



*Making Social Care  
Better for People*

# inspection report

**DOMICILIARY CARE AGENCY**

**ARC Community Care Limited**

**Parkside House  
7a Westby Street  
Lytham  
Lancashire  
FY8 5JF**

*Lead Inspector*  
Mrs Felicity Lacey

*Unannounced Inspection*  
9<sup>th</sup>-11<sup>th</sup> May 2007      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

<b>Reader Information</b>	
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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>	ARC Community Care Limited
<b>Address</b>	Parkside House 7a Westby Street Lytham Lancashire FY8 5JF
<b>Telephone number</b>	01253 794488
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<b>Provider Web address</b>	arccommunitycare.co.uk
<b>Name of registered provider(s)/company (if applicable)</b>	ARC Community Care Ltd
<b>Name of registered manager (if applicable)</b>	Joanne Eckersley
<b>Type of registration</b>	Domiciliary Care Agencies

# **SERVICE INFORMATION**

## **Conditions of registration:**

1. The agency may only provide care to the following category of service users:
  - \*Older People
  - \*People with Dementia
  - \*Adults with Mental Health Problems
  - \*Adults with Learning Disabilities
  - \*Adults with Sensory Impairment
  - \*Adults who are ill (other than terminal illness)
  - \*Adults with terminal illness
  - \*Adults who are recovering from illness

**Date of last inspection**      13th March 2006

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

ARC Community Care Ltd is a domiciliary agency, which provides personal care and additional services to people in their own homes. The agency provides services for adults with a range of needs. The agency has been established since 1997 and provides services to Lytham St Annes and the surrounding area. The agency is a preferred provider for the Local Authority, and also provides services on a private basis.

# SUMMARY

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

This inspection took place with short notice. It involved a visit to the office of ARC Community Care and visits to 3 people who use the services provided. The manager submitted a Pre Inspection Questionnaire and a Self-Assessment, these provided information to inform the inspection. Completed surveys were received from 16 people who use the service and from 7 staff members. A sample of care plans and records relating to people who use the service were looked at. A number of staff files were also looked at.

## What the service does well:

Comments from people who use the service and their relatives included:

'All the staff are polite and listen to what I say'

'I wouldn't be here without their help'

'(I feel the agency does) every thing well. No complaints at all.'

'Very satisfied with the agency for their care and support.'

'The agency provides a good and efficient service. The carers are always helpful and polite.'

'The home carers are kind, friendly and reliable. The office staff are always ready to help.'

'When I was in hospital I made sure that I could have ARC when I came out, because I know they are the best. I wouldn't have been happy with any one else.'

'In a recent crisis the carers were brilliant.'

Comments from staff who work for the agency included:

'Following the training I have received and the support that's always available, I feel confident I can complete my duties competently, however the company always encourage staff to strive for continual improvement.'

'The agency is good overall, it keeps all service users independent and with the independence the service users feel secure and safe.'

'They are an excellent firm to work for.'

The people who use the service benefit from staff having a good understanding of their needs. The initial assessment carried out by senior staff of the agency is thorough and detailed. The people who use the service felt that they were fully consulted and regularly involved in discussions about the support they received.

The people who use the services considered the staff to be polite and aware of the need to provide assistance in ways which promote privacy and dignity. The preferences and wishes of the individual were respected by staff.

The company provides excellent support for staff members, and encourages continued development of their skills through regular training. The people who use the service consider it to be a well managed service.

The agency conducts an annual survey and all people who use the service are encouraged to give their views. The results of the survey are summarised and areas for improvement identified.

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

The owners and manager of the service continue to make improvements. Recently the staff handbook has been reviewed to ensure that staff have up to date information. The complaints log has also been reviewed to ensure that any trends or patterns can be easily identified.

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

There were no requirements or recommendations made as a result of this inspection.

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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Personal Care (Standards 7-10)

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):

2, 6

Quality in this outcome area is excellent. The care needs assessment practices of the agency are thorough and this ensures that the expectations of people who use the service are understood and met. This judgement has been made using available evidence including a visit to this service.

### EVIDENCE:

The initial assessments, which form the bases of care plans, seen were detailed and contained much useful information. The people who use the service who were spoken with during this inspection felt that they were fully and regularly consulted about their personal support needs. Relatives and people who use the service confirmed that a thorough assessment was conducted before the service began. The manager or care supervisor undertakes the initial assessment, and time is taken in completing this to ensure that personal preferences and care needs are clearly understood. The care plan is agreed

with the person using the service. Staff confirmed that care plans are accurate and available. Each person who received the service has a copy of their care plan.

The people who use this service felt that the carers provided a flexible and reliable service. The agency monitors arrival and departure times of staff, through telephone monitoring. The people who use the service have clear guidelines about what to do should a carer not turn up, however this had not happened at any time in their experience. Relatives spoken with found the carers to be flexible and very helpful in fitting in with personal arrangements. Some people receive a number of different carers because of their particular requirements, however they found that the service was of a consistently good standard.

## 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, 10

Quality in this outcome area is excellent. Care plans are devised and delivered in a way, which meets the physical, health and emotional needs of the individual, and this promotes the welfare of the people who use the service. This judgement has been made using available evidence including a visit to this service.

### **EVIDENCE:**

The care plans were detailed and contained relevant risk assessment strategies. The care plans contained helpful guidance that promotes good practice, for example, ensuring that a person with dementia is told what is going to happen by carers as they carry out personal care tasks shows respect and understanding of the need to promote well being. Care plans are regularly reviewed and any amendments are communicated to the care supervisor, who ensures that the care plan is up dated.

