



*Making Social Care  
Better for People*

# inspection report

## DOMICILIARY CARE AGENCY

### **HICA Homecare (DCA)**

**Unit 3, Park View Court  
St Paul`s Road  
ShIPLEY  
West Yorkshire  
BD18 3DZ**

*Lead Inspector*  
Linda Trenouth

*Key Unannounced Inspection*  
26th September 2007      10:00

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
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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](http://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](http://www.tso.co.uk/bookshop)

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# SERVICE INFORMATION

<b>Name of service</b>	HICA Homecare (DCA)
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<b>Provider Web address</b>	
<b>Name of registered provider(s)/company (if applicable)</b>	Humberside Independent Care Association Limited
<b>Name of registered manager (if applicable)</b>	Miss Yvonne Catharine Glossop
<b>Type of registration</b>	Domiciliary Care Agencies

# **SERVICE INFORMATION**

## **Conditions of registration:**

1. Miss Y G Glossop completes NVQ Manager Award by February 2008.

**Date of last inspection**      21st November 2006

## **Brief Description of the Service:**

H.I.C.A. Homecare is based in the Shipley area and provides home care services throughout Bradford. H.I.C.A. is a not for profit organisation.

The office is open Monday to Friday between the hours of 7am and 6 pm and Saturday 7am -3pm calls are then re routed through to the call centre. This information is also clearly detailed in the Service User Guide.

If anyone wishes to visit the office they are able to do so during office hours and the premises are accessible to people of all physical abilities.

The agency provides care to people aged over 18 with a wide range of needs, which includes people who are elderly, have dementia, physical disabilities, or whose health in some way is impaired.

The fee for personal care is £10.00 per hour.

# SUMMARY

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

The organisation has been waiting over a year for confirmation from Bradford local authority to agree new contracts. This has been very difficult for the organisation in terms of maintaining and motivating a workforce, no one can be sure their jobs will continue if the contracting is not successful. This has created a stressful environment for everyone.

I carried out this unannounced inspection over two days, meeting with the registered manager and some staff. I also looked at all the information we had received about the service since the last inspection.

Time was spent talking to three people who receive care in their own homes.

I examined a number of documents including policies and procedures, care plans, assessments and staff files.

Comment cards were sent to people who use the service, care staff and health and social care professionals linked to the service. The outcomes of these are included in this report.

The manager completed a self-assessment document, which identifies where the agency considers they meet the National Minimum Standards. The information provided has also been used as evidence in the body of the report.

I would like to thank everyone who returned their questionnaires and the people who agreed to be interviewed and gave me permission to visit them in their own homes. Thank you also to the manager, and all the staff for their help and support with the inspection process.

The requirements and recommendations outstanding from the last inspection were checked and the progress made has been reported under the relevant standard in this report.

## **What the service does well:**

People who use the service and their relatives feel that the service is reliable and consistent. They also felt that staff treat them with respect and make sure their dignity is protected.

The agency provides good information to people who may want to use their service, this is important to make sure that people are aware of everything the service can provide and if they can meet their needs.

In response to the needs of some people using the service some language translations and large print versions of the information have been completed and the agency has translated the information to an audiotape.

The assessments and care plans are good and provide sufficient detail to make sure that all care needs are safely met.

Staff are safely recruited and complete induction training. They are registered on the NVQ (National Vocational Qualification) training within 6 months of their employment. Staff are supported with their learning needs and encouraged to attend specialised training, this is to make sure that staff working for the agency are competent and safe to care.

Complaints are dealt with promptly and effectively by the agency. The manager investigates all complaints and responds in writing. This is important so that people know they are listened to and their opinion matters.

### **What has improved since the last inspection?**

The staff records are well maintained and clearly show safe recruitment and support of new staff, including those staff who begin caring for people before their full criminal record check is complete.

The agency has shown a commitment to making sure staff are well trained in all aspects of their work.

### **What they could do better:**

The medication policy must be reviewed and staff must have appropriate training to make sure they carry out their work safely. Staff must also be clearly guided when they are "prompting" medication. This is to make sure that people are not put at any unnecessary risk.

