



Making Social Care
Better for People

Inspecting for better lives

Key inspection report

Domiciliary care agencies

Name:	Carewatch (Bromley & West Kent)
Address:	1 Roberts Mews High Street Orpington Kent BR6 0JP

The quality rating for this domiciliary care agency is: two star good 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:
David Halliwell	0 4 0 2 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.csci.org.uk

Information about the agency

Name of agency:	Carewatch (Bromley & West Kent)
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Provider web address:	

Name of registered provider(s):	Day to Day Care Ltd t/a Carewatch (Bromley & West Kent)							
Conditions of registration:								
Date of last inspection	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Brief description of the agency	Carewatch Bromley is a domiciliary care agency situated just off Orpington High Street, Kent. The office is easily accessible for staff and to service users. Carewatch provides a domiciliary and respite care service to enable individuals to live in their own homes with support where ever feasible and preferable. The agency provides personal care and help with domestic duties such as housework, shopping and general assistance with every day tasks.							

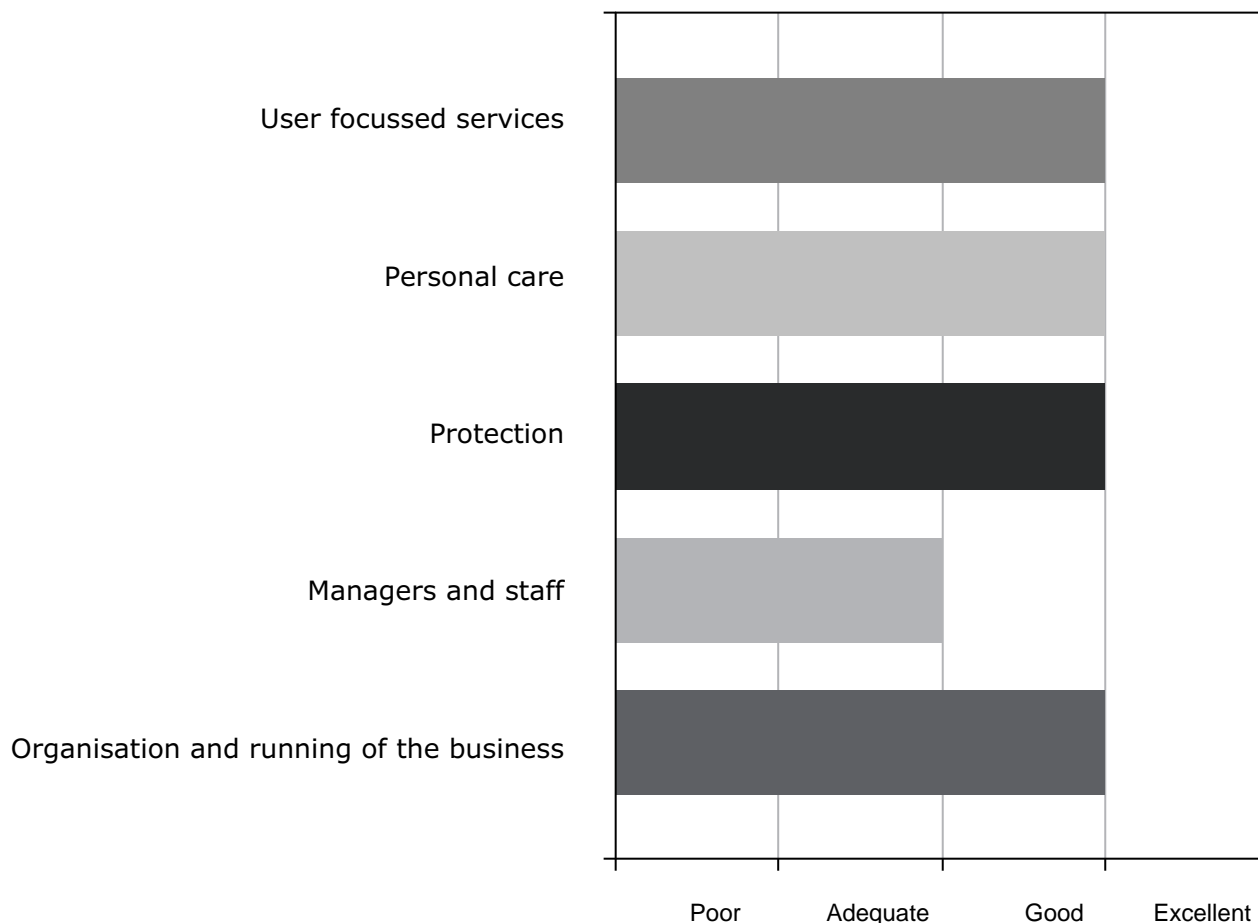
Summary

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

The quality rating for this agency is:

two star good service

Our judgement for each outcome:



How we did our inspection:

The stars quality rating for this service is good. This means that people who use these services experience good quality outcomes. They said that they like to be called service users.

No enforcement activity has occurred since the last inspection.

This was an unannounced inspection visit and was carried out over 2 days. The Inspection covered all the key standards in the Domiciliary Care Agencies National Minimum Standards.

The inspection involved a review of all the agencies records and a formal interview with

the Manager and 3 staff. Discussions were had with 6 service users. 7 staff files were inspected as were 8 service users files and the policies and procedures manual for the agency.

3 requirements have been made as a result of this inspection and 3 recommendations have been made. Feedback on the requirements and the recommendation was given verbally to the Director and to the Manager at the end of the inspection visit.

The Director, the Manager and members of the staff team were very helpful and they are to be thanked for their assistance over the course of this inspection visit.

The agencies Registration Certificate with the Commission for Social Care Inspection was seen displayed appropriately in the main office.

There have not been any changes in the ownership since the last inspection, but a new manager of the services has been recruited.

What the agency does well:

