

# AXIS RECRUITMENT

## Service User's Guide

**(Important:** The model is based on the requirements of Regulation 5 of the Domiciliary Care Agencies Regulations 2002, and Standard 1.2 of the National Minimum Standards for Domiciliary Care for England).

**Notes:**

Service Users are referred to in this document as **Clients**.

The Regulations state that the registered person shall make a copy of the Service User's Guide available on request for inspection at the Agency premises by every Client and any person acting on behalf of the Client.

**Review** – The registered person shall –

- a) keep under review (at least annually) and, where appropriate revise the Service User's Guide and
- b) notify the Commission of any material revision within 28 days.

## Aims and objectives of the Agency

The Agency commits to:

- a) Working with each Client, social workers, relatives, carers (as appropriate) and all others associated with his/her care towards identifying, implementing and reviewing a personal care plan which adequately reflects his/her needs at any one time;
- b) Promoting independent living, working within the Client's range of abilities and competencies;
- c) Delivering care, in the Client's home in a manner which is non-discriminatory, sensitive to the cultural needs of the Client and respectful of their environment and traditions;
- d) Providing a high-quality flexible, responsive and non – intrusive service that is tailored to the needs of the individual;
- e) Ensuring that confidential information is protected at all times and only shared with others strictly in accordance with its policy on confidentiality;
- f) Working in partnership with other agencies involved in care in order to ensure a seamless and cost-effective service.

## Ethos and philosophy

Axis Recruitment Ltd believes that the following statements best describe the values within which we seek to **operate on a daily basis.**

We believe that each Client in our care has the fundamental right to:

- be regarded as an individual and given our special attention;
- be cared for by people who are capable of understanding their needs and are competent to meet those needs;
- be treated equally, and no less favourably than others;
- receive respect and understanding regarding their cultural, religious and spiritual beliefs;
- receive prompt attention in relation to all of their healthcare needs;
- be safe, feel loved and always know that “someone cares”;
- be informed about all important decisions that affect them, and to have a say;
- be afforded privacy for themselves and their belongings;
- have the opportunity to think independently, and make their own choices;
- complain about anything they feel is unfair or unjust, and to have that complaint listened and responded to.

## The nature of the services provided

### General scope of services

The Agency is engaged in the provision of **care support services** to individual Clients in their own homes. These services are based upon an assessment of need, at the time the contract commences, and reflect the requirements of a *Personal Care Plan*.

### Care support services are provided in the following areas:

- Dressing, undressing, into and out of bed etc;
- Personal hygiene, grooming etc;
- Health;
- Food;
- Housekeeping;
- Social, Leisure etc;
- Helping Clients with their personal affairs.

## Service Delivery

### Health and safety assessment

Prior to commencement of service the Agency will undertake a health and safety assessment of the Client's home in order to identify any specific hazards which may be present, and which may present a risk to the health, safety or welfare of the Agency's staff. Where hazards are identified then a risk assessment will be completed and where necessary, advice given as to correction and maintenance. The Agency will not permit staff to engage in any activity where a significant hazard is present, and the risk has not been eliminated or reduced to an acceptable level. In some instances this may require service to be withheld or suspended.

### Assessment of care needs and requirements

The Agency will visit the Client, prior to the commencement of service to discuss and agree the Client's precise care needs. Following this visit the Agency will draw up a *Personal Care Plan* and present this to the Client, together with an accurate assessment of the costs involved, the methods of payment etc. This information, together with the standard terms of business will constitute the contract between the Agency and the Client.

### Review of health and safety assessment and the personal care plan

The Agency will review the health and safety assessment annually, or whenever an accident or an untoward incident takes place. The *Personal Care Plan* will be reviewed in accordance with a schedule agreed between the Agency and the Client.

## Key Contract Terms and Conditions

### Assignment of care workers

#### *a) Recruitment and protection of Clients*

The Agency undertakes rigorous recruitment processes for care workers which includes personal interview, reference checking and criminal records checks with the Disclosure and Barring Service (DBS) The DBS check provides additional confirmation that the care worker is not on the register of workers who are not permitted to work with vulnerable adults and/or children and are properly registered with the Independent Safeguarding Authority.

