



Making Social Care
Better for People

Inspecting for better lives

Key inspection report

Domiciliary care agencies

Name:	Newcare (Devon) Ltd [Exeter]
Address:	Newcare Devon Ltd. [Exeter] 356 Pinhoe Road Whipton Exeter Devon EX4 8AJ

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:
Anita Sutcliffe	1 1 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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Information about the agency

Name of agency:	Newcare (Devon) Ltd [Exeter]
Address:	356 Pinhoe Road Newcare Devon Ltd. [Exeter] Whipton Exeter Devon EX4 8AJ
Telephone number:	01392460046
Fax number:	01392468808
Email address:	
Provider web address:	

Name of registered provider(s):	Newcare (Devon) Ltd
Conditions of registration:	
The Agency is a large agency employing three or more persons in the agency's office (including the registered owner and/or manager)	
The Agency provides a Domiciliary Care Service to adults aged 18 plus only	
Date of last inspection	<input type="text"/>
Brief description of the agency	
<p>Newcare Devon Ltd. (Exeter) currently provides support and care to about 250 people in their own homes who may be older, have a disability or mental illness and are living in Exeter or the surrounding area.</p> <p>The local offices are based in a parade of shops in Whipton, Exeter, and there are facilities for individual meetings, and disabled access.</p> <p>We are told that currently fees for the service range from 14 pounds per hour to 130 pounds for waking night care. Mileage is not charged on top of this. Further information about fees may be obtained from the service.</p> <p>The registered manager is Sue Walker, who is supported in her role by a deputy manager and two fields managers.</p> <p>Information about the service, and this inspection report, will be made available on request from the office.</p>	

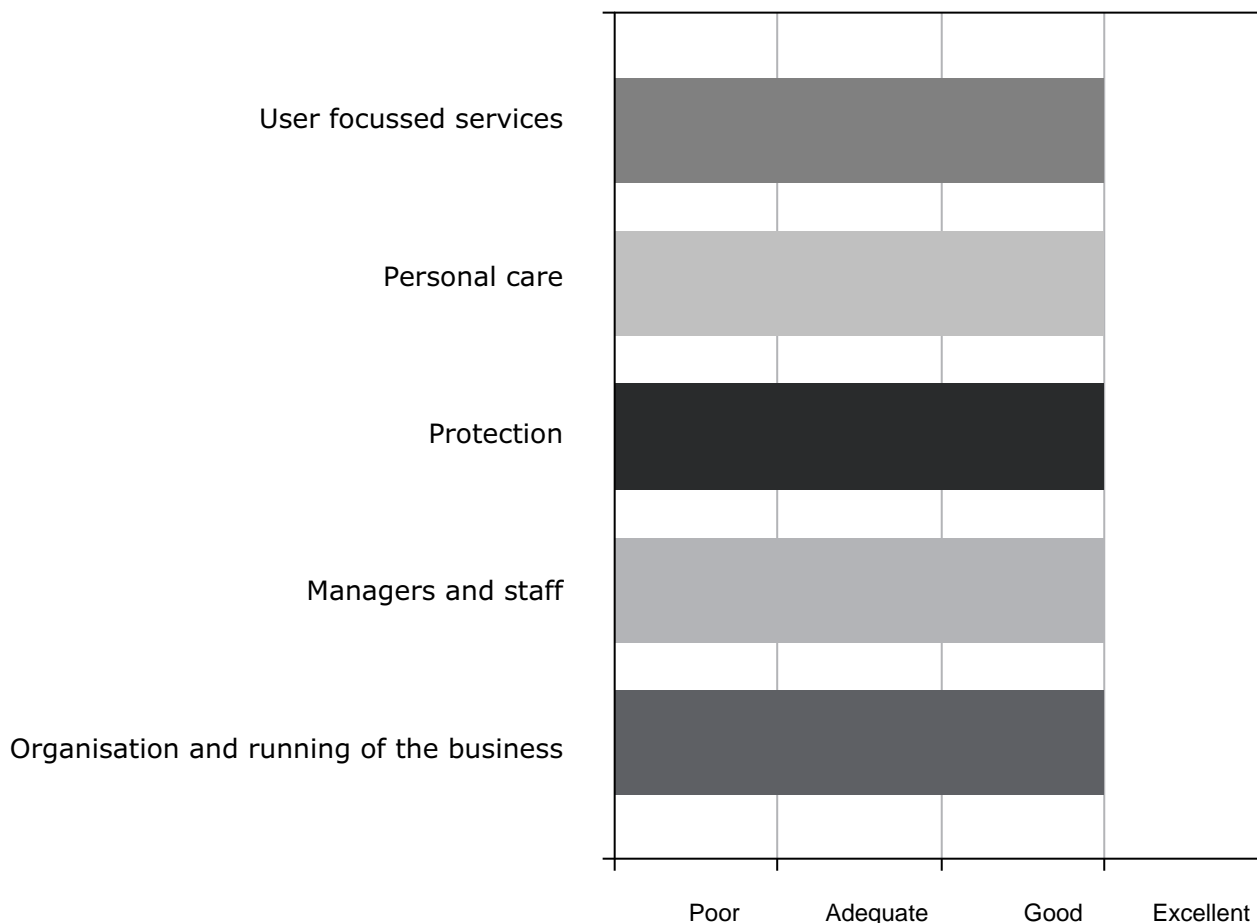
Summary

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:

Information about the agency has been collected towards this inspection since February 2007. In January 2008 we reviewed the service, which included surveying people's opinion.

