



*Making Social Care
Better for People*

inspection report

DOMICILIARY CARE AGENCY

KIDS - South Gloucestershire

**4a Old School House
Kingswood Foundation Estate
Britannia Road; Kingswood
Bristol
South Glos
BS15 8DB**

Lead Inspector
Paul Clark

Key Unannounced Inspection
23rd October 2006 09:30

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	KIDS - South Gloucestershire
Address	4a Old School House Kingswood Foundation Estate Britannia Road; Kingswood Bristol South Glos BS15 8DB
Telephone number	0117 9476111
Fax number	0117 9476126
Email address	
Provider Web address	
Name of registered provider(s)/company (if applicable)	KIDS
Name of registered manager (if applicable)	Ms Julia Hammond Mrs Helen Martell
Type of registration	Domiciliary Care Agencies

SERVICE INFORMATION

Conditions of registration:

Date of last inspection 26th January 2006

Brief Description of the Service:

KIDS South Gloucestershire is a Domiciliary Care Agency providing care for up to 50 disabled children aged between 0 and 18 during school terms and up to 70 during summer holidays. All children are identified and assessed to use these services by South Gloucestershire Social Services, Child Health and Disability (CHAD) team. KIDS services are free of charge.

KIDS is a national charity whose HQ is in London. It has been delivering services for disabled children for over 30 years. It has a Regional Office in Plymouth. It has been operating a Service Level Agreement with South Gloucestershire Council for the past 5 years.

SUMMARY

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

The inspection was carried out over two days and included visits to the agency's office where all managers, three inclusion workers and all administrative staff were interviewed and all statutory and information records were scrutinised; the local social services department where all managers and social workers placing children with the service were interviewed; a number of families homes who had children using the service were visited.

Questionnaire surveys were carried out to elicit the views of placing social workers, carers, young people and families using the service.

All comments received from young people and their families about the service were favourable.

The Inspection format uses the National Minimum Standards (NMS) for Domiciliary Care Agencies. However, because this is a service for children, the Inspector takes account of the 'Every Child Matters' service outcomes throughout the report.

What the service does well:

The service provides a valuable service which supports disabled children and their families by focusing on the inclusion and development of disabled young people. This philosophy underpins all of its work and is evident in all its working practices.

The service is professionally managed with good levels of communication between families, Carers and the management group.

Policy, procedural and recording systems are sound as are the care planning and reviewing systems.

What has improved since the last inspection?

The agency has addressed the gender/ race imbalance in its staffing provision and made it more representative of its service user group.

All information documents have been updated to include full information about the service and its regulatory body.

What they could do better:

The delay in staff expenses repayments is caused by the financial management arrangements of the national (not the local) office and this has the potential to have a negative impact on service provision if it continues into the long term and this should be addressed.

The agency needs to produce a formal annual review of the quality of its care.

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

The report of this inspection is available from enquiries@csci.gsi.gov.uk or by contacting your local CSCI office.

DETAILS OF INSPECTOR FINDINGS

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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 at least once during a 12 month period.

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

1-6

The quality rating for this service outcome is good.

The agency provides well written and comprehensive information documents which ensure that families are well aware of the service to be provided, these could be written in a user-friendly format. Needs of children and families using the service are well assessed and appropriately reviewed.

EVIDENCE:

The agency has an array of information documents which inform service users and their families about the agency's philosophy and the way that the service will be provided. These documents also advise service users and their families of the agencies Complaints Procedure.

A comprehensive 'Service User Guide' was seen to detail the range of service provided and the expectations of the carers (Called 'Inclusion Workers) and the families using the service. The document also contains a tear-off page with the

'Contract of the Service Provision'. This must be signed by the Agency, the Carer and the parents. It is recommended that a copy of the Service User Guide be produced in a user-friendly (possibly symbol) format. The Child Health and Disability (CHAD) team carry out the initial 'Assessment of Need' and the provision of a service is considered by the local authority's 'Short Term Panel'. A referral is then made to KIDS if a service is required.

KIDS provides three levels of service, 'Inclusion' where a young person is taken out to a leisure or activity pursuit by an Inclusion Worker for up to 2 hours per week for a maximum period of six months, the service being reviewed after three months; 'Support for families Under Pressure' which is a service intended to give parents a break from caring by an Inclusion Worker calling to the home for between 6-10 hours per week and this service is usually given for less than 6 months; 'Time for You' which is a long term, sitting service which is reviewed annually.

