

## STATEMENT OF PURPOSE

This document gives basic information about Care in Hand Ltd. It includes the materials required by the domiciliary care agencies regulations 2004 and it should be read in conjunction with our service user's guide.

At Care in Hand, our belief is that everyone has the right to choose the way in which they want to be cared for and supported. We respect individual privacy and offer dignity and independence. We operate as a people focused business in every sense, through set principles in order to reach our aims.

### Key Aims

To ensure quality is maintained in everything we do, we aim:

- To provide a service of high standard of care
- To enable customers to live within their own home with support (wherever possible).
- To continually provide an exemplary service to all clients.
- To ensure staff members are trained to meet the tasks necessary to offer quality care.
- To undertake quality assessments of needs and to exercise quality care management.
- To carry out health and safety risk assessments around all customer care.
- To ensure care packages comply with time-scales and are deliverable.

### Key Principles

To make sure that we provide a quality service, our key principles are:

- To focus on providing quality care for all our clients.
- To adhere to our Philosophy of Care.
- To ensure we reach our Aims and Objectives and run a business fit for all.
- To meet the initial assessment needs agreed with each individual.
- To respect our Equal Opportunities policy in all that we do.
- To employ a quality workforce

### Nature of the Services

At Care in Hand we strongly believe everyone should have the freedom to choose how they want to receive care and support, providing them with the opportunity to live life as fully and independently as possible.

We understand that people have different caring needs; our people-focused care varies from help for a couple of hours a week on everyday tasks to 24-hour qualified nursing care. Our personalised approach to caring is developed around people's needs.

Finally, we want to care for our clients' well-being by ensuring they remain as independent as possible.

### Services we provide

- Personal Care (Bathing, washing, dressing, continence management, medication supervision)
- Re-Enablement Packages (Post Hospitalisation)
- Palliative/ End of Life Care
- Rapid Response Care
- Sleep-In/ Night Time Carers
- Respite Care
- Social Care/ Day Care
- Domestic Work (including shopping, cleaning & food preparation)
- 24 hours Live in Care
- Nursing & Complex Care
- Rehabilitation Services

## People for whom the Services are provided

- Older People
- People with Physical disabilities
- People with Sensory Loss including those with dual sensory impairment
- People with Mental Health Needs
- People with Huntington's Disease
- People with Multiple Sclerosis
- People with Brain Injuries
- Specialist EMI Advice (Incl. Alzheimer's & Dementia)
- People with Learning Disabilities

## Geographical Area Covered

Health & Social Care services offered by Care in Hands covers areas throughout Pembrokeshire, Carmarthenshire & Ceredigion

## Our Team Members

The Responsible Individual for Care in Hand is Mr Delan Umanee.

Each Office/ Branch of Care in Hand has the following organisation structure to support the areas provision of service.



We employ in excess of 200 members of staff, who cover a variety of roles including Senior Field Supervisors, Field Supervisors, Call Monitors, Office & Field Administration, Senior Carers, Carers and home Help Support Workers as well as trainees and trainers. Our Senior Field Supervisors & Field Supervisors hold a QCF Level 5 in Care Management. Our Senior Carers hold an QCF Level 3. Our community carers hold an QCF L2.

Care in Hand believes training is an invaluable tool not only for our staff's development, but for the service, we offer as a whole. We understand that training can help build a common understanding of our aims and values, and show our management team's commitment to all our employees.

Our training also aims to develop an employee's career to give them the opportunity to increase their responsibilities and contribute to the company with ideas about new ways of working to continually ensure we offer the best level of care. Care in Hand provides each trainee with a comprehensive induction programme. All employees receive this intensive induction programme **before** they meet any of our service users, covering different aspects of their roles within the organisation. After the seven-day induction, all employees receive a 12-week probation period, where some time is spent shadowing a senior carer. During this time, each trainee must complete the 12 week skills, knowledge and practical based competency assessment programme. This period ensures that a high quality of care will be provided to our clients by care workers who have undergone an extensive training and assessment programme in both theoretical and practical aspects of care tasks.

Care in Hand is an approved City and Guilds centre providing Qualification Credit Frameworks (QCFs) in Health and Social Care at levels 2, 3 and 5. After the 12 week skills, knowledge and assessment programme, if not already attained, employees are required to enroll on a QCF Level 2 in Health and Social Care. This goes above and beyond the QCF target set by the National Minimum Care Standards in England and Wales. As Care in Hand holds a work based learning contract, all employees who successfully complete the 12 week skills, knowledge and assessment programme will have their qualifications fully funded by the Department for Education and Skills (DFES) Wales.

### **Terms & Conditions of Service**

Our Terms & Conditions of service accompany our Service User Guide please put any questions in regards to these terms to Sheena Umanee. Within our Terms & Conditions we have outlined circumstances in which the agency may cease to provide services such as:

1. If the service user requests to change the agency.
2. The agency is unable to fulfil the terms of the contract.
3. Health and safety issues may deem it unsafe for care workers to provide care.

In the event of your "normal" care workers being unable to attend your call, we will arrange for an alternative carer, known to you to attend to your needs. We will inform you of this in advance via telephone.

