staff should be given clear information on how, where, when and why the creams should be administered and how the condition should be monitored. The guidance should also include information about the storage and disposal of creams.</p> <p>The agency should seek guidance from a pharmacist where they have been asked to administer medicines that are not in the original packaging from the pharmacy.</p>
2	26	<p>The agency should consider what issues may constitute a complaint, and how these should be recorded. The agency should keep a record of all issues, including those that may be considered minor, in order to demonstrate that all issues have been listened to and addressed.</p>

Helpline:

Telephone: 03000 616161 or

Textphone: or

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