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](mailto:enquiries@csci.gsi.gov.uk) or by contacting your local CSCI office. The summary of this inspection report can be made available in other formats on request.

# **DETAILS OF INSPECTOR FINDINGS**

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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, 2, 4 and 5.

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

People are given good information about what the service can provide to help them decide if the service can meet their needs.

Individual assessments are completed to make sure that the agency can fully meet their needs.

### EVIDENCE:

People who use the service told me that they have a copy of the service user guide and contact information for the agency. They are also aware of the

complaints procedure. The service user guide outlines what the service will provide so that people can decide if the agency can meet their needs.

People who paid for their service privately are told of the fee rate and confirmed that they had a written contract. This is important to make sure that they are aware of their individual rights whilst using the service.

The service completes its own assessments alongside the local authority assessment. This is to make sure that that the agency can be sure it is able to meet all individual need. People said that they had been involved with their assessments and any changes to their care plan, this is important to ensure the individual is always involved in any decisions or changes to their care.

From comment cards returned and talking to people who use the service it was evident that staff are clear about confidentiality and do not share personal information with others.

## 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 and 10.

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

Care plans are good and make sure that staff are provided with sufficient detail and information to provide care in the way in which the individual prefers.

People's individual privacy and dignity is respected by the staff.

The agency's medication policy and lack of medication training for staff do not support or adequately protect people who use the service.

### **EVIDENCE:**

The care plans provide good detail and instruction about how staff are expected to care for individual needs. The people I spoke to say that staff read the care plan, they also said that the staff asked them how they wanted their care to be carried out and if they were comfortable and happy with how their

care was going. People also said the supervisors from the agency review their care plans with them.

People I spoke to said they are happy that the staff manage their personal care well. They are confident that staff are sensitive and their privacy and dignity is protected.

Comment cards from people who use the service and health care professionals were happy that dignity was maintained. One health care professional felt that the service respected privacy and stated,

“They are very professional in the way that they are trained to do this”

It was clear from speaking to the manager that the staff continue to administer medication. The staff also assist in the “locking away” of medication or “hiding medication,” from vulnerable service users. The present medication policy only guides staff to, “prompt” medication, this is being reviewed.

The staff must be sufficiently trained to safely administer medication and there must be medication records held to reflect this. Where staff only prompt people to take their medication, clear instruction must be recorded in the care plan. This is to make sure that people are not put at any unnecessary risk.

The agency makes sure that staff have a good understanding of the needs of all the people they are caring for and has made sure that relevant staff have training in awareness of Huntington’s disease. From a comment card received from a care advisor of the Huntington’s Disease Society it was stated that the agency and staff often seek advice from them to improve the lives of people they care for,

“The staff are truly interested in their work and what they do”

People who use the service also commented that they felt they were well cared for by the staff,

“The carers in Keighley are a credit to HICA I could not wish for better people they cheer me up often when I feel a bit low”

“The team that covers my dad are good at their job friendly and approachable”

“All the staff are really helpful and understanding”

## 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 the service experience **good** outcomes in this area. We have made this judgment using a range of evidence, including a visit to the service.

Health and safety arrangements are satisfactory making sure that everyone is kept safe.

All staff have completed adult abuse awareness training to further protect vulnerable people from neglect or abuse.

### **EVIDENCE:**

The agency completes risk assessments for their staff and for the people who use the service. These are regularly updated and make sure that people are kept safe from harm.

The self-assessment form that the manager completed stated that all the health and safety procedures are in place and available to all staff.

People I spoke to are confident that the agency takes health and safety seriously. One person told me that he had a detailed risk assessment about his lifting equipment, to guide staff how to care for him safely. He felt reassured that the staff are well trained and he felt comfortable and confident when staff are caring for him.

Training records confirmed that staff have health and safety training at induction and updates afterwards, this makes sure that they are able to do their jobs safely and with confidence.

Staff also have training in understanding how they can protect vulnerable people and their responsibilities to make sure people are protected from abuse.

Staff comment cards confirm that they felt they had good training to help them do their work.

## **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 20 and 21.

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

Improved recruitment practices make sure that staff are suitable and safe to work with vulnerable people.

