

Care and Social Services Inspectorate Wales

Care Standards Act 2000

**Inspection report
Domiciliary care agency**

Michael Phillips Care Agency Ltd

30-32 Kinmel Street
Rhyl
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Care and Social Services Inspectorate Wales

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Registered provider:	Michael Phillips Care Agency Ltd
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Category: e.g. Large agency (200 hours and over) Small agency (up to 199 hours) Supported housing	Agency>200hrs
Dates of this inspection episode from:	22 January 2010 to: 3 February 2010
Dates of other relevant contact since last report:	None
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Inspected by:	Stephen Watson
Lay assessor:	None
Other regions contributing to this report:	None

Introduction

This report has been compiled following an inspection of the service undertaken by the Care and Social Services Inspectorate for Wales (CSSIW) under the provisions of the Care Standards Act 2000 and associated Regulations.

The primary focus of the report is to comment on the quality of life and quality of care experienced by service users.

The report contains information on how we inspect and what we find. The report is divided into distinct parts mirroring the broad areas of the National Minimum Standards.

CSSIW's inspectors are authorised to enter and inspect regulated services at any time. Inspection enables CSSIW to satisfy itself that continued registration is justified. It also ensures compliance with:

- Care Standards Act 2000 and associated Regulations whilst taking into account the National Minimum Standards.
- The service's own statement of purpose.

At each inspection episode or period there are visit/s to the service during which CSSIW may adopt a range of different methods in its attempt to capture service users' and their relatives'/representatives' experiences. Such methods may for example include self-assessment, discussion groups, and the use of questionnaires. At any other time throughout the year visits may also be made to the service to investigate complaints and to respond to any changes in the service.

Readers must be aware that a CSSIW report is intended to reflect the findings of the inspector at a specific period in time. Readers should not conclude that the circumstances of the service will be the same at all times.

The registered person(s) is responsible for ensuring that the service operates in a way which complies with the regulations. CSSIW will comment in the general text of the inspection report on their compliance. For those Regulations which CSSIW believes to be key in bringing about change in the particular service, they will be separately and clearly identified in the requirement section.

As well as listing these key requirements from the current inspection, requirements made by CSSIW during the year, since the last inspection, which have been met and those which remain outstanding are included in this report. The reader should note that requirements made in last year's report which are not listed as outstanding have been appropriately complied with.

Where key requirements have been identified, the provider is required under Regulation 23B (Compliance Notification) to advise, in writing, the appropriate regional office of the completion of any action required by CSSIW.

The regulated service is also responsible for having in place a clear, effective and fair complaints procedure which promotes local resolution between the parties in a swift and satisfactory manner, wherever possible. The annual inspection report will include a summary of the numbers of complaints dealt with locally and their outcome.

CSSIW may also be involved in the investigation of a complaint. Where this is the case CSSIW makes publicly available a summary of that complaint. CSSIW will also include within the annual inspection report a summary of any matters it has been involved in together with any action taken by CSSIW.

Should you have concerns about anything arising from the inspector`s findings, you may discuss these with CSSIW or with the registered person.

Care and Social Services Inspectorate Wales is required to make reports on regulated services available to the public. The reports are public documents and will be available on the CSSIW web site: www.cssiw.org.uk

Overall view of the domiciliary care agency

The Michael Philips Care Agency Ltd is a Domiciliary Care Agency that provides care and support to older people to enable them to continue to make decisions and choices in regard to where they live and to maintain their independence.

The agency has continued to enjoy a good reputation for delivering high standards of care and as a result has grown in size.

The agency completed a full and thorough assessment of the service which required a low intensity inspection this year based on the information provided. An announced inspection took place on the 3rd February 2010 between the hours of 10am and 3pm. The inspector sent questionnaires to service users, relatives and staff prior to the visit. The returns are noted below. The statements and views are incorporated within this report.

Service users	4 returned	5 sent
Relatives	4 returned	5 sent
Staff	2 returned	5 sent

The agency gave a positive impression of efficiency and a clear understanding of each member of the office teams responsibilities. Key documents including the statement of purpose, service user guide and policies required to be retained on file were forwarded with the assessment document.

The inspector spoke to visiting staff member's office staff and the registered manager. Visits were not undertaken to service user homes, however positive feedback from the questionnaires and contact with the commissioners of the service did not raise any concerns.

The office is focussed on the development of staff and ensuring that service user needs are in accordance with the agreed care plans provided by the local authority or by the agency for self funding users.

The agency have kept a high profile in the area by utilising local radio media advertising for staff recruitment and also nomination for numerous care industry awards. The agency have also been awarded Investors in People which is a commendable achievement.

The agency is a forward moving business and has integrated IT software to ensure that quality is maintained and that all areas of the business are under constant quality assurance monitoring.

Records reviewed during the course of the inspection evidenced that the agency ensures that all staff receive a full induction and the required CRB checking procedures are carried out prior to their commencement in the field. Additional supervised practice by senior care staff, ensures that staff feel supported in their new role and able to take on their own caseload of clients.

User focused service**Inspector's findings:**

The agency provided a copy of the statement of purpose and the service user guide as part of the evidence for the self assessment of the service. A full set of core policies and procedures were also sent to the inspector.

