



Making Social Care
Better for People

inspection report

DOMICILIARY CARE AGENCY

Signposts Ltd

**Signposts Ltd
94A Arkles Lane
Anfield
Liverpool
Merseyside
L4 2SP**

Lead Inspector
Mrs Trish Thomas

Key Unannounced Inspection
27 May and 3 June 2008 11:30

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

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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 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

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SERVICE INFORMATION

Name of service	Signposts Ltd
Address	Signposts Ltd 94A Arkles Lane Anfield Liverpool Merseyside L4 2SP
Telephone number	0151 260 6999
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Email address	info@signpostsltd.org.uk
Provider Web address	
Name of registered provider(s)/company (if applicable)	Signposts Limited
Name of registered manager (if applicable)	Maureen Ann Little
Type of registration	Domiciliary Care Agencies

SERVICE INFORMATION

Conditions of registration:

Date of last inspection 24th October 2007

Brief Description of the Service:

Signposts is a domiciliary care service providing support and assistance to adults and young people who have a learning disability and/or mental health needs, in Liverpool and the surrounding areas. Signposts is owned by Ms Maureen Little, who is also the registered manager.

The service aims to enable people to live as independently as possible by remaining in their own homes or in their own tenancies, with support.

The office premises of Signposts are situated in the Anfield area of Liverpool and are on the first floor of 94a Arkles Lane. Costs for services provided by Signposts are negotiated with the contracting authority, or agreed with individuals who are purchasing their own care and support, and are dependent upon the levels of service required.

SUMMARY

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

The quality rating for this service is **two stars**. This means that people receive **good** quality outcomes.

The inspection was announced and took place over two days. On the first day, we (the Commission for Social Care Inspection) visited the office premises. The registered provider / manager, Ms Maureen Little, was not on duty. In her absence, office based staff and managers responsible for training, supported tenancies and community support provided the information and records we asked to see.

On the second day, we visited three people who use the agency in their own homes to talk with them about the support they receive. The comments received in surveys that were returned to us by service users' relatives (4) and staff of the agency (5) are included in this report.

The provider / manager had completed an Annual Quality Assurance Assessment (AQAA) and returned it to us before the visit took place. The AQAA is a self-assessment questionnaire and some of the information we were given is included in the report.

What the service does well:

People who need support and are introduced to Signposts have had their needs assessed by social workers. They are given plenty of information about the agency in formats that are easy to understand. They are told about how things will progress, from their initial introduction to the agency to receiving care, so they know what will be done to meet their needs.

People's relatives are involved in assessments, care planning and reviews to make sure that people's interests are independently represented.

The service user guide for the agency includes details of how to make a complaint, and is available in formats, such as large print and Braille, to ensure that information is accessible to service users who have a visual impairment.

Service users' diversity is respected through recording their culture, religion, interests and care needs so these can be met through well planned support.

There are good systems for risk management to ensure service users' independence is promoted and people appeared to be benefiting from this. There is ongoing consultation with them, through reviewing and updating support plans.

A person who receives support from the agency told us the service has made a difference to her life. A relative said, "They provide good support and we have no complaints about Signposts."

Staff are recruited using a thorough and rigorous process to make sure that staff are suitable to work with the people who use the agency, so they are protected from possible harm or poor practice.

What has improved since the last inspection?

Since the last visit, a training manager has been employed and there are clear records of training carried out and planned for coming months. Management have responded to the requirement and recommendations from the last inspection. In support of service users' safety and welfare, staff have received training in patient handling, protection of vulnerable adults and medication management.

To give accountability and to protect service users and staff, a recommendation from the last inspection has been addressed. There are robust procedures in place for managing people's personal finances, and each individual's records of expenditure have been regularly audited by senior staff to ensure they are accurate.

What they could do better:

A relative's survey highlights the need for training in seizure management, as this is important to the welfare of people who use the agency. Also, for some staff, training in managing challenging behaviour is needed so that they feel confident to support everybody who receives care from the agency. A recommendation is made that this training is given to staff who need it.

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 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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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):

1, 2 & 3

People who use this service experience **good** outcomes in this area. We have made this judgement using available evidence including a visit to this service.

People are given plenty of information and have had their needs assessed before being offered a service by Signposts do they know the agency staff can meet their needs.

EVIDENCE:

People receiving support from the agency are given plenty of information about Signposts in the service users' guide. The guide is available in alternative formats including Braille and large print. In this way each person's diverse needs will be supported, by ensuring they have access to information about

the agency that is important to them. The guide sets out the principles of service which are stated as: enhancing service users' quality of life; being responsive to their changing needs; and upholding their legal and human rights when supporting them.

