

# KingsmithCare

## **Client Guide**

### **A Guide to our Services**

## **1. Aim of this document**

This document gives you basic information about Kingsmith Care and our services. We have written it to provide a useful resource for people using or considering using our service, and for friends, relatives, carers and representatives of people using or considering using our service.

## **2. About Us**

We were formed in 2011 to provide home-care services (also known as domiciliary care). We help care for people who, because they are getting older or have a disability or illness, find it difficult to cope with domestic tasks and personal care needs.

We provide personal, social and practical care in people's homes to help them to stay as independent as possible.

Our services are designed for elderly and other vulnerable people who are physically frail or housebound. We also work with people who are approaching the end of their life.

We work only in Chiswick, Hammersmith and Fulham.

We are a locally-based, independent, family-owned company. This means we are always on hand and can adapt our services to fit your needs and choices.

### **3. Our aims and objectives**

We provide practical, social and personal care and support if you cannot fully look after yourself in your own home. We do this at the times, and in the ways that you tell us are most convenient for you. We aim to provide a realistic alternative to residential care.

### **4. Our ethos**

Our ethos is that 'every action matters'. This means that when a member of staff from Kingsmith Care visits your home and performs any task, we believe that how they do this *matters*. Our staff are expected to carry out every task, however simple, with care and thought.

### **5. Your rights**

Upholding your rights is central to the way we will work with you.

#### **Privacy**

Your right to privacy means that you shall not receive unwelcome attention or intrusion. This means, for example, that our staff will not enter your home, and rooms within your home, without your express permission.

#### **Dignity**

Your right to dignity means we recognise that you are an individual and have specific needs. We will always treat you with respect, and speak to you in the way that you would like. We believe our relationship with you should be warm and trusting, but also appropriate and professional. You can specify whether your care worker is male or female if your personal care needs mean this would make you feel more comfortable and confident

## **Independence**

You are an adult capable of thinking, acting and taking sensible risks without having to continually refer to other people. We will help you manage for yourself wherever possible, so you don't have to become totally reliant on care workers and other people.

## **Civil rights**

We will help you to continue to enjoy your rights as a citizen, so you can for example take part in elections, make use of public services such as libraries, education and transport and continue to participate in community activities such as going to a place of worship.

## **Choice**

It is your right to make independent choices about a range of lifestyle options. We will respect this right by aiming to provide a service that fits into your schedule, not our convenience. We will work with you in a way that welcomes and responds to your personal preferences.

## **Fulfilment**

Your right to fulfilment means you should have the opportunity to continue to realise your personal hopes and aspirations. This means we will recognise and respond to your feelings and wishes, not just your needs. This means for example helping you to take part in a range of social, cultural or religious activities. It might also mean that we support you to prepare for when you die.

## **6. Services we provide**

We are registered with the Care Quality Commission (CQC) to provide home care for older people over 65 years of age, people who have mental health problems, and those with learning or physical disabilities. We have an excellent team of skilled, professional staff who provide the following:

### **Personal care**

Your care worker is able to carry out personal care activities for you, such as helping you to get up in the morning, washing and bathing, dressing, going to the toilet, making your bed, going to bed at night – and many other daily tasks you may need help and support with.

Our care staff can also help you to take any medication that your doctor has prescribed for you, depending on certain limits which we will explain to you.

### **Preparing meals and snacks**

Your care worker can prepare your breakfast, lunch, evening meal or supper, and any other snacks and drinks that you may need during the day. The care worker will be able to sit with you, if you want, while you have your meal to keep you company.

### **Personal tasks**

Your care worker can help with practical tasks such as doing the shopping, helping you to manage personal affairs such as birthdays and other anniversaries and collecting your prescriptions and pension. We can also keep you company, go with you on walks and accompany you to appointments and on trips out.

## **Domestic and household services**

Your care worker can carry out domestic tasks such as vacuuming, dusting and general cleaning, washing up and washing and ironing your clothes.

