



*Making Social Care  
Better for People*

# inspection report

**DOMICILIARY CARE AGENCY**

**Hilton Community Services Limited**

**Hampton House 1st Floor  
100 Crossbrook Street  
Cheshunt  
EN8 8JH**

*Lead Inspector*  
Alison Jessop

*Unannounced Inspection*  
23rd January to 21st February 2008      10:00

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

<b>Reader Information</b>	
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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](http://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](http://www.tso.co.uk/bookshop)

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# SERVICE INFORMATION

<b>Name of service</b>	Hilton Community Services Limited
<b>Address</b>	Hampton House 1st Floor 100 Crossbrook Street Cheshunt EN8 8JH
<b>Telephone number</b>	01992 638361
<b>Fax number</b>	
<b>Email address</b>	
<b>Provider Web address</b>	
<b>Name of registered provider(s)/company (if applicable)</b>	Hilton Care Services Limited
<b>Name of registered manager (if applicable)</b>	Manager post vacant
<b>Type of registration</b>	Domiciliary Care Agencies

# **SERVICE INFORMATION**

## **Conditions of registration:**

**Date of last inspection**      23rd January 2007

## **Brief Description of the Service:**

Hilton Community Services Ltd provides a domiciliary care service to people who have a mild to moderate learning disability who may have an associated physical disability, sensory impairment and/or mild to moderate mental health problem. The majority of people using the service live in shared accommodation, which is rented from a local housing association. The agency currently supports people using the service living in ten houses in the South Essex area.

The head office is located in Cheshunt and is accessible by public transport and which is within close proximity to the M25 motorway. The board of directors, senior management, training and development manager and clerical officers are all based here.

The service has a block contract with the local authority however individual contracts are considered with a current hourly charge between £12.00 to £14.00.

A copy of the most recent inspection report can be obtained from head office.

# SUMMARY

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

The quality rating for this service is 2 star. This means the people who use this service experience good quality outcomes.

Throughout this report the term 'we' is used for the Commission for Social Care Inspection, rather than 'we' the inspectors. The people who use the service are referred to as 'tenants' throughout this report as this was their preferred term of reference.

One regulatory inspector carried this unannounced inspection out over two days. Half a day was spent in the head office where we looked at a sample of records, policies and procedures. The inspector also spent time gaining information from the Director of Human Resources and the Director of Services.

One day was also spent visiting the people who use the service. The inspector visited two homes in North Essex where feedback was gained from the tenants and staff.

Surveys were also sent out to the people who use the service, staff and other professionals such as advocacy workers and social workers. The response was very good and comments made are included in the main body of this report.

Information was also taken from the Annual Quality Assurance Assessment (AQAA) provided by the agency.

## **What the service does well:**

Hilton Community Services Ltd provides good quality, person centred care to its tenants. The tenants visited looked very well cared for and are involved in all aspects of their care. One tenant said 'staff help me make choices, they look after me well.' Another said 'I like the people I live with and I like the staff.' A social worker reported 'the clients are well looked after, they always look beautifully dressed and cared for. One house is exceptional in its management of the five clients.'

Each tenant has a care plan which is reviewed as and when required or at least annually. The plans are person centred and are written in a user-friendly way including photographs, pictures and symbols. Each tenant has a busy social life and tenants are involved in the running of the household. Every house uses independent advocates who attend tenants meetings and reviews.

The agency has a robust recruitment procedure where references and Criminal Record Disclosures are obtained and checked before staff work with the

tenants. Staff receive regular training and their competency is assessed to ensure that they are working safely.

Tenants are safeguarded from harm and the management take any allegations seriously, and follow the correct procedure to protect tenants. Complaints are thoroughly investigated and responded to as stated in the company's complaints procedure.

## **What has improved since the last inspection?**

Confidential information about tenants is now being stored securely, tenants also take ownership of their care plan which is stored securely in their own bedrooms. Care plans and risk assessments are regularly reviewed with changing circumstances ensuring that care being provided is appropriate and safe.

All staff have received further training and now receive regular supervision. One member of staff said 'the agency does well in training and updating their staff with what is relevant to their role.' Another said 'the company is very supportive and I enjoy working for them!' A relative said 'the care staff are excellent.'

Staffing levels are more stable than previously however there has been a high turnover of staff since the last inspection. The manager stated 'recruitment and retention is now good and we are almost fully staffed. Annual leave and sickness is covered by staff doing some overtime.'

## **What they could do better:**

Although the service has a quality assurance process, some of the relatives said that they are not consulted on important matters such as staffing changes and other general news.

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](mailto: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 & 5

Quality in this outcome area is good. This judgement has been made using available evidence including a visit to this service.

