

CAERPHILLY COUNTY BOROUGH COUNCIL, DIRECTORATE OF SOCIAL SERVICES

COMMISSIONING TEAM

CONTRACT MONITORING REPORT

Name of Provider: Village Support Services

Date of Visit(s): 12.01.17

Visiting Officer: Andrew Davies, Contract Monitoring Officer
Emma Jenkins, Contract Monitoring Officer

Present: Kathryn Stanford, Registered Manager
Mary Stanford, Owner

1. Background

- 1.1 Village Support Services has been a registered provider of Domiciliary Care services within the County Borough of Caerphilly since 2005. The company was awarded a new domiciliary care contract in 2011, following a tender process.
- 1.2 The range of care and support tasks undertaken by Village Support include personal care (e.g. assistance in bathing, washing, dressing, medication, using the toilet), nutritional care (e.g. assistance with eating and drinking, food and drink preparation, and food and drink intake monitoring), mobility care (e.g. assistance with getting in and out of bed, general movement), and domestic care (e.g. assistance with cleaning, shopping, other housework, arranging appointments).
- 1.3 Dependent on the findings within the report, the provider will be given corrective and developmental actions to complete. Corrective actions are those which must be completed (as governed by the contract, legislation etc), and developmental actions are good practice recommendations.

2. Findings

2.1 Previous Corrective Actions

- 2.1.1 Village Support are to ensure that calls take place at a time agreed with the service users and in the correct order as shown on the rotas. (*National Minimum Standard 7.2*). (*CCBC Service Specification*).

Findings: From looking at the electronic call monitoring records it was noted that in general the care staff were arriving very close to the time shown on the rotas, and in the correct order. **Met.**

- 2.1.2 Village Support are to ensure that adequate travelling time is incorporated into rotas, with no calls overlapping, and at least five minutes between each call. (*Domiciliary Care Service Specification*)

Findings: There was an improvement in this area; from looking at a sample of four carers' rotas there were no occasions of calls overlapping, and at least five minutes travelling time was scheduled between all calls. **Met.**

- 2.1.3 Village Support are to ensure that staff stay for the full length of time allocated for each call, or to notify Social Services where calls are consistently taking less time than expected. (*Domiciliary Care Service Specification*).
Findings: From looking at call monitoring records, there appeared to be an improvement in this area. Although it was still noted that some calls were taking less than the allocated time, there were also some examples of calls taking longer. It was noted that there appeared to be a variation between staff, with some staying longer on average than others. **Partially met**
- 2.1.4 Village Support are to ensure that staff log in and out of all calls using the electronic call monitoring system (*CCBC Domiciliary Care Service Specification*).
Findings: The provider is using a different call monitoring system to the one in place at the time of the last visit, and the Manager advised that there are still some functions of the system that she is getting used to, however from looking at the monitoring records it appeared that the staff are logging in and out calls appropriately. **Met.**
- 2.1.5 Village Support are to ensure that all new staff commence a structured, formal induction and shadowing process (*National Minimum Standard 19.2*).
Findings: The induction process has been reviewed. Staff attend an induction day when they are given information about the role of a care worker, and following this they are given an induction pack to be completed. The induction packs were not seen on the staff files, and the Manager advised that many staff have these at home to work through. The shadowing process was discussed, and the Manager advised that staff do shadow calls with a senior member of staff, however this is not documented. The Manager agreed to include this in the induction booklet. **Not met.**
- 2.1.6 Village Support are to ensure that regular spot checks are undertaken and that these form part of the staff supervision process (*National Minimum Standard 21.3*).
Findings: The provider regularly audits staff files, and these audits identify any areas that need to be actioned. The last audit showed that several staff were due for a spot check, although many spot checks had taken place in the first week of January. The Manager advised that her intention was to ensure that spot checks take place four times a year, and that two senior staff would be given responsibility for doing this shortly. **Not met.**
- 2.1.7 Village Support are to ensure that all staff receive one to one supervision every three months (*National Minimum Standard 21.2*)
Findings: From looking through staff files it was noted that not all staff had attended a supervision session every 3 months on 2016, although many staff had attended a session January 2017. **Not met.**
- 2.1.8 Village Support are to ensure that all staff receive an annual appraisal. (*National Minimum Standard 21.5*) **Findings:** From looking through staff files it was noted that not all staff had received an annual appraisal in the last 12 months. The staff file audit showed that most staff are scheduled for an appraisal in March 2017. **Not met.**
- 2.1.9 At least 50% of care staff to have completed an NVQ/QCF qualification appropriate to their role. (*National Minimum Standard 20.3*)
Findings: The Manager advised that she has recently started using a new training provider which allows for QCF courses to be completed with no charge in most cases. Nineteen out of forty two carers have now either passed or are working towards a QCF qualification. **Partially met.**