#### *b) Training and competence of care workers*

The Agency's care workers have received adequate training in relation to the responsibilities which are assigned to them and are assessed by the Agency as competent workers. All care workers employed by the Agency are required to follow policies and procedures which are designed to ensure the highest quality of service to Clients, and to protect confidential information.

#### *c) Continuity of care*

The Agency recognises that care is best given at a time when the care worker and Client have worked together for some time, and will try to ensure continuity in this regard. There will be occasions, however, (such as holidays, sickness etc) when the care worker normally assigned to the Client may not be available. In such cases an alternative care worker will be supplied.

### Keyholding

The Agency will make suitable and permanent arrangements with the Client for entering the Client's premises. Where keys are held by the Agency then the Client will be asked to complete a key transfer form and a receipt will be given.

### Supplies and/or equipment

The Agency does not provide any supplies or equipment in connection with the care services which are to be undertaken. All supplies and equipment (including cleaning aids, detergents, electrical equipment etc) necessary for the satisfactory completion of tasks must be supplied by the Client. The Client will be advised by the care worker when equipment is needed or supplies need to be replenished.

### Refusal/Withdrawal of service

**The Agency may refuse** to provide service where, in its opinion, the pattern and/or type of care requested is inappropriate to, or conflicts with, the needs of the Client or where the Agency believes that it is not competent to deliver the care to the standards required.

Once started, the Agency may withdraw the care provided (either on a permanent or a temporary basis) in situations, for example, where:

- a) The health and safety of the care worker is seriously at risk;
- b) The care worker has received threats of violence;
- c) The care worker has received any form of abuse.

The Agency will endeavour to provide at least one week's notice to the Client of withdrawal of service although in certain situations, for example where the health and safety of the care worker is at risk, withdrawal may be immediate. If withdrawal of service is not permanent, the Client will be advised of the conditions which must be met in order to permit the resumption of service.

**The Client may cancel the Contract** by providing at least one week's notice to the Agency.

### **Fees payable**

The fees payable by the Client reflect the type and frequency of care agreed in the Client's *Personal Care Plan*. There is a minimum charge of one half hour each day.

**Fees are payable monthly, in arrears and are due within 7 days of the presentation of the invoice. The Agency reserves the right to charge interest on outstanding fees as described on the Agency's invoice.**

**The Client will be liable to additional charges in respect of:**

**Travelling expenses**, which will be charged at the Agency's normal rates and outlined in the contract.

Work undertaken on **Public and Bank Holidays** will be charged at **double the normal rate**.

In the event that **the Client employs the care worker** supplied by the Agency then the Client will be liable to pay a fee calculated as per out terms of business for temporary supply.

### **Insurance**

The Agency has comprehensive insurance cover in respect of Employer's Liability, Public Liability and Professional Indemnity.

### **Quality of Service**

The Agency aims at all times to deliver a quality service to the highest standards. Information from Clients is a vital part of the Agency's *Quality Assurance Programme* and Clients will be asked for feedback on the quality of service they have received on a regular basis.

## Complaints and Suggestions

The Agency welcomes complaints and suggestions as a means of accurately judging the quality of its services and identifying ways of improving Client satisfaction. Any complaint made by or on behalf of a Client will be investigated and dealt with under the procedure, a copy of which may be obtained from the Agency. **A summary of the complaints procedure is attached.**

## Hours of Operation

The Agency is proud to say that it operates 24 hours a day, seven days a week and 365 days per year! The Agency's office is open between 8.30 am and 5.30 pm, Monday to Friday. Please call the office on any matter related to your care. If you need to contact someone from the Agency outside of office hours please call the duty care manager on 07830 121668.