Service users and their families referred to the service are then assessed as follows:

A Service Manager of the agency carries out a home visit and conducts an assessment of the child and their families needs and creates a 'Service User Plan'. This is then discussed with the appointed Inclusion Worker who makes a visit to the family with the Service Manager to clarify the finer details of the service to be provided. The service attempts to ensure that there is consistency of carer with an identified child/family. All case records containing this information were seen to be kept under secure conditions to ensure their confidentiality.

Personal Care

The intended outcomes for Standard 7 – 10 are:

7. The care needs, wishes, preferences and personal goals for each individual service user are recorded in their personal service user plan, except for employment agencies solely introducing workers.
8. Service users feel that they are treated with respect and valued as a person, and their right to privacy is upheld.
9. Service users are assisted to make their own decisions and control their own lives and are supported in maintaining their independence.
10. The agency's policy and procedures on medication and health related activities protect service users and assists them to maintain responsibility for their own medication and to remain in their own home, even if they are unable to administer their medication themselves. In the case of standards 10.8 and 10.9, these do not apply to employment agencies solely introducing workers.

The Commission considers Standards 8 and 10 the key standards to be inspected at least once during a 12 month period.

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

7-10

The quality rating for this service outcome is excellent.
The agency promotes independence and social inclusion.
The service to be provided is well planned and reviewed.

EVIDENCE:

The Inspector carried out questionnaire surveys of all stakeholders and met with a number of Service users and their families in their homes and had individual interviews with a number of the agency carers.
The agency's underpinning philosophy (which is contained in all of their information documents) promotes the social inclusion and personal development of disabled children and from discussion with the above groups this was evident in all aspects of the care provided.
All care staff administering medication had received training from the Epilepsy Nurse or from nursing staff from local surgeries.

Protection

The intended outcomes for Standards 11 - 16 are:

- 11.** The health, safety and welfare of service users and care and support staff is promoted and protected, except for employment agencies solely introducing workers.
- 12.** The risk of accidents and harm happening to Service Users and staff in the provision of the personal care, is minimised, except for employment agencies solely introducing workers.
- 13.** The money and property of service users is protected at all times whilst providing the care service, except for employment agencies solely introducing workers.
- 14.** Service users are protected from abuse, neglect and self-harm, except for employment agencies solely introducing workers.
- 15.** Service users are protected and are safe in their home, except for employment agencies solely introducing workers.
- 16.** The health, rights and best interests of service users are safeguarded by maintaining a record of key events and activities undertaken in the home in relation to the provision of personal care, except for employment agencies solely introducing workers.

The Commission considers Standards 11, 12 and 14 the key standards to be inspected at least once during a 12 month period.

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

11-16

The quality rating for this service outcome is good.

The agency has systems in place which promote the health, safety and well being of service users and staff.

EVIDENCE:

A comprehensive number of policy and procedures documents were seen which relate to health and safety issues and which were in line with the requirements of Standard 11. All staff receive an induction pack which informs them of all of the agencies policies and procedures, this includes the agencies child protection policy and all staff receive training in child protection as part of their induction. The agency has a well formatted Accident Book and an incident record sheet is completed by the worker and added to the young person's file.

Inclusion Workers are given an information leaflet on the risks of blood bourn infection and asked to seek the advice of their GP about preventative inoculation.

All carers complete a timesheet after each visit which describes activities undertaken and events arising, this has to be signed by the families. There is also space for families to make comments on the standard of care provided. It was recommended at the last Inspection that the timesheet includes the advice that families may also telephone a Service Manager to discuss aspects of the care provision (rather than giving this information to the Carer directly) this has not been done and so remains a recommendation.

Managers and Staff

The intended outcomes for Standards 17 - 21 are:

- 17.** The well-being, health and security of services users is protected by the agency's policies and procedures on recruitment and selection of staff.
- 18.** Service users benefit from clarity of staff roles and responsibilities, except for employment agencies solely introducing workers.
- 19.** Service users know that staff are appropriately trained to meet their personal care needs, except for employment agencies solely introducing workers.
- 20.** The personal care of service users is provided by qualified and competent staff, except for employment agencies solely introducing workers.
- 21.** Service users know and benefit from having staff who are supervised and whose performance is appraised regularly, except for employment agencies solely introducing workers.

The Commission considers Standards 17, 19 and 21 the key standards to be inspected at least once during a 12 month period.

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

17-21

The quality rating for this service outcome is good. Recruitment practices are generally sound. Care is provided by a well managed and trained staff group.