All the staff at Carewatch Bromley work well together as a team. There is a high level of commitment by staff to delivering a good quality service that is friendly and effectively meets the needs of the service users. Service users have reported that the staff are friendly and supportive and that they listen to what the service user has to say and deliver the service in the way that they want it to be done.

What has improved since the last inspection?

Since the last inspection a new Manager has been recruited and is in the process of refreshing all the operational areas of this domiciliary care service.

Service user documentation has been re designed to improve its usefulness.

More care staff have received essential training.

Recruitment activity has been improved to ensure there are sufficient levels of staff with appropriate experience and skills.

The Medication Policy has been revised and appropriate staff training given.

Care Supervisors and Care Co ordinators have achieved their NVQ level 3 awards.

What they could do better:

Specific areas for improvement and further development identified in this report areas follows: The Manager must ensure that staff contracts are signed by staff and proof that staff have completed their induction training is held on their staff files

The Manager must ensure that all care staff receive the basic and essential training and including National Vocational Qualifications to level 2.

Individual supervision of staff should be carried out more regularly.

The Manager must review all staff CRB checks to ensure that they are renewed every 3 years and are agency specific.

The Manager must ensure that all service users care plans are reviewed regularly or as their needs change.

Key policies and procedures should be discussed with staff at team meetings and in individual supervision. Following this staff should be asked to sign to say that they have read and understood and had a chance to discuss the policies and procedures.

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.csci.org.uk. You can get

printed copies from enquiries@csci.gsi.gov.uk or by telephoning our order line –0870 240 7535.

Details of our findings

Contents

User focussed services (standards 1 - 6)

Personal care (standards 7 - 10)

Protection (standards 11 - 16)

Managers and staff (standards 17 - 21)

Organisation and running of the business (standards 22 - 27)

Outstanding statutory requirements

Requirements and recommendations from this inspection

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

Service users are given comprehensive information about the agencies services, also about the experience and qualifications of the agency staff and all this enables them to make an informed decision on whether the agency is able to meet their care needs. A flexible and responsive service is available for service users. The care needs of all service users are individually assessed before they are offered a domiciliary care service to meet their needs. The agency provides each service user with a contract so the information and service provided is properly formalised. Carewatch Bromley is fully prepared and able to meet individual needs and the service users are well informed about the service they are to receive from the agency.