## Specific Information on Key Policies

### Access and security

Clients receiving care at home are more likely to be living alone, and may well have some form of disability or impairment which makes them feel vulnerable and unsafe. This is particularly true where Clients lack mobility, and dealing with an actual, or a suspected security issue (e.g. an unlocked door, or open window) can present major problems and anguish. In recognition of this, the Agency is committed to ensuring the security and safety of the home and the Client **at all times when providing care**. In support of this general statement of policy, employees of the Agency are provided with guidance on the proper procedures for entry into a person's home, and security measures which must be followed at all times. Topics covered include:

- *Entering premises;*
- *Written and signed agreements on key holding;*
- *Safe handling and storage of keys outside the home;*
- *Action to be taken in case of loss or theft of keys;*
- *Confidentiality of entry codes;*
- *Alternative arrangements for entering the home;*
- *Action to be taken when unable to gain entry;*
- *Securing doors and windows;*
- *Discovery of an accident to a Client /other emergency situations;*
- *Identity Cards\*.*

\*All employees of the Agency are required to have **identity cards** with them when at work. These cards include:

- A photograph of the employee;
- The name of the employee and the Agency in large print;
- The contact telephone number of the Agency;
- Date of issue and date of expiry of the card.

## Administration of medicines

Many of the Agency's Clients are advised (for example by their GP, local Pharmacist, Community Nurse etc,) to take medicine(s) either regularly, or on an occasional basis, in order to maintain or improve their health. The taking of medicines will form part of the initial needs assessment, and a decision taken as to whether the Client wishes the Agency, and its care workers, to participate in any way in the process of administering medicines to the Client. Typically, the Agency will always try to encourage and maintain the Client's independence, through the Client's own self-administration of medicines, but will provide assistance, as needed, when this has been agreed as part of the Client's *Personal Care Plan*. Where assistance is given by any care worker employed by the Agency, then it will be **undertaken within a strict procedure**, as outlined in the Agency's policy and procedure on the administration of medicines. **Care workers employed by the Agency are not permitted to deviate from the procedures laid down** (or they may face disciplinary action) and are advised to seek advice on any matter of concern either to them or the Client. The Agency and its staff will co-operate with other members of the community team, in relation to individual's medication, and may share relevant information with them, unless the individual has specifically asked the Agency not to.

## Autonomy and independence

The Agency will assess, plan, deliver and review the care services it provides to Clients with a view at all times to promoting autonomy and maintaining/increasing independence. It will do this through a number of activities and processes involving the Client, such as:-

### *Care assessment and personal care plans*

The Agency will involve the Client in the assessment and planning of the care services they need, and seek the Client's opinion as to the most beneficial service which satisfies their own individual needs. Where possible, individual Clients will be offered choice in the care to be provided, and the manner and frequency of its delivery. The Agency's aim will be to tailor a package of care which reflects need, offers choice, and respects the Client's opinion and judgement.

### *Review*

The Agency will agree a review schedule with the Client upon creation of the inaugural *Personal Care Plan*. The Client is entitled to request a review at any time. The review will take into account the manner in which care has been delivered, whether it is meeting the objectives which were set at the beginning, and any changes which have taken place in the Client's overall needs assessment.

### *Personal Finances*

Control of personal finance is a key component of being able to demonstrate independence in living, and the Agency will encourage, enable and empower Clients, where possible, to make decisions in relation to their own lives, providing information, assistance and support where needed.



### *Administration of personal care needs*

Where appropriate, care workers employed by the Agency will seek to carry out tasks assigned to them *with* the Client, as opposed, for example, to simply carrying out tasks *for them*. In this way the Client becomes involved in the care process, and may, over time reduce dependence as both confidence and competence increase.

### **Confidentiality**

The Agency and its staff will respect and protect all confidential information concerning its Clients, at all times. **All Clients will be provided with the Agency's statement on confidentiality**, which outlines the obligations placed upon the Agency to safeguard confidential information, the circumstances whereby the Agency may disclose confidential information, the circumstances where express consent is required and the Client's right to object to any disclosure.

