



*Making Social Care
Better for People*

inspection report

DOMICILIARY CARE AGENCY

Medihome

**268 Bath Road
Slough
Berks
SL1 4DX**

Lead Inspector
Kerry Kingston

Announced Inspection
23rd April 2007 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	Medihome
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Telephone number	01753 725 272
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Provider Web address	
Name of registered provider(s)/company (if applicable)	Medihome Ltd
Name of registered manager (if applicable)	Mr Mark Lomax
Type of registration	Domiciliary Care Agencies

SERVICE INFORMATION

Conditions of registration:

Date of last inspection 5th May 2005

Brief Description of the Service:

Medihome Limited is a Domiciliary Care Agency, which operates alongside a Nurses Agency that offers an acute medical intervention service to service users, in their own home, who require either short, high input nursing care following a hospital admission for surgery or a treatment plan for other medical conditions. The aim is to reduce patients' stays in hospitals to help them achieve a quicker recovery or to prevent the need for a hospital admission.

The service operates from business premises situated in the central Slough area. The agency is expanding and provides very specialized care packages in various localities.

The fees vary, depending on the intensity and complexity of the nursing and care package but they are from approximately £110 to £275 per day.

The care packages are, generally very time limited.

Most service users are National Health Service Patients although the agency is able to provide a service to private patients.

SUMMARY

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

This short notice announced visit to the service on 23rd April 2007 from 11.00am to 4.00 pm was to gather further evidence to inform the Key Inspection report.

Information for this report has been obtained from a pre-inspection questionnaire, completed and returned by the Registered manager, eight service user surveys, returned by them to the Commission for Social Care Inspection, discussion with three staff members and a visit to the Agencies' office.

Service user records, staff records and the Agencies' Policies and procedures were seen during the course of the visit.

The Agency is expanding its' business but is ensuring that the quality of care remains high, positive outcomes for service users remains the priority of the service.

What the service does well:

Medihome Limited has very good recruitment processes to make sure that it employs staff of a high quality.

Carers provide good quality personal care in service users' homes.

The agency try to make sure that all their staff and service users' are as safe as possible.

Staff are helped to look after the service users properly, by being provided with good documents that say what care people need and how it should be given.

The Agency make sure the staff get any training that they need to look after people in their care, even if they have special or complicated needs.

The Domiciliary Care Agency makes sure it regularly looks at the quality of care it is giving so that it can be operated in the best interests of the people being cared for.

What has improved since the last inspection?

The Agency is developing ways of making sure that complaints are included in their quality monitoring systems.

What they could do better:

All areas that need any attention are already being developed by the Agency. No requirements or recommendations have been made.

Please contact the provider for advice of actions taken in response to this inspection.

The report of this inspection is available from enquiries@csi.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):

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

The Agency has robust assessment processes, which ensure a high quality of care is provided to service users.

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

EVIDENCE:

The Domiciliary Care Agency works alongside the Nursing Agency to ensure a care plan that deals with all the service users needs is put in place. Health care assistants (five in a team of thirty five staff), who are employed by the

Domiciliary Care Agency deal with the personal and social care of service users, to support their nursing colleagues to deliver a complete package of care. There are, currently, no service users who receive only the Domiciliary Care service.

The Nurse Team Managers undertake assessments in the hospital setting and complete a home nursing assessment, which includes social and personal care needs, to ensure the agency is able to meet all the patients' needs. A home environment assessment is undertaken, as necessary, when the care package begins in the service users home. The clarity of what the home nursing care plan consists of that is, how many visits by whom and when, is being improved.

Records for five service users were seen, the care plans included personal care needs, psychological / social support needs and risk assessments for all aspects of care, as necessary.

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):

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

Agency staff treat service users with respect, ensuring their privacy and dignity.

Medication is administered safely and the agency support people to return to their own home, as quickly as possible.

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

EVIDENCE:

Service user/patient surveys commented 'A reliable, professional wonderful group of nursing staff', 'The agency supports patients very well', 'No complaints at all', 'At all times they encouraged me and made me feel at ease', 'They are competent, friendly and reliable'.

Diversity issues are included in assessments for instance service users' who require same gender personal care are identified, this need/preference forms part of the care plan. A staff member said that if they have a patient with a special or complex need, staff are sent on training courses to ensure they are up-to-date with how to deal with that need, a training course of this sort had been completed on day of visit.

The medication administration policy clearly outlines Health Care Assistants responsibilities, accountabilities and safe procedures for handling medication. Medication charts seen were fully completed and retained by the agency. Service users' sign forms that give their consent to care including medication, information sharing and home treatment.

The policy on confidentiality is in the staff handbook, is part of induction process and a commitment to confidentiality is noted in the recruitment process.

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):

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

The agency promotes the health, safety and welfare of service users and ensures they are they are protected from abuse.

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

EVIDENCE:

Safe working practice risk assessments are completed as necessary, those seen in service users' files included lifting/handling and any environmental risks to staff or service users.

The Health and Safety policy is very comprehensive and includes protective clothing (supplied by agency), incident reporting, a risk management strategy, Protection of Vulnerable Adults, Infection control, Protection of patient information, nurses using their cars and mobile phones. Staff confirmed that the Agency is very aware of staff and service users' safety. Health and Safety items such as using mobile phones and the procedure for those working out of office hours were noted in staff meeting minutes and on the staff newsletter. The Agency complete an incident register to enable them to monitor any incidents that occur, it includes details of the incident/accident and the short and long term action taken. These are looked at by the risk management committee, formed as part of the risk management strategy, it monitors and audits all accidents/incidents. The Agency has adopted similar incident reporting systems as those used by the Health Trusts, so that it is able to judge its' performance in crucial areas such as infection control, incidents and falls directly against hospital care.