Prospective tenants can expect to receive a clear referral, assessment, care planning and review process, which tailors the service to individual needs.

### EVIDENCE:

Since the previous inspection the Statement of Purpose and Service User Guide has been reviewed and has been written in a more 'user friendly' format. This means that it is written in plain English and therefore prospective tenants and their representatives can make an informed decision about whether to use this service and be confident that their needs can be met.

When referrals to the service are received, the Director of Services carries out a comprehensive needs assessment. Information is taken from the referrer and other sources such as family members or other professionals. All aspects of the persons care needs such as personal, health, emotional, social and cultural needs are obtained and a decision is made as to whether the service can meet their needs.

During the previous inspection, we were able to gain access to personal information about the tenants as care plans and other documentation was being stored in the lounge or dining area of the home. On visits to the services during this inspection all confidential information relating to the people who use the service was being stored securely in the tenants own bedrooms. The service has reviewed its 'Tenants Confidentiality Policy' and staff are clearly working in accordance with this.

## 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

Quality in this outcome area is good. This judgement has been made using available evidence including a visit to this service.

The people who use this service receive person centred, dignified care, they are involved in planning in their care and are enabled to make choices to enhance their quality of life.

### **EVIDENCE:**

All tenants have an individual plan of care. We looked at five care plans and the staff asked the tenants if they would mind if we looked at this. All care plans were being stored in tenant's own bedrooms. Care plans are very person centred and written in an accessible format including photographs, pictures and symbols. One tenant who has a hearing impairment has a large board on the kitchen wall where photos of staff on duty, activities for the day, meals and other information are displayed as a form of communication. Each tenant is

involved in the regular review of their plan and personal goals and achievements are agreed. For those tenants who cannot verbally communicate the plan includes 'how to tell when I'm feeling happy, sad or unwell.' There is also a diversity support plan, which includes personal, cultural and religious preferences.

One social worker said 'they provide tenants with person centred plans and are generally innovative in some of the community activities.' In general Hilton do provide an excellent service to their tenants.'

All tenants said that they are treated with dignity and respect. When asked what the service does well one tenant said 'my freedom, my choices and the food I eat.' All tenants in both houses looked very well cared for. One of the tenants said 'staff help me to make choices, staff look after me well.' An advocate said 'when I visit whether planned or random, individual privacy is observed and their dignity is respected.'

The tenants appeared to be involved in everything, one tenant was observed answering the telephone whenever it rang, and another was assisting with the household chores. In the other house the people that live there are unable to communicate verbally and are very dependent upon the staff. They are involved in everything that happens and they were observed helping with baking cakes, cleaning the home and sorting their laundry. Staff ensured that they were included in all discussions and conversations in the home. It was noted that they all looked very nicely dressed, particularly the silk scarves they wore around their necks. The team leader discreetly pointed out that this is a more dignified way to keep their clothes clean, as the use of 'bibs' is inappropriate. They have been on holiday to Tenerife and are planning to go to Florida this year. They attend lots of social events and had recently been to see a 'big brass band'. The team leader stated 'they are always very busy, they enjoy going out, you are lucky to find them at home today!'

Medication procedures are satisfactorily maintained and regular audits are carried out by team leaders and the director of services to ensure that staff are working in accordance with policies and procedures and to ensure that no errors have occurred.

## 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 & 14

Quality in this outcome area is good. This judgement has been made using available evidence including a visit to this service.

The people who use the service can be assured that systems are in place to protect them from harm as allegations are taken seriously and acted upon immediately in order to safeguard the tenants.

### **EVIDENCE:**

The agency had comprehensive policies and procedures on health and safety. Risk assessments were contained within all care plans observed and all staff spoken to demonstrated a clear understanding of the risk assessment process.

The majority of staff have attended training on risk assessments and assessments were present for activities such as trampolining, swimming and wheelchair dancing.

Since the previous inspection there has been one safeguarding issue, which was made by a community nurse who was concerned that a member of staff did not take action to protect a tenant's health. The disciplinary procedure was instigated immediately by the agency who undertook a thorough investigation. This matter was resolved and the tenants were safeguarded from harm.

All houses appeared to be in good physical order with all doors and windows secure. Staff demonstrated a commitment to protecting the safety of the individuals they support. Financial procedures remain stringent in order to safeguard the tenant's personal finances and there are several auditing processes carried out throughout the levels of staffing and management.

## **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

Quality in this outcome area is good. This judgement has been made using available evidence including a visit to this service.

The people who use the service can be assured that the recruitment, selection and training procedures in place safeguard their welfare.