This key inspection included one unannounced visit to the agency office and visits to two people with the home carer. Surveys were sent to thirty people who use the service. Twelve were returned.

The information sent to CSCI each year by the care provider gave us some numerical information about the service, such as how many people receive the service and how many staff are employed. It also provided information on how the agency works, and

where they identify areas for further improvement.

We talked to several home carers and all managers. We looked at records and some policies and procedures.

People who use the service may be described within this report as clients or service users.

What the agency does well:

People do not receive a service unless their needs are fully understood and can be met. Each person has a care plan which describes how staff are to meet those needs. The high standard of record keeping ensures that important and up to date information is available to those who need it.

Staff provide a competent service. They are well trained, well supervised and supported.

People, asked what the agency do best, said: "Carers are always cheerful and responsible. The agency usually keeps us informed about delays or problems, and quite often is able to help out at short notice." "Provide some carers who are very good." "Care is very good." "Make sure we get our daily attention." "All the work they do is very well done." "Staff I have dealt with have always been polite and helpful." "Everything in the care plan. No complaints."

Staff are knowledgeable in how to safeguard people from abuse and all aspects of health and safety.

Complaints are welcomed as a positive way to improve the service and the quality of the service is monitored. The manager has a good understanding of the business and strives to make improvements. The quality of the management is high.

What has improved since the last inspection?

There were no previous requirements or recommendations to meet.

What they could do better:

We made no requirements following this key inspection.

People, asked what the agency could improve, said:

"Letting me know if the home carers are going to be late."

"Communication with clients over serious delays."

"By providing a constant standard of carers."

"Allow carers sufficient time to get from client to client."

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.cqc.org.uk. You can get printed copies from enquiries@cqc.org.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.

People's needs are fully understood when a service is provided by the agency and they try to provide a responsive service.

Evidence:

Four people told us they were involved in the decision to use the agency and six people told us they were not. Many people have the service arranged and funded through social services.

We visited one person who is new to receiving the service. They told us they are very satisfied with the care received. There was an assessment of their needs and a plan describing the care which was to be delivered. They told us the home carer always

Evidence:

follows the plan but also asks if any other help is needed. We saw that risks have been considered as part of the assessment. The agency tell us that people's first visits are always undertaken by a 'Field Manager', who is a senior and experienced member of the agency.

One year ago two people told us through survey about poor time keeping and one person felt home carers were sometimes rushed because staff were very busy. Some people still feel time management is a problem: Four people tell us that the home carers always stay for the agreed length of time, five tell us they usually do and two people said they only sometimes do. People also say the service could be improved by: "Letting me now if the home carers are going to be late" and "Communication with clients over serious delays." The agency tell us they are considering a telephone monitoring system so they are better aware of where staff are. This would also help protect the staff when lone working.

People also told us how important they felt a continuity of care was, saying the service would be improved by: "providing a constant standard of carers" and "having the same carers if possible, as it is more comfortable to see the same faces, and they get to know what needs to be done for me." The manager told us that they try to provide only a core of home carers to each person and she described how they always try to match staff to the person, dependent on experience and skills.

We asked the manager how the agency managed to provide a safe service during recent very poor weather conditions. She showed us data which highlights the most vulnerable people in these circumstances.

The manager reports: '90% of the time calls are within +/- 30 mins of the preferred start time of their call, and with a minimal number of carer's service user's are more aware of the time their carer will arrive, which makes the service more reliable.'

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.

People's health care needs are met.

For the most part privacy and dignity are upheld.

Evidence:

People have a folder in their home that contains details of how to contact the agency, a care plan, assessments of risks, how to assist the person with mobilising, specific details of the care to be provided by the agency, any medication guidelines and a daily record of care given. Staff told the inspector that they refer to the information, especially if they do not know the person well. We saw that they write something at the end of each shift and are told they contact the manager if long term changes to the care plan are needed.

Ten of the eleven people we asked told us they have received a copy of how their care will be delivered and we saw care plans when we visited two people. Five people told us through survey that they always receive flexible care, which matches what they want, and five people told us they usually do. One person added: "All done very well".

Evidence:

The two people we visited also told us they received the care that they wanted it and we saw that the care plans described what staff are to do. The agency reports that they try to strike a balance between giving sufficient information for staff to carry out the care plan but not prescribing the tasks so as to remove people's choice and rights. The plans we saw did succeed in this.