Evidence:

Both the Statement of Purpose and the Service User Guide were reviewed at this inspection. Carewatch Bromley have a well defined Statement of Purpose and Service User Guide that covers all the necessary information areas specified in Schedules 1 and 5 of the National Minimum Standards for Domiciliary Care. They also provide sufficient information for prospective service users to make a choice about whether they would wish to use these domiciliary services. The completed Annual Quality Assurance Assessment completed by Carewatch says that the focus of the care and support provided by this agency is clearly outlined in our Statement of Purpose and Service User Guide.

8 service user files were inspected over the course of this inspection and we spoke with 6 service users to ascertain whether they had been individually assessed before they were offered a domiciliary care service. Comprehensive needs assessments were seen on each of the files inspected both from the referring Care Managers and also from the agency's staff. Care Plans created by Carewatch for the provision of a domiciliary service were seen by us to have been based on the needs assessments and were done so in conjunction with service users who were able to express their wishes and preferences. Those service users who we spoke to said that their needs had been appropriately identified and were being met in the care they receive. Care plans seen by us supported this statement.

Most of the care plans that we saw had been reviewed regularly at 6 month intervals however the Manager must ensure that all service users care plans are reviewed regularly or as their needs change. This is recommended.

At this inspection we saw that service users have in place on their files a service user contract that includes the details as set out in Standard 4.2 of the National Minimum Standards for domiciliary care. The Manager gave us a copy of the contract and told us that each service user also has their own copy of their contract on the care files kept and maintained in their own homes.

We found that these contracts contain all the required details, a signed copy had been placed on each of the service user files inspected.

The Manager told us that where ever possible service users are offered a choice of home carer if they express their wish for this. Staff who were interviewed said that they look at the care plan objectives in order to know what the service user needs help with and they said that they also always ask their service users if they need any other support on the day.

Service users interviewed by us said that their care workers provide a flexible,

Evidence:

consistent and reliable service for them. They indicated that if they have differing needs on any day their care workers will usually do their best to support them as requested. We interviewed 3 staff as well as the Manager during the course of this inspection and it is clear from what staff said that staff do provide continuity in their care provision to service users.

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

Service users can be assured and confident that their needs, wishes and preferences and personal goals will be recorded in their care plans and form the central focus of the care they receive. They may also be assured that the agency's policies and procedures on medication and health related activities will protect them and assist them in maintaining responsibility to self medicate where-ever possible.

Evidence:

In each of the service user files inspected there was an up to date service user plan or care plan, that had been compiled in conjunction with the service user who was able to state their wishes and preferences and these also appear in the plans. Most of the plans had been reviewed together with the service users who had signed their agreement to them. Next review dates had also been identified and were placed on the reviews. We were told by service users that copies of care plans and reviews are on their information files that they have in their homes.

Interviews held with staff assured us that they are aware of the need to uphold the privacy, dignity, wishes and preferences of the service users that they support in

Evidence:

relation to personal and domestic care, handling personal possessions and finances and in entering and leaving the service users home. Staff made it clear that they respect these standards and evidenced that they are committed to upholding them when working with service users. Service users told us that they felt that staff do respect their rights in these areas.

We looked at the agencies policies and procedures manual that includes a clear written policy and procedure for medication and health related activities.

The Agency has in place a sound and methodical system for supporting service users who need help with their medication. The 3 care staff who were interviewed at this inspection made it clear that they were aware of the agency's policy and procedures for medication and they told us the correct procedures as to how to assist their service users with medication when required. They said that they had been on the training.

The Manager told us that all staff receive training for assisting service users with their medication and that the induction training that all staff receive before they start working also includes the medication policies and procedures of this agency.