## **Specialist services**

Some of our care workers are trained to deliver specialist care services to support your specific needs. Specialist services may include assisting you with certain medication, using hoists and other equipment, using a catheter, coping with dementia and other services specific to your needs. We can also provide care that aims to help you to live with your symptoms rather than curing them. This is sometimes referred to as end of life, palliative or terminal care.

## **Support to help you recover**

We can help and support you when you come home from hospital or if you are recovering from an illness. This is also sometimes called re-enablement.

## **Care at night**

We can provide you with a flexible service that cares for you through the night. There are two types of services: night care where the care worker will remain awake through the night to provide frequent attention during the night; and night care where the care worker is there to make sure that you are not alone during the night.

So that we can provide care at your home during the night, we ask that there is a bed for the care worker, who should be able to sleep, or rest,

at your home. We may also need other equipment to be in place in your home.

## **Equipment**

We will always provide our care workers with the equipment they may need to carry out certain tasks. Depending on the care that you are receiving, you may also have to provide our care support worker with the equipment they need to work safely and efficiently. We can help you to get this equipment.

### **7. Services we are not able to provide**

We have explained what we can do. There are also things that we cannot do.

Our care workers will not carry out tasks that need the skills and expertise of clinical professionals, such as doctors nurses and physiotherapists. We will help you to access any of these services if you need them.

Services we cannot provide include:

- cutting your toenails;
- cutting your fingernails;
- syringing your ears;
- removing or replacing catheters;
- helping with gastric feeding (when you eat liquid food through a tube that is put into your stomach);
- all injections;
- changing or filling oxygen cylinders;

- lifting you from the floor;
- tracheotomy care – such as changing tubes or oral suction (using a tube to remove mucus from your throat);
- giving you medication in your back passage or vagina;
- filling dosage boxes for medication; and
- applying creams or ointments (unless they are prescribed or have an appropriate and approved medication form).

## **8. How we provide our services**

### **First contact**

Before we provide any services, we will need to talk with you. You might also want us to speak with a member of your family, a carer or a representative. From the start, we need to be sure that the services we provide are going to be suitable, and we can only do this by talking to you.

We will visit you in your own home and will need to ask you quite a lot of questions. With your permission, we may also need to get information from your carer, your doctor or any other specialists who know about your health and social needs.

Our specially-trained staff will carry out an assessment. It may take around two hours to complete. We do not charge for assessments and we hope that you will not find the assessment too intrusive. We want to build up a full picture and we will do this as quickly and tactfully as possible. We will use all your information confidentially.

## **Assessing the risks**

If you have decided to have care provided in your own home, you will know that there are some risks. Our care support workers will not be with you all the time so there will not be the same level of support as you would receive in, for example, a residential home. On the other hand, you will keep your independence and stay in your own home, and many people find that a small amount of risk can be fulfilling. Still, we want to be sure that everybody involved understands the risks and has thought about them responsibly. So, with you (and your family members or representatives, if needed), we carry out a risk assessment, looking at the risks and the advantages to you of having care provided in your own home. And if it seems appropriate, we will make suggestions as to how unnecessary risks can be reduced.

## **Your care plan**

After we have assessed your needs and the risks in your home, we work with you to prepare a plan for the care we will provide. The plan will say exactly which services we will provide, with details like times of visits and the special tasks we will carry out. It will also say what we all hope to achieve and how we plan to do this.

## **Re-assessing your needs and reviewing the care**

Over time your needs may change. You may need more or less care; we may have to change the type or pattern of service or there may be new risks and opportunities. So, again with your help, we will review your needs and together make decisions about the care we provide. If at any time there are parts of our care which you would like to change, please let us know. We will also ask your opinion regularly so that we are

always aware of your needs and wishes, and so we can adapt the service that you receive from us.

## **9. Our care team**

Kingsmith Care's senior management team is made up of a director and two care managers. They each have a degree or postgraduate qualification relevant to their work. Together they are responsible for office management, staff training and development, evaluation and quality and personnel matters.

