



Making Social Care
Better for People

Inspecting for better lives

Key inspection report

Domiciliary care agencies

Name:	Basing Care Ltd
Address:	Brackenwood House Kimbell Road Basingstoke Hampshire RG22 4AT

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:
Peter McNeillie	1 4 0 1 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:	Basing Care Ltd
Address:	Kimbell Road Brackenwood House Basingstoke Hampshire RG22 4AT
Telephone number:	01256474008
Fax number:	01256474003
Email address:	
Provider web address:	

Name of registered provider(s):	Basing Care Ltd
Name of registered manager (if applicable)	
Paula Readings	
Conditions of registration:	
Date of last inspection	
Brief description of the agency	
Basing Care Ltd is an independent privately owned and managed domiciliary care agency currently providing care for local authority and privately funded older persons in their own homes in the Basingstoke area. The agency, which was first registered in 2005, operates from offices within easy travelling distance of Basingstoke town centre in premises with conference and training facilities in which confidential interviews can take place	

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:

This report was written after taking into consideration a number of sources of information and evidence including a site visit to the premises, previous reports, examining service users and staff records, the managers responses to a pre inspection Annual Quality Assurance Assessment. (A.Q.A.A.), responses by service users to the agencies quality assurance surveys and responses by staff, healthcare professionals and service users to a pre inspection CSCI quality assurance survey.

During this inspection, which took place on 12/01/2009 between the hours of 09.00am and 12.45pm, all of the designated key standards for domiciliary care were inspected.

As a result of this visit no requirements or recommendations have been made.

The results and findings contained in this report will determine the frequency and type of future inspections.

At the time of our visit charges started at thirteen pounds thirty five pence per hour Monday to Friday but were increased at weekends and bank holidays, charges being dependant on the amount of time and staff required to ensure assessed needs can be met.

What the agency does well:

The agency provides a good reliable service to users based on detailed pre service assessments by staff who are recruited using a robust recruitment and selection procedure that protects service users and a management team who have clear lines of responsibility.

What has improved since the last inspection?

No concerns were noted following our previous visit. The Summary of responses by service users to the agencies quality assessment survey indicated increased satisfaction of the service in all areas.

What they could do better:

No requirements or recommendations were made following this visit due to assurances given by the registered manager and work in progress to correct any deficiencies in the staff training programme.

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

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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.

The agency has a system of assessing and identifying the needs of service users which ensures their safety and assessed needs can be met.

Evidence:

A policy and procedure is in place that requires that a detailed assessment of need and risk on every service user prior to any service being started or agreed must be carried out.

To confirm this we viewed the records of four service users.

Evidence:

Records viewed, indicated assessments may a two part process. Part one, when the referral originates with the local authority would involve an initial assessment by a care manager and the second by a member of the agencies own management team. For privately funded clients there would be no care manager assessment.

Assessments, which are updated and monitored on a regular basis evaluated care needs and risks and any environmental factors present in the individual's own home that could have an affect on the quality and manner in which the service was delivered.

All included confirmation that the potential service user was involved in and consulted about the assessment this was also confirmed in the agencies own quality assessment surveys.

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.

The agency has a well-developed system of planning, reviewing and delivering care, which ensures assessed needs, are met in a private and dignified manner. Service users are protected by clear medication policies and procedures ensuring they are able to retain, administer and control their own medication.

Evidence:

To ensure compliance with the standards, a sample of four service users records selected at random were inspected.

All included individual care plans based on assessments of need and risk as referred to in the previous section of this report. Plans viewed confirmed service users were consulted and participated in the production of the plan, which apart from day to day issues highlighted areas of special needs, any additional help and aids required and a comprehensive risk assessment. A copy of the plan is also available in the service users home.

Evidence:

The agency's medication policy clearly sets out the boundaries of the carer responsibility regarding service users' drugs and medication. However, staff training records failed to confirm all staff had received training in the recording and safe handling of medication in accordance with the agency's medication policy. This matter is referred to later in the staffing section of this report.

In their Annual Quality Assurance Assessment completed by the previous registered manager, the agency said they ensure that race, gender identity, disability, sexual orientation, age, religion, and belief are promoted and incorporated into what they do. They ensure that they gather as much information as they can in consultation with the service user to ensure all needs can be met, and policies and procedures have been updated to ensure they reflect diversity.

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.