Where assistance is provided to service users it is identified in the care plan. Both the Manager and the staff that we spoke to said that they encourage service users to be as independent as possible.

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.

Service users can be assured that the agency has in place health and safety measures that ensure the security and the safety and well being of both staff and tenants alike. These measures also reduce the risk of accidents happening. Service users are protected from abuse by the Agency's good working practices and procedures. Their health, rights and best interests are safeguarded by the records that the agency maintains.

Evidence:

Training offered through the induction package means that the Agency's responsibilities in this area are being met. This standard is mainly focussed on ensuring that the agency ensures compliance with relevant legislation relating to the care of people living in their own homes. The Manager explained that this training helps to ensure that the agency is compliant with this Standard and that care workers are able to work with people in their own homes safely. The induction training includes the following elements: Food hygiene, Health & Safety Accidents RIDDOR COSHH Fire awareness and Fire equipment. Infection control, People handling, Lifting and handling. POVA awareness procedures.

Evidence:

The Manager explained that every member of staff is issued with a staff handbook and that the handbooks contain all the essential information that a care worker will need in their working life with the agency. Policies and procedures are included in the handbook and staff have to sign to say that they have received the handbook. A copy of the handbook was supplied to us and we could see that it contains all the stated information as described. Staff interviewed confirmed that they have received a staff handbook. It is recommended that key policies and procedures are discussed with staff at team meetings and in individual supervision. Following this staff should be asked to sign to say that they have read and understood and had a chance to discuss the policies and procedures.

The Manager explained that risk assessments are carried out for all service users. These risk assessments assess the risks for service users and for care workers who support them. Care plans are adjusted in line with any risks that are identified.

These risk assessments were seen on the service user files inspected and could be seen to be reviewed regularly or as the needs of the service users change. The owners support the agency in developing policies and procedures, in reviewing them and seeking expert help where this is needed.

Service users are protected from abuse by a range of policies and procedures that interlink with the LB Bromley's policy on protecting vulnerable adults; the principles of care that the Manager enforces and by the regular training of staff. The local procedures for reporting allegations of abuse were available for inspection in the agency and staff were seen to be aware of those procedures. No allegations of abuse have been drawn to the attention of the CSCI since the registration of this service. Staff recruitment includes checking criminal records [CRB] and the Protection of Vulnerable Adults Act [POVA] list. The safety of service users is protected by the agency's protocols for entering the service users homes, agreeing the arrangements for access in advance and what action to take if access is denied or not possible in unexpected circumstances.

Daily records are kept in each of the service users homes on their care files, with a copy also kept on the service users files in the agency's office. These records were seen on the 8 service user files inspected and were seen to be factual and were signed and dated by the care worker. This means that the health, rights and best interests of the service users are safeguarded by maintaining these records and keeping a record of key events and activities that the care worker undertakes in the service users home.

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.

Service users can be assured that the agency's policies and procedures for the recruitment and selection of staff ensure their well being and protects their health and security. Service users will be able to be confident when the requirements and recommendations made in this report have been met that staff are appropriately trained, supervised and regularly appraised so that their needs may best be met.

Evidence:

We reviewed 7 staffing files as a part of this inspection and also undertook interviews with 3 care staff as well as having in depth discussions with the Manager.

The examination of the staffing files and subsequent interviews with the Manager and staff indicated that generally there is a safe and methodical recruitment process in place. This includes equal opportunities and anti-discriminatory practice. Police checks (CRBs) are undertaken for staff before they take up employment. It is recommended here that the Manager reviews all staff CRB checks to ensure that they are renewed every 3 years and are agency specific.

References and other checks such as proof of identity and qualifications are made and were seen on the staffing files inspected. It is required however that the Manager ensures that staff contracts are signed by staff and proof that staff have completed

Evidence:

their induction training is held on their staff files.

All staff are given a copy of the General Social Care Council's [GSCC] Code of Practice and are required to sign for the receipt of these.