### **Complaints Procedure**

#### **Verbal complaints**

1. We accept that all verbal complaints, no matter how seemingly unimportant, must be taken seriously.
2. Front-line care staff who receive a verbal complaint are expected to seek to solve the problem immediately.
3. If they cannot solve the problem immediately, they should offer to get their line manager to deal with the problem.
4. Staffs are expected to remain polite, courteous, sympathetic and professional to the complainant. They are taught that there is nothing to be gained by adopting a defensive or aggressive attitude.
5. At all times in responding to the complaint, staffs are encouraged to remain calm and respectful. Staff should not accept blame, make excuses or blame other staff.
6. If the complaint is being made on behalf of the service user by an advocate, it must first be verified that the person has permission to speak for the service user, especially if confidential information is involved. (It is very easy to assume that the advocate has the right or power to act for the service user when they may not). If in doubt it should be assumed that the service user's explicit permission is needed prior to discussing the complaint with the advocate.
7. After talking the problem through, the manager or member of staff dealing with the complaint will suggest a course of action to resolve the complaint. If this course of action is acceptable then the member of staff should clarify the agreement with the complainant and agree a way in which the results of the complaint will be communicated to the complainant (i.e. through another meeting or by letter).
8. If the suggested plan of action is not acceptable to the complainant, then the member of staff or manager will

ask the complainant to put their complaint in writing to the registered manager. The complainant should be given a copy of the agency's complaints procedure if they do not already have one.

9. Details of all verbal and written complaints must be recorded in the Complaints Book.

## Serious or written complaints

### 1. Preliminary steps:

- (a) When we receive a written complaint it passes it to the named complaints manager who records it in the Complaint Book and sends an acknowledgment letter within two working days to the complainant
- (b) the manager also includes a leaflet detailing Care In Hands procedure for the complainant. (The complaints manager is the named person who deals with the complaint through the process)
- (c) if necessary, further details are obtained from the complainant; if the complaint is not made by the service user but on the service user's behalf, then consent of the service user, preferably in writing, must be obtained from the complainant
- (d) if the complaint raises potentially serious matters, advice could be sought from a legal advisor. If legal action is taken at this stage, any investigation by the organisation under the complaints procedure immediately ceases

### 2. Investigation of the complaint by Care in Hand:

- (a) immediately on receipt of the complaint, the complaints manager will start an investigation and within 14 days should be in a position to provide a full explanation to the complainant, either in writing or by arranging a meeting with the individuals concerned
- (b) if the issues are too complex to complete the investigation within 14 days, the complainant will be informed of any delays.

### 3. Meeting:

- (a) if a meeting is arranged, the complainant will be advised that they may if they wish bring a friend or relative or a representative such as an advocate
- (b) at the meeting a detailed explanation of the results of the investigation will be given and also an apology if it is deemed appropriate (apologising for what has happened need not be an admission of liability)
- (c) such a meeting gives the agency management the opportunity to show the complainant that the matter has been taken seriously and has been thoroughly investigated.

### 4. Follow-up action:

- (a) after the meeting, or if the complainant does not want a meeting, a written account of the investigation will be sent to the complainant. **This includes details of how to approach CSSIW if the complainant is not satisfied with the outcome.**
- (b) the outcomes of the investigation and the meeting are recorded in the Complaint Book and any shortcomings in agency procedures will be identified and acted upon
- (c) the agency management formally reviews all complaints at least every six months as part of its quality monitoring and improvement procedures to identify the lessons learned.

## Care in Hand Fees

Cost of Care Provision is provided upon successful completion of an Assessment of Need.

## Time Sheets

Care in Hand operates a call monitoring system called CM2000. Our timesheets are generated electronically via this system. Care in Hand does not require clients to sign for time spent within your home, as this electronic call monitoring system will provide us with this information.

## Policies & Procedure

Domiciliary & Nursing Care requires the management of complex and sensitive issues in terms of both service users and staff members.

Therefore, to maintain consistency and to avoid conflict we have prepared documents that detail the practices and procedures we have in place within the company.

These key documents include safeguarding service user's property, service users and their domiciliary care workers.

Service Users and Staff are welcome to view these documents. Please contact Sheena Umanee to request a copy of policies in place.

### Abuse

We recognise that service users must be safeguarded from all forms of abuse wherever and however it might occur: from within the family or others or from abusive behaviour on the part of the agency's staff. It takes every possible action to prevent abuse and to deal with it promptly and effectively if it occurs, or is reported as occurring.

Care in Hand makes all staff aware of the policy and instructs them in the specific procedures for preventing, observing and reporting suspicions or signs of abuse. In reporting possible abuse, staff is made fully aware of our whistle blowing policy, which recognises that the safety of service users is always their paramount concern. All service users and stakeholders are made aware of the agency's determination to take action where it comes across abuse.

### Medication

As a domiciliary care agency we work on the basis that most of our **service users will remain responsible for their own medication**. The agency will become involved if it is contracted to do so and consistent with the outcomes of the needs and risks assessments and service user plans. The agency will provide support and aids to enable safe self-administration wherever this is required or assist with the safe administration of service users' medication requirements using suitably trained and competent staff. For our qualified nursing staff, the NMC's Guidance on Management of Medicines is utilised. The agency's insurance policies cover any liabilities arising out of its acceptance of responsibilities for assisting with service users' medication.

### Quality Assurance

At Care in Hand, we have successfully achieved an ISO:9000 standard in quality management and a certification for ISO 9001:2000 Healthmark standard specifically designed for the Health & Social Care sector. The quality assurance process is a robust and audited system that requires continuous monitoring to ensure we are providing the highest quality of service. As a people focused organisation we ensure that our client's feedback is central to this process.

Our services are inspected by Care and Social Service Inspectorate for Wales (CSSIW), a report of this inspection is available on our website [www.careinhand.co.uk](http://www.careinhand.co.uk).

Mrs Sheena Umanee maintains overall responsibility for quality within Care in Hand.

We always welcome feedback on our services from customers or those working with us. Whether you have a compliment, complaint or suggestion on how we can do things better, we'd like to hear from you. Email us on [sheena@careinhand.co.uk](mailto:sheena@careinhand.co.uk)