All people who use this service spoken with and those who completed surveys felt that privacy and dignity was promoted. The staff are respectful of individual preferences and lifestyle choices. The staff handbook and training gives clear guidance of the standards expected from staff and emphasise the importance of respect.

The agency has a clearly written medication policy. This outlines the type of support that can be given with medication. All who administer medication have received training. Care plans accurately document any assistance required with medication. Staff have clear guidance on what to do in the case of an emergency. A relative said that a staff member had responded 'brilliantly' during a recent incident and had provided excellent support to the person who uses the service.

## 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, 14

Quality in this outcome area is good. The agency has sound health and safety policies which are consistently followed this ensures that the welfare and safety of people who use the service and staff are promoted. This judgement has been made using available evidence including a visit to this service.

### **EVIDENCE:**

ARC Community Care has extensive health and safety policies in place. These are also detailed in the staff handbook and reinforced during induction training. Risk assessments of the home of the person who uses the service are conducted at the time of the initial referral and are reviewed every 12 months, or as required. The risk assessment covers all aspects including the environment, pets and the equipment needed. The agency also ensures that advice about safety in the home is given, for example if a smoke alarm is not fitted, the risk assessment format prompts the staff to advise that this can be

arranged free of charge. The agency has safe working practices in place, including travelling to and from people's homes, carrying money and working at night. There is a 24 hour on call service which is available to all people who use the service and staff.

The company provides a rolling programme of Health and Safety, Moving and Handling and Basic Food Hygiene training. Good records are maintained to ensure that staff undertake refresher training. 92% of staff hold a Basic First Aid Certificate, 97% have completed Medication Administration training.

The procedures regarding the safeguarding of adults are contained in the staff handbook. This gives clear guidance and instruction of what to do if abuse of any kind is suspected. All staff receive training in Safeguarding procedures within 6 months of taking up employment with the agency and this is updated regularly.

## **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, 21

Quality in this outcome area is excellent. The agency has a robust recruitment procedure and this ensures the welfare of the people who use the service is safeguarded. The training and supervision provided for staff is extensive and this ensures that the staff are competent in their roles. This judgement has been made using available evidence including a visit to this service.

### **EVIDENCE:**

Staff files looked at showed consistent and sound recruitment practices. All staff had the required references and disclosure checks completed. All staff have a probationary period of 12 weeks. Staff have a job description and a contract. The staff handbook clearly sets out the expectations of the company including standards of conduct and terms of employment.

The agency has a well organised training programme in place, all new staff complete an induction workbook which ensures that the handbook has been read and understood. Staff then complete the Skills for Care induction pack.

There is an expectation that all staff will commence National Vocational Qualification training within 6 months of joining the company. Staff spoken with and who completed surveys felt that training was readily available and personal development promoted. Over 66% of staff have achieved a National Vocational Qualification in Care at level 2 or above.

All staff receive regular supervision, this is held at three monthly intervals and during the year one of these sessions includes a direct observation. Staff have the opportunity to discuss their professional development and work load at these meetings. All staff also complete an annual appraisal. There are area meetings held through out the year. The manager and care supervisor have training and experience in supervision skills and undertaking performance appraisals.

## **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, 26, 27

Quality in this outcome area is excellent. The people who use the service are regularly consulted about the care they receive and this ensures that any areas for improvement are identified. The quality assurance systems in place ensure that the service is run in the best interest of the people who use it. This judgement has been made using available evidence including a visit to this service.

### **EVIDENCE:**

The agency is located in an office in Lytham. There is ample space to allow for meetings. The premises are accessible. There is secure storage for information maintained at the office.

The agency has recently recruited a new manager, who is establishing herself well with the people who use the service and staff members. The owners are very involved in the day to day operation of the agency and are active in continually seeking ways to improve the services provided. Staff are employed in line with the demands of the agency and the number of people it supports. The current Investors in People assessment of the agency comments that the

agency benefits from an 'exceptionally high level of staff retention for this industry'.

All people spoken with and who completed surveys were aware of how to raise a concern. One relative said that any matter however small is always dealt with promptly. The contract that people who use services sign with the company contains details of the complaints policy and this is also in the Service User Guide. There is a record of complaints that shows the nature of the complaint and action taken to resolve the situation. People who use the service felt that any concern they may have would be taken seriously by the staff of the agency.

The quality assurance systems in place are detailed in the Service User Guide, and people are actively encouraged to give their views. The agency has an annual survey which has had a good response rate. This seeks the views of the people who use the service with regard to all aspects of the service. The outcome of this survey is sent out to people who use the service, and a range of comments made is also attached. This survey is also supplemented by contact by random checks by senior staff and telephone interviews.

# 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>	X
<b>2</b>	4
<b>3</b>	X
<b>4</b>	X
<b>5</b>	X
<b>6</b>	3

<b>Managers and Staff</b>	
<b>Standard No</b>	<b>Score</b>
<b>17</b>	3
<b>18</b>	X
<b>19</b>	4
<b>20</b>	4
<b>21</b>	3

<b>Personal Care</b>	
<b>Standard No</b>	<b>Score</b>
<b>7</b>	4
<b>8</b>	4
<b>9</b>	X
<b>10</b>	3

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

<b>Protection</b>	
<b>Standard No</b>	<b>Score</b>
<b>11</b>	3
<b>12</b>	4
<b>13</b>	X
<b>14</b>	3
<b>15</b>	X
<b>16</b>	X

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

## **Commission for Social Care Inspection**

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