### *Disclosure of confidential information by the Agency*

The Agency is expected, on occasion, to share confidential Client information between members of care teams and between different organisations, in order that the Client is able to receive, overall, the highest quality care. The information may be needed for care purposes involving the Client, (such as delivering the correct care, arranging for care or co-ordinating care) or for such matters as clinical governance or clinical audit.

**Clients may object** to the routine disclosure of information described above if they wish, although they will be advised that this may not be in their best interests.

### **Control of infection**

The Agency recognises its duty to promote a safe working environment for domiciliary care workers and Clients. The control of infectious diseases is an important aspect of this overriding duty. Care, especially intimate care, involves risks of infection which need to be managed in a safe and organised manner including the use of standard/universal precautions.

Standard/Universal precautions **include**:

- Handwashing and skin care;
- Use of protective clothing;
- Safe handling of sharps (including sharps injury management);
- Spillage management.

**Advice will be sought from time to time** from appropriately trained professionals working in infection control.

## Diversity in care

The United Kingdom is a true multi-cultural society and it is inevitable that Clients within the Agency will come from a variety of different backgrounds.

**The Agency’s “Equal Opportunities” policy states that:-**

“All employees, or potential employees, and embraces the principle that all people shall be treated equally, regardless of their age, gender, race, ethnic origin, nationality, colour, religious persuasion or belief, cultural or linguistic background, marital status, sexual orientation, disability, or offending background unless unequal, or different treatment can be shown to be justified and is appropriate”.

This clear unambiguous statement of intent will apply to all aspects of the Agency’s operations and to the treatment of all Clients of the Agency, at all times, whilst, at the same time, taking account of the individual’s special needs with regard to their religion, culture, language etc.

## Gifts, wills and bequests

Employees of the Agency have a personal duty to ensure that neither they, nor the Agency, may legitimately face charges or allegations of malpractice or corruption in their conduct at work. As such, a code of conduct has been developed by the Agency which follows good practice and national standards. This code, embraced within the Agency’s policy/procedure on gifts, wills and bequests, includes advice on:

### *Solicitations – seeking gifts or favours*

Any employee who seeks gifts or favours from Clients in return for the services they are required to provide will be subject to disciplinary action which will, almost certainly, lead to dismissal.

### *Voluntary gifts*

It is not uncommon for a Client, or someone closely connected to the Client, to offer some gift as a mark of appreciation for the high quality of care they have routinely received from the Agency. At the same time, the taking of gifts or acceptance of substantial favours by employees from, for example, Clients, or relatives can give rise to embarrassing situations and may be seen as an improper inducement to give some concession in return to the donor. As such, it is the Agency’s policy to discourage the practice of Clients or relatives offering gifts to care workers, or others employed in the Agency.

### *Clients’ wills*

National Minimum Standards preclude staff involvement in assisting in **the making of or benefiting from Clients’ wills**. As such care workers and other employees of the Agency are instructed to refuse to offer any advice whatsoever, either to the Client, or anyone connected with the Client, on the making of wills, or their contents.

## Handling Client's money

The Agency aims to promote and maintain the independence of Clients in all aspects relating to the care and services they receive and believes that control of money matters is a key element of independence. Clients are therefore actively encouraged to take control of all aspects of their financial affairs, thus avoiding over-dependence on others, even in minor ways. There will be **instances, however, when support is needed, and given**, and it is in these situations in particular where the Agency ensures that simple good practices are implemented and observed, so as to promote trust and avoid disputes, misunderstanding or suspicion.

## People moving and handling

Manual handling of people, (lifting, supporting, carrying, pushing and pulling by bodily force) is one of the most common activities within domiciliary care, and one which, the Health and Safety Executive (HSE) believes, results in substantial injuries each year.

**The Manual Handling Operations Regulations 1992** have established certain principles within which care providers should operate, such as:

- To **avoid** the manual handling activities where it is reasonably practicable to do so; and, where it is not,
- To **assess the risk** and take appropriate steps to reduce it so far as is reasonably practicable.