The Manager told us that there is an induction programme for new staff. The Manager also ensures that any new staff to the service are assisted to know and understand the policies and procedures that the agency has in place. A staff handbook is given to each new member of staff. Staff confirmed that they receive a staff handbook, which includes the aims, and objectives of the agency and that they do receive training and refresher training in all the key areas of their work.

Evidence seen on staff files of training offered to staff includes: Moving and Handling POVA Fire awareness Infection control Medication Health and safety 1st Aid Introduction to dementia Deaf Awareness Communication.

It is required that the Manager ensures that all care staff receive this basic and essential training and including National Vocational Qualifications to level 2. This is so that service users may be assured that all the staff are appropriately trained to meet their needs. Records seen on 7 staff files indicated that not all staff have received this training.

The Agency has a policy for staff supervision in the policies and procedures manual. Staff confirmed that they receive ongoing training; they said that they are supervised on an individual basis once every 6 months by a senior member of staff and they have regular staff team meetings. The Manager informed us that the Agency is starting to undertake annual job evaluations for each member of staff and evidence of this was seen on each of the staffing files inspected.

Staff confirmed with us that the supervision process usefully assists them in keeping on track with their work.

However it is recommended that individual supervision is carried out more regularly. Discussions should include work with service users, training needs and any other relevant issues such as discussion about the agency's policies and procedures. Supervision records held on staffing files should record in sufficient detail these areas of discussion, they should be dated, signed off by both the member of staff and the supervisor with a copy kept on the staffing file and a copy given to the staff member. By doing so it should improve the quality of supervision and support offered to staff.

Evidence:

Records of the agency's staff team meetings were seen at this inspection. They are now being convened on a regular basis with minutes taken and copied to all staff members. These meetings are being held for each of the 2 staff teams. This is seen as good practice since it enables all staff to keep up to date with information and issues to do with the agency.

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

Service users are confident that they receive a consistent and well-planned and managed service from Carewatch Bromley. The evidence seen by us at this inspection visit confirms that the rights and best interests of service users are being properly safeguarded by the agency's record keeping. Service users can also be confident that their complaints and concerns will be listened to and dealt with appropriately.

Evidence:

The Carewatch Bromley Domiciliary Care Agency is run from centrally located offices in Orpington on the ground floor of the building and is easily accessible for service users and staff. There is a management and staffing structure in place with clear lines of accountability that ensures staff know and understand their roles and functions and who they are responsible to for their work. The Manager kindly allowed us to use an office to undertake the inspection. The office is properly equipped and the ratio between management and staff is appropriate.

We are able to confirm that the agency does have in place all the records set out in Standard 24.1. Evidence was provided by the Manager that all the appropriate records are being held in these offices. Records for accident reporting, incidents of abuse, complaints and compliments were also shown to us by the Manager. On inspection

Evidence:

they were all found to be being used appropriately.

We saw a clear and properly structured complaints procedure that enables service users and other people to make a complaint or compliment. We were impressed to find that there is on each service users information file, information about how to make a complaint and that each service user spoken to was aware of how and what to do if they needed to. A proper record book is in place that is used to record any complaints made.

This all means that service users and their representatives can be confident that their complaints will be listened to, taken seriously and acted upon.

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	15	The Manager must ensure that staff contracts are signed by staff and proof that staff have completed their induction training is held on their staff files In order to meet the NMS.	01/03/2009
2	19	15	The Manager must ensure that all care staff receive the basic and essential training and including National Vocational Qualifications to level 2. In order to meet the NMS.	01/08/2009
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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	2	The Manager must ensure that all service users care plans are reviewed regularly or as their needs change.
2	11	It is recommended that key policies and procedures are discussed with staff at team meetings and in individual supervision. Following this staff should be asked to sign to say that they have read and understood and had a chance to discuss the policies and procedures.
3	17	The Manager must review all staff CRB checks to ensure that they are renewed every 3 years and are agency specific.

4 21 Individual supervision of staff should be carried out

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