The risk management committee reports to the Clinical Governance committee, which looks at the performance of the agency with regard to all aspects of safety. A staff newsletter showed that Staff are invited to join the risk management and infection control sub groups.

The proprietor confirmed that there had been no 'safeguarding adults' information received or reported by the Agency. The Commission for Social Care Inspection has received no information with regard to safeguarding adults' issues.

The agency has detailed Protection of Vulnerable Adults policies and procedures. Some staff have completed the training and another training course is due. Currently the policies and procedures do not include detailed references to the Local Authorities' role in Safeguarding Adults, although a range of inter agency guidelines are available in the office. The Nurse director is considering the most effective method of liaising with, potentially large numbers of Local Authorities.

Staff were able to describe how they would deal with an incident they felt was abusive or compromised the safety of service users. Safeguarding of Adults and whistle blowing is included on induction programme and in the staff handbook, as are financial issues.

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):

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

The Agency has robust recruitment policies and procedures that ensure the safety of service users.

It recruits well qualified staff, provides training opportunities and offers good support to ensure staff are able to give the best care to service users.

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

EVIDENCE:

The recruitment policy clearly states that the Agency is an equal opportunities employer, interview notes and the diversity of the staff group supported this. The Nurse Director and a Nurse Team manager, the Nurse Director and the Registered Manager or a combination of the two conduct interviews. There was evidence that the agency takes appropriate action when its' robust recruitment

procedure identifies prospective or current staff who do not meet its' high standards.

Staff, who are successfully recruited have an induction day, complete an induction process and have three observation/supervision visits (one a month for the first three months) where they are observed performing their duties the senior nurse who is observing them, then comments on their skills, knowledge, performance, attitude and ability. Help and training is given (if necessary) and staffs' competence is judged. The observation is repeated at six monthly intervals to check that staff are maintaining their professional standards. Health Care assistants are offered the same supervision/appraisal as nurses, it was discussed with the Registered Manager that quarterly one to one supervisions were described in the Domiciliary Care Standards, he agreed that this would be reviewed.

All Health Care Assistants employed have a minimum of an N.V.Q.3 qualification.

The Agency offers good training opportunities. A Staff member described that if they have a patient with a special or complex nursing need, nurses are sent on training courses to ensure they are up-to-date with that particular procedure/s, a training course, of this nature, had been completed on the day of visit. The Agency work reciprocally with the two hospitals they have contracts with, hospital staff will attend Medihome training events (if there are spaces) and Medihome staff will attend the hospitals training events. One staff member who has been with the Agency for three months has received an induction, three observation/supervisions, mandatory training and one specialised training course.

Training records and training needs records are, currently being improved, the Nurse director is developing a training needs analysis and a 'spreadsheet' so it will be easier to see which staff have completed which training and when. Training certificates are held in the general training file.

Health Care Assistant responsibilities are clearly defined in their job description, including procedures they can undertake under supervision/alone or cannot undertake. The Nurse and Health Care Assistant work as a team although this may not always at the same times of day.

Practice issues and any performance difficulties are discussed at monthly team meetings, which act, in part as 'joint supervision' sessions as well as information sharing opportunities.

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):

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

The Agency has excellent management and administration systems in place to ensure it offers the highest quality of care to service users. It listens to and acts upon complaints and views of the service users.

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

EVIDENCE:

Office staff have specific roles, are knowledgeable and skilled in their area of work and work closely as a team, to support the functions of the Agency.

Service users records seen were of a good standard and completed as necessary.

The issues relating to a quickly expanding business are recognised and new management structures have been developed to ensure continuing quality. A

Nurse director has been appointed to ensure the Agency continues development programmes, these currently include training/care plans/induction and recruitment.

The Agency has a comprehensive Quality Assurance system, the results are shared with the trusts that it is contracted with. Questionnaires are given to every service user after treatment is finished, they mirror ones produced by the National Health Service for hospital patients but it has been developed to ask the relevant questions for the agency. The questionnaire has been changed and the number returned has dropped from approximately 80% to 50% but those that are returned are much more productive as the information given is much more useful for the monitoring of the performance of the Agency. The information received is collated monthly and used for 'ongoing' improvement and development. The monthly results are published in the staffs' newsletter and for discussion at monthly staff meetings.

The Agency has set up a Clinical Governance committee which looks at its' overall performance with regard to all aspects of safety, quality and care, it consists of three people external to the Agency who are well respected in their fields of medically related work and management within the Agency. The risk assessment and Infection control sub committees report to it.

Staff spoken to are proud of the Agency and the standard of care they deliver.

The Agency has a robust complaints policy and procedure it keeps records of all complaints, it has received one complaint during the last year, which was appropriately dealt with. The recording of the outcome could be made clearer. The Commission for Social Care Inspection has received no information with regard to complaints.

(The new address of the local office of the Commission for Social Care Inspection needs to be included in paperwork).

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	4
3	X
4	X
5	X
6	X

Managers and Staff	
Standard No	Score
17	4
18	X
19	4
20	X
21	3

Personal Care	
Standard No	Score
7	X
8	4
9	X
10	3

Organisation And Running Of The Business	
Standard No	Score
22	4
23	X
24	X
25	X
26	3
27	X

Protection	
Standard No	Score
11	4
12	4
13	X
14	3
15	X
16	X

NONE

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

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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