EVIDENCE:

On application for employment all Carers have to provide proof of ID and 3 referees from whom written references are sought, one of which is followed up by a telephone call. They are also required to have a medical check. An enhanced Criminal Records Bureau check (which is updated every three years) must also be in place prior to appointment. All applicants are selected from a formal interview.

All carers are paid sessionally and work from home. Most of the Carers were working a maximum of 10 hours per week. All Carers spoken to said that they received ongoing informal support and supervision from a Service Manager who was always available should they be needed.

Job descriptions were seen to be in place.

Appointments are not subject to qualification (although 75% of the Carers have some form of professional qualification) but must have some child care experience. The Service Managers stated that all Carers will be registered as NVQ Level 2 in Child Care candidates. Two of the Carers are registered as NVQ Level 3 candidates.

The service has 22 active Carers (3 of whom are male) who provide care for between 45-50 children and families.

The service is currently managed by 2 Service Managers who are the joint Registered Managers, one of whom is a Registered Nurse and has a NVQ Level 4 in Management qualification, the other has the CMS in Management qualification and a teaching qualification. Both have many years experience of childcare.

Several of the carers spoken with again expressed a concern about the delay in receiving payment for expenses claims (sometimes there being a delay of 6 weeks). This has the potential to have an impact on service provision and it is recommended that this be addressed. The quality rating for this outcome group would have been higher had it not been necessary to make this recommendation. It should be noted that financial management is conducted by the national office.

Organisation and Running of the Business

The intended outcomes for Standards 22 – 27 are:

22. Service users receive a consistent, well managed and planned service.
23. The continuity of the service provided to service users is safeguarded by the accounting and financial procedures of the agency.
24. The rights and best interests of service users are safeguarded by the agency keeping accurate and up-to-date records.
25. The service user's rights, health, and best interests are safeguarded by robust policies and procedures which are consistently implemented and constantly monitored by the agency.
26. Service users and their relatives or representatives are confident that their complaints will be listened to, taken seriously and acted upon.
27. The service is run in the best interests of its service users.

The Commission considers Standards 22 and 26 the key standards to be inspected at least once during a 12 month period.

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

22-27

The quality rating for this outcome group is good.
The agency provides a well organised service supported by sound policies and procedures and financial viability.

EVIDENCE:

The agency has Corporate Liability Insurance cover, the policy document of which was publicly displayed.

The agency is a registered national charity and has had a service level agreement from South Gloucestershire Council for the past 4 years which provides budgetary support. The service is provided to families free of charge. The service was seen to have a comprehensive range of policies and procedures intended to safeguard service users. These include a 'Gifts and Gratuities' policy which Carers must be familiar with. The policy for handling cash on behalf of families is clearly spelt out (eg. If a Carer is given money by a parent to take a child to the cinema a receipt must be obtained). The agency conducts a questionnaire service of all families who have received a service and copies of this are sent to the Commissioning officer of South Gloucestershire Council.

The agency produces a six monthly Performance Monitoring Report for the CHAD Team Manager which measures outcomes for service users. However, it is recommended that the agency produce an annual review of the quality of care encompassing all of the elements of Standard 27.

The agency's Complaints Procedures are clearly written and known to all stakeholders (and a requirement has been made earlier in this Report with regard to the contact details of the CSCI).

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	2
2	3
3	3
4	3
5	3
6	3

Managers and Staff	
Standard No	Score
17	3
18	3
19	3
20	2
21	3

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

Organisation And Running Of The Business	
Standard No	Score
22	3
23	3
24	3
25	3
26	3
27	2

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

No

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
1.		It is recommended that the timesheet signed by families after each visit includes the advice that they may telephone the Service Manager directly to discuss any aspect of the care provided.
2.		It is recommended that a copy of the Service User Guide be produced in a user friendly (possibly symbol) format.
3		It is recommended that the agency produce an annual review of the quality of care encompassing all of the elements of Standard 27.
4		Several of the carers spoken with again expressed a concern about the delay in receiving payment for expenses claims (sometimes there being a delay of 6 weeks). This

		has the potential to have an impact on service provision and it is recommended that this be addressed.
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Commission for Social Care Inspection

Bristol North LO
300 Aztec West
Almondsbury
South Glos
BS32 4RG

National Enquiry Line: 0845 015 0120

Email: enquiries@csci.gsi.gov.uk

Web: www.csci.org.uk

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