The information the agency sent us tells us, "Individual assessments of need are carried out before a service starts. These assessments are carried out by appropriately qualified and experienced staff". Care files which were read contained records of each person's assessments carried out by social workers and regularly updated by staff from Signposts. Assessments cover a wide range social and health needs, including those relating to learning disabilities. By obtaining a lot of information about the person, a support plan can be set out to guide staff as to how the person's needs are to be met.

Staff said in surveys they receive regular supervision and appraisals from managers. In this way, they have the opportunity to discuss care practice and personal development so that their training will be relevant to the support they provide to people.

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, 9 & 10

People who use this service experience **good** outcomes in this area. We have made this judgement using available evidence including a visit to this service.

People's needs, wishes and personal goals are addressed in their support plans and they are involved in choosing how their care will be given so their needs are met in the way they prefer.

EVIDENCE:

Support plans which were checked during our visit provide staff with the guidance necessary to support each person's health and personal care needs and their cultural and lifestyle preferences. There was evidence in care files that people who use the agency are consulted in planning their support and that their needs are regularly reviewed and updated.

A member of staff told us in a survey, "Care plans are always kept fresh and up to date. The information is always readily available either in the person's

home or in the office". A person who uses the agency said, "I get visits from Signposts and when I think about it, this has made a difference". A relative told us, "(Name) gets the support he needs from Signposts". A relative's survey stated, "They look after (name) very well".

For staff guidance there are procedures in place in Signposts about respect for service users' privacy and dignity when providing support. The induction workbooks used by the agency show that staff receive guidance in the principles of privacy, dignity and equality of opportunity, in the early stages of their employment in the agency.

People living in a supported tenancy that we visited were registered with local GP practice. There were arrangements in place for ongoing health care and attendance at clinics, with services from chiropodists and dentists as needed. Staff gave examples of how the needs of one person were being supported through referral to specialist services. The actions taken to support the person and relevant risk assessments have been fully recorded in the person's care plan.

The information we were sent by the agency before our visit informs us that there are procedures in place for medication management and that Signposts staff receive relevant training.

For service users who live at home, it is usual for their family carer to control their medication without input from Signposts staff. For those living in tenancies, staff will manage medication for those who cannot do this for themselves. There were procedures in place for staff guidance on how to do this safely. Medication administration records are kept for those who are helped with their prescribed medication. The records seen were satisfactory, giving an up to date record of the medication that was prescribed and had been given to each person.

A member of staff said she has received training recently and gave an account of the system for ordering medication and of the audit trail to ensure that all drugs are accounted for.

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, 13, 14 & 15

People who use this service experience **good** outcomes in this area. We have made this judgement using available evidence including a visit to this service.

There are effective safeguarding procedures and security arrangements so that people who use the agency are protected from possible harm and abuse.

EVIDENCE:

Signposts has a health and safety policy and there are relevant written procedures and training for staff guidance. The AQAA tell us of measures taken to improve health and safety in Signposts in the last year. "We have engaged consultants to advise and review our Health and Safety policies and procedures. We have updated all fire risk assessments. We have reviewed

our safeguarding policy. We have developed greater checks to monitor safeguarding.”

To ensure that incidents are reported to the relevant agencies and safety standards are monitored, there are procedures in place for reporting incidents and accidents and injuries to service users and staff. There are procedures for infection control to ensure that good standards of hygiene are maintained for service users’ protection. The relevant records were seen and were satisfactory.

Risk assessments are carried out to ensure people who receive care from the agency are supported safely and their independence is maintained. Staff take action to protect service users through identifying hazards, assessing risk and introducing control measures in relation to aspects of the service where risks are identified, such as leisure activities, behaviour and care giving. A satisfactory example of risk management was seen in a support plan; this was in place with regards to a person’s behavioural difficulties.

Signposts has procedures for protection of vulnerable adults, and for “whistle-blowing”. Staff training on safeguarding has been updated since the last visit. A member of staff we spoke with told us that she had received the training and she showed awareness of procedure and recognition of abuse indicators.

There have been three safeguarding referrals about Signposts since our last visit. Two were in relation to service users’ finances. One allegation of attempted theft has been resolved to the person’s satisfaction. There was a pending police investigation regarding alleged theft of a service user’s money, at the time of the report. The third safeguarding referral related to an allegation about the behaviour of a senior staff member towards a service user. This has been investigated under safeguarding procedures and was not upheld.

There are procedures in place for managing service users’ personal allowances in cases where they are assessed as not able to do this for themselves. In a supported tenancy we visited, a statement is kept of each person’s day- to-day financial expenditure and receipts for purchases are retained. All transactions have double signatures and money held in safekeeping is signed for by incoming staff to ensure accountability. The financial records had been checked by in May 2008 by a manager.

Staff are issued with identity badges to be worn when they visit the homes of the people who use the agency. In this way, the service user and their family will know that the people who visit them are legitimate employees of Signposts. A relative of a service user confirmed that support staff have identity badges so she can be sure who they are, although she said she knows the people who support her son.