The agency has policies and a procedure in place, which ensures service users are protected from abuse, and safeguards the health and safety of staff and service users through the implementation of safe working practices.

Evidence:

Records viewed demonstrated that a health and safety policy and procedure designed to protect both service users and carers was in place. The procedure acknowledges the need for carers to receive training in health and safety related matters (The staffing section of this report refers) as well as ensuring that a detailed assessment of all risks is carried out. Risk assessments viewed related to all relevant activities and conditions that carers might encounter e.g. environment, use of equipment and the use of protective clothing to eliminate the spread of infection.

A whistle blowing and adult protection policy and procedure was in place that works in tandem with that circulated by Hampshire County Council (as the lead agency for safeguarding) designed to protect and safeguard service users from abuse.

Evidence:

The manager and staff spoken with demonstrated they were of the procedure to follow should they be made aware of, witness or suspect the abuse of a service user irrespective from whom or where the abuse may come. Staff training records failed to confirm all staff had received training in recognising the signs of abuse and the procedure to follow when reporting any suspicions or allegations of abuse to service users. This matter is referred to later in this report.

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

The needs of service users are met by trained staff who are recruited and selected using a procedure designed to protect all users of the service.

Evidence:

To ensure the policies and procedure were being adhered to we viewed four staff recruitment, training and supervision records chosen at random.

All records confirmed that service users are protected by the implementation of an equal opportunities, robust staff recruitment and selection procedure. This involves, the completion of an application form, an interview, the signing of a rehabilitation of offender declaration and satisfactory Criminal Bureau Records (C.R.B.), Protection of Vulnerable Adults (P.O.V.A), medical, and reference and identity checks, prior to the commencement of employment.

On commencement of employment all staff are subject to an induction course which involves shadowing a colleague during calls to service users prior to going out by themselves. Following their induction all carers are subject to an initial twelve week probationary period. If successful all staff are then expected to undertake a National Vocational Qualification (N.V.Q.) training course to at least level two in care. At the

Evidence:

time of the inspection the manager informed us approximately 39.5% of staff had been trained to N.V.Q level two with a further 15.8% just completing their course. When the staff have completed their studies, we were informed a further 15.8% would be enrolled in a course.

Records seen indicated all training needs were identified through regular supervision both on the job and on a one to one basis.

Training covering subjects such as health and safety, protection of vulnerable adults, food hygiene, control of substances hazardous to health C.O.S.H.H., first aid, administration of medication, moving and handling, risk assessments, fire safety and infection control were topics that were available to staff.

We were shown a matrix covering staff training. This told us, whilst a lot of training had taken place there were gaps in the training individual staff had received, in particular, handling medication, health and safety, protection of vulnerable adults, infection control and dementia.

To overcome the training gaps, which had been previously recognised by the manager, we were shown work at present being carried out to produce a training calendar for the coming year. The manager gave us a verbal undertaking that any deficits in individual staffs training would be addressed as a matter of urgency.

Responses to a CSCI pre inspection satisfaction survey by staff indicated a high degree of satisfaction with the induction, training support and supervision they received.

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.

The agency operates from permanent premises with good access and facilities suitable for service users. Service users interests and rights are promoted by the agencies policies, procedures and practices, and they feel confident any concerns would be listened to and acted upon.

Evidence:

The agency operates from permanent premises equipped with up to date IT office equipment. The office is divided into areas, which can accommodate different activities, meetings, training and confidential discussions. The agency, which is on the second floor of a shared building, is difficult to access by disabled service users including wheelchair dependant people. To overcome this problem we were informed arrangements have been made to use a ground floor office on a temporary basis if required.

The complaints procedure, which is also included in the service users guide included information on how to contact the appropriate person in Hampshire County Council and The Commission for Social Care Inspection (C S C I). CSCI have received no complaints since the last inspection. Service users in their responses to the CSCI pre inspection survey all told us; they had been given a copy of the complaints procedure

Evidence:

and were aware of how to complain and felt comfortable in raising any concerns they had with the agencies management and confident any matters raised would be dealt with fairly and promptly.

We were shown the results of a very comprehensive service user satisfaction survey which indicated 38% of users rated the agency excellent, 38% very good, 18% good and 1% poor. All results were an improvement on the previous year.

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
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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
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Helpline:

Telephone: 0845 015 0120 or 0191 233 3323

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