## “No lifting” policy

**The Agency does not believe that a blanket “no lifting policy”** is a viable option when one of the primary objectives of the Agency is to assist individuals live their lives as independently as possible. Rather the Agency will try to balance the needs of everyone involved in the care process (particularly the needs of the Client on the one hand, and the needs of the care worker on the other) in order to ensure that:

- Care workers **are not required to perform** tasks that put them and their Clients at unreasonable risk;
- Clients’ personal wishes on the type of assistance given to them by the Agency’s care workers are **listened to and respected** wherever possible; and
- Clients’ **independence and autonomy** is supported as fully as possible.

In order to satisfy these essential goals, the Agency will undertake **general risk assessment as part of the needs assessment process**, and ensure that **all relevant issues relating to health and safety** are embraced within the wider context of providing a “*home care service*”. This risk assessment will focus on the needs of the Client and the needs of the care worker, so that care is delivered in a balanced and sustainable way, and one that has taken into account the Client’s lifestyle, personal preferences and functional needs.

## Privacy and dignity

The Agency recognises that most interactions between care workers and their Clients demonstrate some form of dependence upon the care worker, and obligations exist therefore to ensure that a **code of conduct** is observed which ensures that all actions undertaken:

- a) are with the express wish of the Client;
- b) are conducted in such a way that the Client does not feel undervalued or inadequate;
- c) protect privacy and dignity;
- d) promote respect between the care worker and the Client.

Without limiting the extent of the code of conduct in any way, such protection must be observed in relation to some of the more common activities associated with domiciliary care, such as: -

- Dressing and undressing;
- Bathing, washing, shaving and oral hygiene;
- Toilets and continence requirements;
- Medication requirements and other health related activities;
- Manual handling;
- Eating and meals;
- Handling personal possessions and documents;
- Entering the home, room, bathroom or toilet.

### In each case:

- The care worker must be made aware of the nature of the care needs;
- The views of the Client on support and assistance will take precedence, unless otherwise explicitly stated in the *Personal Care Plan* or concerns arise in relation to health and safety;
- The Client will have an individual care plan drawn up with details of the personal care needs and how these are to be addressed;
- If appropriate, written instructions from a professional person as to the nature of the care required may be obtained;
- When accompanying a Client to the toilet, assisting with bathing, dressing or other intimate tasks, care staff must endeavour to maintain a Client's dignity and privacy, only undertaking those tasks that the Client is clearly unable to do.

**Wherever possible** the Client's wishes will be respected concerning the sex of the care worker assigned, (in particular where a *Genuine Occupational Requirement* is evident) when intimate care is to be provided, although there is no automatic reason why a Client should raise concerns about a care worker of the opposite gender.

## Protection from abuse

Abuse is defined as:

“A single or repeated act or lack of appropriate action occurring within any relationship where there is an expectation of trust, which causes harm or distress.”

The Agency is committed to preventing the abuse of Clients. It will strive to achieve this by:

- promoting a strong and identifiable culture of respect and valuing people;
- ensuring that thorough and systematic recruitment practices are followed which ensure that references are taken up for all care workers, and use is made of all checking procedures, particularly the Disclosure and Barring Service (DBS) disclosure process;
- encouraging the role of the advocate for Clients. Clients who have no relatives or friends to act as advocates should be encouraged to have an independent advocate who will act as spokesperson for the Client and participate in care reviews as necessary, Clients who wish to make use of an Advocate, or wish to learn more about such services, should consult the Agency Manager for more information;
- recognising the fundamental rights of Clients to privacy, dignity, maintenance of self-esteem and fulfilment, choice, recognition of diversity, individuality and independence, together with the maintenance of their rights as citizens;
- making relatives and advocates aware of the Agency’s complaints procedure and encouraging them to comment upon the care received by Clients and to participate in reviews of care;
- committing to quality assurance and regular quality reviews;
- ensuring that training is provided on the forms and prevention of abuse and that such training is available to all employees;
- taking action whenever there is suspicion that abuse has occurred.
- utilising management systems which support and supervise employees in their work and facilitate good communications;
- encouraging an atmosphere where employees feel able to discuss and therefore prevent the development of potentially abusive situations;
- ensuring that induction procedures for employees include the prevention of abuse of Clients;
- giving Clients a copy of the Agency’s complaints procedure upon commencement of care and ensuring that they understand how to use the procedure;
- encouraging Clients, their relatives or advocates to participate in reviews of care and to comment on care received.