In situations where a service user is not able to let the carers in, there are written agreements on key holding and arrangements are clearly set out in the service user guide. This makes sure that the person and the staff know what will happen in these situations.

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 & 21

People who use this service experience **good** outcomes in this area. We have made this judgement using available evidence including a visit to this service.

Staff are well vetted, trained and supervised so the people who use the service can be confident that they will receive support from staff who are competent and skilled.

EVIDENCE:

The AQAA informs us, "We have a rigorous recruitment process which covers all points contained in standard 17. We have a training programme in place. We have an induction in place. Staff are on thirteen weeks probation and this is reviewed formally at the end. We have a range of skills, knowledge and experience within the organisation to meet client needs."

A sample of six staff files gave evidence of the recruitment procedures followed by Signposts. The records were well organised and easy to follow. They contained an application form, interview records and employers' references (which were current at the time of recruitment). Criminal Records Bureau disclosures had been taken up for each person before they started to work for Signposts. Staff have been issued with contracts of employment and received induction training. Copies of the induction process and staff training booklets were seen and staff said in surveys that they receive plenty of training and support.

A training manager has been employed by the agency since our last visit. She told us about progress of training and we looked at the records of courses which have been attended and planned for future dates. These record regular updates in mandatory training for staff as well as courses specific to service users' support needs, such as National Vocational Qualifications, patient handling, medication management and first aid. The training manager informed us that over fifty percent of staff have NVQ qualifications and most staff have, or are undertaking this at Level 3.

Staff who were spoken with said there is plenty of training on offer which is in keeping with their roles and responsibilities as support workers. A staff survey tells us, "Training is offered regularly and is always relevant to client and the role you fill".

With regards to training and in accordance with our findings, two recommendations are given to ensure that staff have the right skills to support people. A relative's survey highlights the need for training in seizure management, as this is important to the service user's welfare. Also, for some staff, training in managing challenging behaviour is needed so that they feel confident to support a person whose support plan was we checked during our visit.

Records show that staff have performance appraisals and regular supervision. Staff who filled in surveys said they receive plenty of support. One comment was, "manager offers a lot of support, always available at the end of the phone or face to face if needed. Regular supervisions and personal development plans support this".

Although most of the feedback received from staff was favourable, a member of staff made a suggestion as to how the agency could improve, as follows, "Make the office accessible to clients who are wheelchair users. Employ more staff and encourage regular staff to stay". Another staff member wrote that there should be better communication from management towards staff and more notice about shift patterns.

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

People who use this service experience **good** outcomes in this area. We have made this judgement using available evidence including a visit to this service.

People who are supported by Signposts receive a consistent service that is well managed to make sure that it is run in their best interests.

EVIDENCE:

Signposts is operated from permanent business premises and there are clear lines of management within the organisation. The registered manager, Ms. Maureen Little, was not on duty during the visit and in her absence, senior staff provided records and information we asked for.

The offices are well equipped with desktop computers, cabinets for records, kitchen and toilet facilities and meeting rooms. The service is operated in a way that protects services users' confidentiality through securing records and working within the terms of the Data Protection Act, and there are written procedures for staff guidance.

A person who uses the agency told us that the service is reliable and consistent. The relative of a person who receives support from Signposts said, in general, continuity of support workers is very good, which she considers to be important for her son.

Arrangements for care giving in supported tenancies need to be in keeping with Signposts' registration as a domiciliary care agency. There is continuing communication between the provider and the Commission to clarify the current arrangements.

Signposts has a quality assurance system which is based on seeking the views of service users and their representatives through distribution of quality questionnaires. The AQAA identifies that support plans are reviewed every six months by staff, with service users and their families. The service user guide provides an out of hours contact number where a manager may be contacted in addition to availability during office hours.

To ensure that service users' complaints will be addressed, Signposts has a complaints procedure, which is set out in the service user guide. A relative said, "I have not had much cause for complaint but I can call the office if I am worried about anything". Those relatives who filled in CSCI surveys said they knew how to make a complaint to Signposts.

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

User Focused Services	
Standard No	Score
1	3
2	3
3	3
4	X
5	X
6	X

Managers and Staff	
Standard No	Score
17	3
18	X
19	3
20	X
21	3

Personal Care	
Standard No	Score
7	3
8	3
9	3
10	3

Organisation And Running Of The Business	
Standard No	Score
22	3
23	X
24	X
25	X
26	3
27	X

Protection	
Standard No	Score
11	3
12	3
13	3
14	3
15	3
16	X

Are there any outstanding requirements from the last inspection? No

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
7	DO19	To ensure that support is given by staff who have the relevant skills and competence, training in managing challenging behaviour and seizure management is recommended for staff who have not yet had this.

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