

CAERPHILLY COUNTY BOROUGH COUNCIL, DIRECTORATE OF SOCIAL SERVICES

COMMISSIONING TEAM

CONTRACT MONITORING REPORT

Name of Provider: Q Care

Date of Visit: Friday 26 January 2018

Visiting Officers: Ceri Williams (Contract Monitoring Officer)
Andrew Davies (Contract Monitoring Officer)

Present: Anne Cook (Registered Manager)

1. Background

- 1.1 Q Care have been a registered provider of domiciliary care services within the Caerphilly Borough for several years. The provider was awarded a domiciliary care contract in 2011, following a tender process.
- 1.2 The purpose of the monitoring visit was to review the recommendations made during the previous contract monitoring visit carried out on the 17 August 2016 and to look at the documentation for people in receipt of a package of care and staff files.
- 1.3 Dependent on the findings within the report, Q Care will be given corrective and developmental actions to complete. Corrective actions are those which must be completed (as governed by legislation etc), and developmental actions are good practice recommendations.

2. Previous Recommendations

- 2.1 Ensure that supervision and appraisals are up to date for all staff (*Reg 36 (2) (c)*)
Not Met: See 3.3.5. Most staff were up to date with supervision but a few were overdue.
- 2.2 Ensure that calls take place within 15 minutes of the agreed time, and in the correct order as shown on the rota. (*Reg 41(2)*)
Partially Met: See 3.1.3 Some rotas looked at were consistent but others were not.

- 2.3 Q Care are encouraged to develop a life history document, or to include some life history information in personal plans.
Partially Met: See 3.2.9. There is a section included for this information on the support plan but it is not being fully utilised.

3. Findings from Visit

3.1 Service Performance

- 3.1.1 Call monitoring records were viewed for two service users and compared to scheduled times. It was positive to note that the majority of calls lasted close to the planned length of time. For one service user, the evening call was generally shorter than the contracted hours however, this had not been raised with a key worker in order to ascertain if the call length needed to be reduced.
- 3.1.2 Several staff rotas were viewed, and it was apparent that calls are planned well, and that appropriate travel time is always scheduled between calls.
- 3.1.3 Although planned well, the rotas did evidence that staff were not following the order of the rota, and were not spending the allocated length of time in calls. This has been brought to the attention of the manager.
- 3.1.4 It was noted that there was a good consistency of care workers scheduled to attend most calls for one service user. However another service user's record evidenced inconsistency of carers calling.
- 3.1.5 The electronic call monitoring system sends alerts if calls are late or potentially missed and this system is monitored at all times. When alerts are received, 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 Process

- 3.2.1 Two client files were viewed at the visit. Q Care use a document called 'My Care & Support Plan' to plan care and support for clients.
- 3.2.2 The files viewed both contained current CCBC care plans and all tasks from the care plan had been included on the 'My Care & Support Plan'.
- 3.2.3 The document is inclusive of the client's needs and views and also wishes from representatives.
- 3.2.4 The level of detail in the support plans was good. Tasks were clearly identified for each call and included levels of independence in each area of support.

- 3.2.5 Some of the support plans viewed were outcome focussed, including what targets were to be achieved and, what care staff were going to do to help client achieve the outcomes. They were written from the client's perspective and included what could be done independently.
- 3.2.6 Other support plans viewed were more basic in detail and were more task focussed rather than what could be achieved independently. The manager recognised that inconsistency in care planning was an issue and that Q Care were taking necessary steps to improve this.
- 3.2.7 The support plans seen had been signed by the individual receiving support, evidencing their involvement, but not by a representative from Q Care.
- 3.2.8 Risk assessments were included on some support plans but not others. The manager explained that there was a backlog of risk assessments to be carried out as there has not been a reviewing officer in post, the company are recruiting this position at the moment.
- 3.2.9 The support plans include a section titled 'Some Personal Information About Me'. However, this section of the form was either blank or was completed containing very basic information.
- 3.2.10 Daily Records viewed were fully completed, all were signed, timed and dated. They also contained all detail of support carried out and comments of client's health and well-being.
- 3.2.11 There was no evidence on file of service plan's being reviewed. Again the manager explained that this was due to the fact that no reviewing officer was in post at the moment and they are currently recruiting.
- 3.2.12 There were quality reviews on files seen, which took into account what the individual thought of the service being provided and, gave them opportunity to raise concerns/compliments.

3.3 Recruitment, Training & Supervision

- 3.3.1 Two staff files were viewed, they both included required information such as detailed application form, signed contract of employment, job description and at least two references.
- 3.3.2 Both files contained interview records which showed that the applicant had answered questions to high standard and that the interview process also included scenarios.
- 3.3.3 Q Care have also recently introduced a written exercise to be completed which has to be passed before moving onto formal interview.
- 3.3.4 The provider uses an induction process and these were seen on the staff files.

- 3.3.5 A matrix is used to record and plan supervision sessions and spot checks throughout the year, and it was apparent that these are taking place regularly, although some staff were overdue a supervision session. There were also some staff overdue for an annual appraisal.
- 3.3.6 The training matrix showed all staff had received mandatory training, however some staff were out of date for some refresher training.
- 3.3.7 The provider uses a mixture of e-learning and face to face training. One of the mandatory modules of training is called 'Care'. The manager explained that this module includes Infection Control, First Aid, Food Hygiene, and Dementia Training. The provider was asked if all the modules could be listed on the training certificates.

4. Corrective / Developmental Actions

4.1 Corrective

- 4.1.1 Ensure that supervision and appraisals are up to date for all staff.
Timescale: Within three months of the report. (Reg 36 (2) (c)).
- 4.1.2 Ensure that calls take place consistently at the agreed time and in the correct order of the rota. (Reg 41 (2)).
Timescale: Immediate & Ongoing.
- 4.1.3 Service Delivery Plans reviewed at least every 6 months.
Timescale: Immediate & Ongoing (as CCBC contract).
- 4.1.4 Risk Assessments are undertaken before the care package commences and are updated annually or more frequently if necessary.
Timescale: Immediate & Ongoing (Reg 14).
- 4.1.5 Service delivery plans are signed by the client or representative on their behalf.
Timescale: Immediate & Ongoing (Reg 15 (6)).

4.2 Developmental

- 4.2.1 Q Care are encouraged to utilise the 'About Me' section on the My Care & Support plan document.
- 4.2.2 Recommend that the training certificate titled 'Care' includes a list of all the topics covered on the certificate.

5. Conclusion

- 5.1 The visit was positive with examples of good practice seen in some areas looked at during the visit.

- 5.2 It is acknowledged that Q Care have recently had to manage changes in office staff and recruitment difficulties.
- 5.3 The monitoring officers would like to thank Q Care for their hospitality during the visit. Further visits will be arranged as per the normal monitoring process.

Author: Ceri Williams
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Date: 04.05.2018

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.