- 2.10 Village Support to ensure that two references are obtained before a member of staff starts work (NMS 17.3) **Findings:** The staff files viewed on the day of the visit contained at least two references, however the staff file audit showed that there were several staff files which contained just one reference. It was recognised that some of these staff had been working with the provider for many years and it had been difficult to obtain references. **Partially met.**
- 2.11 Village Support are to ensure that daily records are signed and printed with the full name. (NMS 16.3) **Findings:** The daily records were generally signed by the care staff, however they were not signed and printed, and some signatures were very difficult to read. **Not met.**
- 2.12 Village Support are to ensure that all staff have a contract of employment on their file (NMS 17.6) **Findings:** The Manager advised that all staff had returned signed contracts of employment, and evidence of this was seen on the staff files. **Met.**
- 2.13 Village Support are to ensure that an interview record is kept to evidence a thorough recruitment procedures (NMS 18.1) **Findings:** Interview records were seen for new staff members, the interview process appeared to be of good standard with appropriate questions which had been answered to a high standard by the interviewee. **Met.**

2.2 Previous Developmental Actions

- 2.2.1 Village Support are encouraged to enter reasons on the call monitoring system alongside any calls where it appears that the call has not taken place, because care staff did not log in and out.
Findings: On some of the call monitoring records it was noted that reasons for apparent missed calls had been entered to explain, such as 'Failed Clock.' **Met.**

3.1 Service Performance

- 3.1.1 It was noted that there was good consistency of care workers, with a small group of regular carers scheduled to attend most calls for each person. On one file it was very positive to note that only three carers attended the calls over a two week period. For another service user, six carers attended over a two week period, however twenty two out of twenty five calls were attended by three carers, with three others attending one call each. The number of carers was much higher for one service user who required two carers for each call.
- 3.1.2 As previously mentioned, the consistency of call times on the records seen was very good, with most calls taking place within fifteen minutes of the planned time. There were some occasions where calls took place over half an hour outside the planned time, and there were occasions when staff started the first call of the day late, which impacted on the other calls.
- 3.1.3 The electronic call monitoring system sends alerts if calls are late or potentially missed, and this system is monitored at all times. When alerts come through, staff are contacted to ask if they are on their way and if necessary other arrangements are made to cover calls, and service users informed of any issues. The system is

monitored during evenings and weekends.