Staff receive good training to make sure they can meet everyone's needs.

All staff are properly supported and supervised.

### **EVIDENCE:**

The staff complete an application form and attend an interview, references are sought, and all staff are employed initially with a P.O.V.A (Protection of Vulnerable Adults) check. They are then monitored by the agency until their full CRB (Criminal Records Bureau) is completed and returned. This makes sure the staff are well supported and monitored and the people they care for are adequately protected.

Staff said that they have good induction training, which includes shadowing another experienced carer until they feel confident. Induction training and "shadowing" of the worker is undertaken in the first weeks of employment. The induction training is comprehensive and covers all aspects of health and safety, principles of care and adult protection.

Staff have access to further training and recent training has included training in Dementia, Parkinsons, Huntington's disease and stroke awareness.

There is also an expectation that they will achieve a (National Vocational Qualification) NVQ at level 2 or above. The agency is committed to ensuring that it will meet the NVQ training targets set for April 2008 to make sure staff have the knowledge and confidence to care for everyone well.

Comment cards from staff stated they are well supported and have supervision with their supervisor. Staff records confirmed that staff have regular support and team meetings are held regularly. One staff comment card said,

"We are very well supported with all aspects of the job"

The registered manager is presently undertaking the NVQ level 4 in management and hopes to achieve this by the end of 2007. The comments confirmed that people felt the agency was well managed.

Comment card from one health care profession said,

"The management seems very well organised, the care staff work as a team"

## 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 the service experience **good** outcomes in this area. We have made this judgment using a range of evidence, including a visit to the service

People receive a well-managed service making sure that their care is consistent and reliable.

People were confident that they are listened to and that their opinion matters to the agency.

### EVIDENCE:

The agency has a clear management structure in place to ensure that the service is delivered effectively and is well managed.

People I spoke to said their service was very reliable and they had never been let down. One person said that the staff had come out to him late in the night when he became ill and he was very impressed with them. People confirmed that staff were flexible if illness or unexpected needs occurred.

Everyone I spoke to and the comment cards that were returned were clear that they had found the care staff responsive to their needs and if they needed to contact the office they were dealt with promptly. They also said that they felt listened to and their concerns were taken seriously.

One relative has recently written to the agency expressing her satisfaction and regard for the staff and the good care her relative has received.

Managers and staff show a positive approach to complaints, they are open to recommendations and not defensive about concerns, suggestions, and complaints.

Complaints are reviewed and are acted upon within the agreed timescales. The manager documents any concerns and records details of the investigations and what action she has taken. This is important so that people know their concerns will be taken seriously and well managed.

Information provided by the agency showed that 10 complaints had been received in the last 12 months 8 of which were upheld and 2 which were not. There were no complaints received by the CSCI.

The manager and supervisors also regularly review the care that people are receiving and the agency seeks the opinions of people who use and work at the agency every year with an annual survey. The results of this are made into a report. This is important to make sure that people have a say in how the agency is run.

# 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

<b>User Focused Services</b>	
<b>Standard No</b>	<b>Score</b>
<b>1</b>	3
<b>2</b>	3
<b>3</b>	X
<b>4</b>	3
<b>5</b>	3
<b>6</b>	X

<b>Managers and Staff</b>	
<b>Standard No</b>	<b>Score</b>
<b>17</b>	3
<b>18</b>	3
<b>19</b>	X
<b>20</b>	2
<b>21</b>	3

<b>Personal Care</b>	
<b>Standard No</b>	<b>Score</b>
<b>7</b>	3
<b>8</b>	3
<b>9</b>	X
<b>10</b>	2

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

<b>Protection</b>	
<b>Standard No</b>	<b>Score</b>
<b>11</b>	3
<b>12</b>	3
<b>13</b>	X
<b>14</b>	3
<b>15</b>	X
<b>16</b>	X

Yes

Are there any outstanding requirements from the last inspection?

### 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
1.	DO10	14	The staff must be trained in the administration of medication and the procedure must reflect current practice. <b>Previous timescale 1/03/07 not met.</b>	30/11/07

### 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	DO20	The agency should make sure that 50% of The staff are qualified to NVQ level 2 and above.

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