The inspector was able to evidence that the agency had systems in place to ensure that known absences of service users were accounted for including, hospital admissions, respite admissions and cancelled calls by the service user. The inspector was able to observe how the agency managed an unexpected absence of a service user. The police were notified and the service user was found attending a day centre. The use of the notice board system enabled the staff to alert the relevant services in a timely manner.

The agency employs a senior care manager who is responsible for the daily management of care packages and reviews of care.

4 questionnaires returned from service users commended the service provided. A selection of the comments included "Excellent care of all carers" "If the carer is going to be late the agency will call me", "I find Michael Philips totally reliable, friendly and most helpful"

Requirements made since the last inspection report which have been met:

Action required	When completed	Regulation number

Requirements which remain outstanding:

Action required (previous outstanding requirements)	Original timescale for completion	Regulation number

New requirements from this inspection:

Action required	Timescale for completion	Regulation number

Good practice recommendations:

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Personal care**Inspector`s findings:**

The inspector case tracked 3 service user plans. These were well presented and user friendly. Evidence of risk assessments were clearly seen and safety check lists were in place. Contracts were viewed and reviews from both the funding authority and the agency were being undertaken.

The inspector was able to evidence that care plans were adjusted in accordance with any changes of care and sent to the service user or their representative for agreement to the changes made.

Questionnaires from service users and relatives confirmed that care plans at the home of the service user were updated "On each visit the record is written up as to what happened and my dad's wellbeing" and commendations for care staff included "I want to keep the carer that I have as she is the best one I have ever had"

The agency operates a team based system, which is led by three team leaders who are responsible for their own individual staff. They are supported by the senior care manager and a senior carer who has additional responsibility for staff supervision and risk assessment within service user's homes. Spot checks are carried out to ensure that the standards of care expected by the company are maintained and that staff feel supported in the community.

Requirements made since the last inspection report which have been met:

Action required	When completed	Regulation number

Requirements which remain outstanding from this inspection cycle:

Action required (previous outstanding requirements)	Original timescale for completion	Regulation number

New requirements from this inspection:

Action required	Timescale for completion	Regulation number

Good practice recommendations:

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Protection**Inspector`s findings:**

The agency has a robust complaints system in place. No complaints have been investigated by CSSIW since the last inspection. The agency has attended 4 strategy meetings under Protection of Vulnerable Adults since the last inspection. The inspector attended a strategy meeting on the morning of the inspection which resulted in the agency making changes to its policy with regard to carers assisting service users in banking transactions. The Inspector observed that the agency learnt from any recommendations made at the meeting.

The agency holds in house awareness training for carers in respect of adult protection. All office based staff who have on call responsibility, attend the local authority training based on the North Wales policies and procedures.

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New requirements from this inspection:

Action required	Timescale for completion	Regulation number

Good practice recommendations:

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Managers & staff

Inspector`s findings:

The registered manager has worked at the agency since 2001. The company have expanded the agency from 5 care staff to over 85 carers currently. The manager has been shortlisted for key awards in the health care community. The manager is supported by the senior care manager, human resources manager and the senior carer/ trainer. The inspector was able to observe that each member of the office based staff had clear lines of responsibility but were flexible and worked well in managing emergency situations. The inspector observed that staff visited the offices throughout the inspection and the open door policy allowed them to discuss issues freely with the manager or senior care staff.

The agency utilises a computer software system that enables staff to be tracked and ensure that lone worker policies are adhered to. Each carer is issued with a company mobile to ensure that they are able to keep in touch with the office. This was seen as good practice.

Training is a high priority of the agency. 90% of staff have completed their NVQ2 qualification in health and social care. In house training is provided for manual handling and hoist awareness, POVA, food hygiene, first aid and Dementia awareness. The agency was one of 3 national finalists for the employer category of the national training and modern apprenticeship awards Wales.

The inspector viewed 4 staff files and training records. Photographic evidence was required on two of the files which was addressed by the manager. Staff records were well presented and evidence of 3 monthly supervision was seen to be taking place.

The agency has a system of supervised visits in place for new staff which ensures that staff are fully prepared and receive practical training by senior care staff. Supervised practice can be extended if required, depending on the carers experience and confidence working on their own.

CRB records were viewed for new staff since the last inspection visit and the four staff chosen. These were found to be in accordance with the requirements of the regulations.

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Requirements which remain outstanding:

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New requirements from this inspection:

Action required	Timescale for completion	Regulation number

Good practice recommendations:

Organisation and running of the business

Inspector`s findings:

The agency is situated in Rhyl town centre. Due to the expansion of its services it relocated to the three storey premises it currently occupies. The reception area is open plan with offices at the rear. Care staff have individual pigeon holes for post and updated care plans of service users on their caseload. This system encourages staff to have regular contact with the office and ensure that staff are kept informed of new developments in the company.

The agency conducts itself in a professional manner continually reviewing methods of care provision and staff recruitment.

The Annual Quality Review Report 2009 included with the self assessment document demonstrated that 73% of service users rated the service to be excellent and that the agency is achieving all set targets.

The agency have been awarded the Investors in People award. Which is commended as good practice by the inspector. The assessor`s report noted that "The management team ensure that the business survives and flourishes ,whilst their staff have all the support they need to deliver quality care for service users"

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Good practice recommendations:

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