3.2 Care and Service Planning

- 3.2.1 Three service user's files were seen during the visit. The initial assessment documentation was comprehensive and contained detailed and relevant information. The document is broken down into sections, and the information gathered during the assessment links into the service delivery plan
- 3.2.2 The assessments had been signed by the member of staff, and also by the service user or a family member.
- 3.2.3 The preferred times of calls was not shown on the needs assessments, but they were shown on other documentation in the file, either on the service delivery plan, or the weekly calls planner. There was one file where the agreed call times had not been recorded any of the documents on file.
- 3.2.4 The service plans contained personalised and comprehensive information, and are written in a step by step style for each call. It is clear which tasks the service users are able to do independently, and which tasks the support worker should help with. The service delivery plans are mainly task focussed, and could benefit from being more outcome focussed and having more information about the person.
- 3.2.5 A Social Services care plan was seen on all files, however some of these appeared to be not the most up to date version. It was noted that most information from the care plan had been covered in the service delivery plan, although there were a few examples where there was some information missing. This was discussed with the Manager who said that she would amend the service delivery plan as soon as possible.
- 3.2.6 Service plan reviews were seen on the files; these were completed with input from service users and/or family members. On all files viewed there was evidence of a service plan review taking place within the last six months (or a service plan dated within six months, therefore a review was not due).
- 3.2.7 The provider undertakes risk assessments of not just the environmental factors (e.g. the electrical appliances, or the outside of the property) but also risks associated with providing care, or with medical conditions.
- 3.2.8 Daily records for each were completed fully, although as mentioned some signatures were illegible. The recordings contained relevant information and updates, and they also showed that the care staff had reported any relevant information to the office, or to the next of kin if appropriate.
- 3.2.9 Daily records books are collected and returned to the office when the books are full. It is recommended that a sample of books are audited by the Manager or office staff, however the Manager advised that this is not taking place at present.
- 3.2.10 There is a communication system in place to log calls received from care staff to the office to report concerns about a service user, or to report cancelled calls etc.

3.3 Recruitment, Training and Supervision

- 3.3.1 Three staff files were viewed, and they all included required information such as a photograph, a detailed application form, and at least two detailed references.
- 3.3.2 The staff file audit showed that all staff had been DBS checked before they started work, and these are repeated every three years.
- 3.3.3 The staff file audit includes checking that staff have provided proof of insurance and MOT, and it was noted that several staff had not provided up to date information.
- 3.3.4 The provider has quite recently started to use e-learning for some training courses, although traditional training courses are still arranged for subjects such as manual handling. The provider has a member of staff who is qualified to deliver several different training courses. The Manager advised that the e-learning courses are of good quality, and at the end of the course there is an assessment that needs to be passed to show that the subject has been fully understood before the course can be passed.
- 3.3.5 The training matrix showed that in general most staff have attended mandatory training courses and refresher training, although there were some staff overdue for POVA training. There were also some staff who needed to take the e-learning courses for Food Hygiene and Infection Control.

4 Corrective Actions

- 4.1 Village Support are to ensure that staff stay for the full length of time allocated for each call, or to notify Social Services where calls are consistently taking less time than expected. (*Domiciliary Care Service Specification*). Timescale: Immediately and ongoing
- 4.2 Village Support are to ensure that all new staff commence a structured, formal induction and shadowing process (*National Minimum Standard 19.2*). Timescale: Immediately and ongoing
- 4.3 Village Support are to ensure that regular spot checks are undertaken and that these form part of the staff supervision process (*National Minimum Standard 21.3*). Within 3 months of date of report.
- 4.3 Village Support are to ensure that all staff receive one to one supervision every three months (*National Minimum Standard 21.2*) Within 3 months of date of report.
- 4.4 Village Support are to ensure that daily records are signed and printed with the full name. (NMS 16.3) Immediately and ongoing
- 4.5 Village Support are to ensure that all assessed needs, as identified within the CCBC Care Plan, are migrated into the service delivery plan (*NMS 4.2*) Immediately and ongoing

- 4.6 Village Support are to ensure that they keep up to date records relating staff using their cars for business use (NMS 11.4) Within 3 months of date of report
- 4.7 At least 50% of care staff to have completed an NVQ/QCF qualification appropriate to their role. (*National Minimum Standard 20.3*)

5. Developmental Actions

- 5.1 None

6. Conclusion

- 6.1 It was positive to see that some actions were completed. Village Support are encouraged to work towards completing the remaining actions as soon as possible.
- 6.2 The Contract Monitoring Officers would like to thank staff at Village Support for their hospitality during the visit. A further visit will be arranged later in the year to review progress.

Author: Andrew Davies

Designation: Contract Monitoring Officer

Date: 27.01.17

N.B. This report will be made available via Caerphilly County Borough Council's Internet site. Hard copies of the report will also be made available to service users and/or their families should they ask to see them.