### **EVIDENCE:**

Recruitment records were observed and these were satisfactorily maintained. New staff are confirmed in post following completion of satisfactory screening such as a Criminal Records Disclosure and at least two written references. The agency ensures that all work permits and VISA are authentic. One member of staff had failed to provide evidence of their right to work in the United Kingdom, a disciplinary hearing was arranged by the agency however the staff member produced a satisfactory permit to work and therefore the hearing was not necessary. This demonstrated that the agency would take the

necessary action in order to safeguard the tenants. There is also an interview checklist, which ensures that no gaps have been identified on the staff application form.

There is a staff development-training programme within the agency and many of the staff have received refresher training since the previous inspection. Training on Moving and Handling is provided by multi professionals however the Director of Services has recently completed an advanced Health & Safety course and will become the in house trainer. All team leaders have attended an advanced Food Hygiene course and all staff have attended training on Person Centred Planning, Medication and Risk Assessment. A relative stated 'the agency provides enough helpful, trained staff.'

Staff confirmed that they receive regular supervision and several commented that they feel valued and supported by the management team. One support worker said 'the service manager is good and approachable.' Another said 'the agency has improved since the change of management, they are valuing the staff more.' Regular team meetings are held away from the tenant's homes, which respects their privacy.

## **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 & 27

Quality in this outcome area is good. This judgement has been made using available evidence including a visit to this service.

People who use the service are benefiting from the new management structure. The manager is experienced and the tenants can be confident that the service is run well.

### **EVIDENCE:**

The manager of the agency has submitted her application for Registered Manager with us. The Responsible Individual has also changed and the Director of Human Resources stated that he would soon be submitting an application for registration with us.

Since the last inspection the current manager transferred over from another Hilton service, which de-registered. Many of the staff, relatives and other professionals have commented on the improvements since the change occurred. One relative said 'Hilton has improved over the past year by

investing in a new local manager and area manager.' Several comments were received about the frequent changes in staffing. One tenant said 'I am unhappy with the staff changes'. A relative said 'sometimes I feel that there are too many changes in staff but this seems to have been resolved now.' The Annual Quality Assurance Assessment stated that 32 permanent care workers have left the agency in the last 12 months. The manager stated that staff retention is improving and fewer changes are taking place offering a more stable team within each service.

Two complaints have been received by the agency since the previous inspection. One was from a relative and one was from a health care professional. The complaint from the relative was that they thought they observed a member of staff sleeping whilst on duty. This was investigated and the complaint was responded to within the timescale given on the company's complaints procedure, both complaints were not upheld. A social worker said 'we have experienced a few 'hiccups' over the last year but it must be said Hilton responded thoroughly and worked with us to improve services, an open approach was appreciated.'

Although the agency has a quality assurance process some of the relatives felt that communication from the agency could be better. Two relatives said that they would like to be informed when changes occur, particularly when there is a change of staff. One relative said 'I have been waiting a decision on a matter on going for the past year.' Another said 'little information is passed onto parents and relatives about how many spot checks are carried out and general feedback.' The director stated that the company is due to carry out a customer satisfaction process. The service also has a tenant participation group where tenant representatives discuss policies and procedures. As part of this consultation the process for arranging tenants holidays has changed as the tenants said it was too long winded.

The Annual Quality Assurance Assessment (AQAA) was received within the timescale required by us however this offered brief information and did not give us a reliable picture of the service.

# 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

<b>User Focused Services</b>	
<b>Standard No</b>	<b>Score</b>
<b>1</b>	3
<b>2</b>	3
<b>3</b>	X
<b>4</b>	X
<b>5</b>	3
<b>6</b>	X

<b>Managers and Staff</b>	
<b>Standard No</b>	<b>Score</b>
<b>17</b>	3
<b>18</b>	X
<b>19</b>	3
<b>20</b>	X
<b>21</b>	3

<b>Personal Care</b>	
<b>Standard No</b>	<b>Score</b>
<b>7</b>	3
<b>8</b>	4
<b>9</b>	3
<b>10</b>	3

<b>Organisation And Running Of The Business</b>	
<b>Standard No</b>	<b>Score</b>
<b>22</b>	3
<b>23</b>	X
<b>24</b>	X
<b>25</b>	X
<b>26</b>	3
<b>27</b>	2

<b>Protection</b>	
<b>Standard No</b>	<b>Score</b>
<b>11</b>	3
<b>12</b>	3
<b>13</b>	X
<b>14</b>	3
<b>15</b>	X
<b>16</b>	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
1.	D027	It is recommended that relatives are kept up to date with changes to the service as part of the company' quality assurance process.

## **Commission for Social Care Inspection**

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