We asked people if the service takes into account and respects the different needs people have. Three said always and five said usually. One added: "They do not always allow for my disability..."

We met one person who is assisted with their medicines. The information for staff was clear, the records complete and the home carer had ensured that a medicine, which was running low, was arranged before it ran out.

Seven people told us through survey that they feel their privacy and dignity is always respected and four people told us it usually is. Both of the people we visited told us they are treated with respect and very happy with the care they receive.

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.

People are protected by the agency policies and procedures.

Evidence:

The Staff Guide contains comprehensive policies and procedures relating to health and safety issues and detailed information about the principles of safe working. Training on health and safety is part of the induction course for new care staff. The agency told us that staff are encouraged to feed back any concerns they have in respect of risk to people who use the service or themselves and they plan to be more proactive in identifying issues and concerns. Most people told us through survey that they know about procedures the service have in place to ensure their safety, such as how to gain entrance to their home.

Staff receive regular training in health and safety and people told us that they have confidence in most home carers who visit. They also confirmed that home carers use protective clothing (gloves and aprons) when providing personal care, so that the likelihood of cross infection is reduced.

We saw that risks to the person, and staff visiting, are considered, so they can be

Evidence:

reduced or removed. Such risks might be environmental (for example, slippery steps) or regarding the person's abilities or lack of abilities. Staff also look at whether aids and equipment have been maintained and serviced. However, risks, identified for one person, had not been followed up as no steps had been taken to reduce them. This was discussed with the agency manager.

Three staff were able to tell us how to alert any concerns, which might be abuse. They said that the information is part of induction training when they are new. We saw that safeguarding concerns have been handled in people's best interest when staff had concerns for a vulnerable person receiving the service. Information given to staff about abuse is very detailed, describing types of abuse, what might lead to abuse and how to identify it. There have been no safeguarding alerts involving concerns about staff and the agency have acted promptly where staff misconduct was a concern.

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.

People receive a service from a well trained, knowledgeable and skilled staff, which is well supervised.

Evidence:

People told us: "Carers are always cheerful and responsible." "They provide some carers who are very good" and "All the work they do is very well done."

We looked at the recruitment records from two recently employed home carers. Checks, necessary to ensure staff are safe to work with vulnerable adults, are done before the home carer visits people's homes. Whilst the agency awaits final confirmation that there is no criminal record the home carer only works with a second, experienced home carer. The manager also checks each reference by telephone.

The agency places a high emphasis on training and a full-time post of training manager ensures a rolling programme of training will be provided. The day we visited staff were having moving and handling instruction at the office training room. The training manager told us how other aspects of care, such as core values, are introduced during the training. The agency 'Staff Assessment and Training Records', ensure that training is well planned. Training listed includes, food safety, medicines, first aid, infection control and for some, dementia care and challenging behaviour.

Evidence:

Staff are encouraged to undertake National Vocational Qualifications (NVQ) in care, which is an indicator of their competence. People we met were very happy with the abilities of most staff.

The agency tell us that the induction training for new staff always includes an initial six hours, then five, two hour sessions and then, at least, four shifts shadowing experienced home carers. Staff told us that, for the most part, this equips them enough for the work. Field managers visit staff whilst working to observe them first hand and the agency tell us that additional support and training are provided where necessary.

Staff told us that they receive supervision and appraisal of their work. They say that senior staff, and management, although available to discuss issues with, are often distracted by other activities in the office. The office was very busy when we were there.

The agency tell us that they recognise that their greatest asset is their staff and they continue to invest in their staff both in terms of pay and conditions and training and development opportunities.

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 is run in the best interests of people who use the service.

Evidence:

The agency tells us: "We operate from premises in the middle of the patch we cover and it is easily accessible for staff and clients."

The premises are on the ground floor and provide level access for people who wish to visit the office and are suitably secure. There is private space for interviews and a well equipped training area. The office is located in a small parade of shops on a main bus route from Exeter. The agency has suitable computer and telephone equipment to help ensure the smooth running of the business.

There is a registered manager, Mrs. Walker, who is supported by the agency provider, a deputy manager and two 'field managers'. Each were able to demonstrate their knowledge, skills and competence during the inspection.

Annual Quality Control surveys are undertaken by the agency and we were provided with a summary of the responses for 2008. People are asked to rate the service on a variety of topics including, the respect shown by staff, the reliability of the service and

Evidence:

the attitude of managers. We discussed with the manager the possible benefits from also surveying staff opinion.

The agency has a clear complaint procedure explaining what people should do if they are unhappy with the service they receive. All concerns received by the manager are logged on a separate form and the outcomes are recorded. Nine people told us through survey that they know how to make a complaint if they are not happy with the service but two people told us they did not. One told us that they had made a complaint, the manager replied immediately and things are now better. Complaints records were detailed and the manager and provider were clear that complaints were always a positive way to make improvements to the service.

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: 03000 616161 or

Textphone: or

Email: enquiries@cqc.org.uk

Web: www.cqc.org.uk

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