## Records

In accordance with good practice, and National Minimum Standards, the Agency will introduce into each home where care is provided, a procedure for recording key events and activities associated with that care.

Called “Homecare Record”, the record contains information on:

- Name of the Client;
- Time and date of every visit, with a description of the services provided;
- Assistance with medication. and other requests for assistance with medication and action taken;
- Financial transactions undertaken on behalf of the Client;
- Details of any changes in the Client’s (or carer’s) circumstances, health, physical condition and care needs;
- Any accident however minor to the Client and/or care or support worker;
- Any other untoward incidents;
- Any other information which would assist the next health or social care worker to ensure consistency in the provision of care.

Clients and/or their relatives or representatives will have access to the records in the home. These records will be kept in the home for one month, (or until care ceases, if earlier) after which they will be transferred to the Agency’s office for safe-keeping.

A Client (or their relatives or representative) **may refuse to have records** kept in their home. In such cases the refusal must be in writing, dated and signed, and this statement will be kept on the personal file of the Client in the Agency’s offices.

Clients and their relatives or representatives (with the permission of the Client) may **review the Client’s personal file** kept by the Agency by making arrangements with the Agency Manager. **Such files may be reviewed** as part of the **inspection and regulation process**.

## Safe working practices

The Agency has an overriding responsibility for safeguarding the health and safety of all of its workers whilst at work. However, in the field of domiciliary care, the Client’s home is the care workers “workplace”, for much of the time. While the worker is in a Client’s home, the Agency shares with the Client or their representatives the responsibility for health and safety.

In general, the Agency is responsible for giving adequate training and information to its workers and for developing safe working procedures in relation to the work to be performed. Much of the training and many of the procedures will be applicable across all the home care work of an organisation but the variability of Clients’ homes means that very individual risks and procedures may also have to apply in each one.

The Client will generally be responsible for the condition of the “workplace” itself and for co-operating with agreed safe working procedures. In practice, the Agency is likely to be far better informed about the requirements of health and safety and expected to assist and advise Clients accordingly. It must also be recognised that domestic premises are not primarily designed as workplaces and that alterations or improvements which would be considered routine in a factory or office environment may either be impractical or unaffordable in the Client’s home.

Where a risk cannot be eliminated by practical changes in the Client’s home, the Agency and the Client must agree a ‘safe system of work’ - a procedure for that specific task which will minimise the risk.

**Care will not be provided in any circumstances where, at the same time, the care worker or their Client is exposed to any unreasonable risk.**

### **Vetting of staff**

It is the Agency’s policy to recruit employees who can demonstrate the highest standards of honesty, integrity and competence, relevant to the position they hold. Validation of information is an important feature of the Agency’s recruitment policy, (covering, as appropriate, education, qualifications, training and criminal records) and all prospective employees (in any occupation) will be invited to provide information, at the outset, on whether or not they have a criminal record or have been banned from working with children or adults through inclusion on a statutory list of persons unsuitable for such work. **Criminal Records and the lists of individuals barred from undertaking work with vulnerable adults and/or children (Via the Independent Safeguarding Authority registration process) will be checked in every instance.**

### **Inspections**

**The Agency is subject to periodic inspection** by representatives of the Care Quality Commission (CQC). A copy of the most recent inspection report may be made available upon request to the Agency Manager.

## Contact Information

### Local office of the Care Quality Commission (CQC)

Contact name	Address	Telephone Number
Care Quality Commission	CQC National Customer Service Centre Citygate Gallowgate Newcastle upon Tyne NE1 4PA	<p><b>Phone</b></p> <p>➤ 03000 616161</p> <p><b>Email</b></p> <p>➤ <a href="mailto:enquiries@cqc.org.uk">enquiries@cqc.org.uk</a></p>