We carefully recruit care workers from the local area who demonstrate the right skills, experience and attitudes to provide the service you expect from us. We also follow the strict recruitment and selection guidelines set by the Health and Social Care Act 2008 and the Care Quality Commission. All staff, as a matter of routine, are subject to checks with the Disclosure and Barring Service before they are allowed to work unsupervised with you.

Each staff member has their own unique personality and a multitude of life experiences that they will bring to their relationship with you. Alongside this, all of our staff - regardless of their experience - undertake an induction programme covering essential issues such as the role of the health and social care worker, health and safety, effective communication, safeguarding and duty of care. Our staff are also expected to achieve a Diploma in Health and Social Care (or equivalent) within a given timescale.

We believe that if our staff are to properly support our clients through difficult life transitions such as bereavement and loss, stress, depression

and physical illness, they too need to be supported with the emotional impact of the work. We do this by providing our staff with one- to-one and group support, as well as on-going training sessions.

Our information technology system provides a detailed database of people who use our services, care support workers and records of events. It provides home-care rosters and deals with invoices and wages. It also helps us to maintain standards and to monitor how our services are performing.

### **10. Visiting your home**

When our staff are working in your home they will wear a uniform (a purple tunic with a white Kingsmith Care logo). They will always wear an identification badge which has a photograph of them.

While they are working in your home, our care workers will never bring their partner, children, friends or pets with them.

If at any time a particular care worker is not able to visit you, our office staff will always phone you to explain why, and tell you the name of the replacement care worker.

### **Time sheets**

When your care worker visits you in your home, they need to record the amount of time they spend with you. To do this we use an Electronic Monitoring System. With your permission, carers will call a FREE phone number from your telephone to record both their time of arrival, and departure. Our system recognises who the carer is from their unique pin number, so we know who visited your home and at what time. We then use this information to produce your invoice. Calls made from your

phone are completely free of charge to you. When use of this Electronic Monitoring System is not appropriate or possible, it will be replaced with a paper based system.

### **Time of calls**

If for some reason, your care worker does not arrive at your home at the time expected, please allow at least 15 minutes and then phone our office (the contact details will be at the front of your client file). This is for the care worker's own safety as well as for your care needs.

If you need to cancel a care worker's visit to your home, you will need to give us at least 48-hours notice to avoid being charged.

### **Written records**

Each care worker needs to record the tasks they do during every visit, in line with the care plan we agreed with you. This helps care workers and other health and social-care professionals to see how you are doing. These records also help when a new care worker has to step in to cover work in an emergency.

## **11. Fees and terms & conditions**

Our fees and charges for home-care services vary according to the type of care we provide.

Our fees change every year to reflect variations in the cost of providing our service.

We are a regulated domiciliary-care provider, which means we do not pay VAT, so you will notice that we have not added VAT to our fees and charges.

We will send you an invoice every two weeks, and ask that you pay it immediately on receipt of the invoice.

We can provide you with a summary of your account with us, and receipts for the invoices you have paid, on request.

We can also find out for you if you may be eligible for state funded care when your capital or income drops below a government set threshold.

Our terms and conditions of business are explained in detail in our 'Client Terms and Conditions', which is an agreement between us and you. There is a seven-day cooling off period once the contract is signed, and after this time all cancellations of the service need to be in writing and sent to us either in the post, by hand or by email, 14 days in advance of you wanting the service to end.

## **12. Paying for your care**

There are 2 ways in which care fees can be paid for. You can pay them yourself, or you might be eligible for local authority funding. There might also be circumstances in which some combination of the two works best. So for example you might want to 'top up' what the local authority pays. If you are paying for your own care or looking after the funding of care for a loved one it is essential that you are fully aware of the options available to you. With the right information, guidance and support you

can be sure that your decision is based on your particular circumstances.

It is advisable to seek professional advice from a qualified, specialist, independent financial advisor. Social Services may be able to direct you locally. Alternatively a leaflet produced by the United Kingdom Homecare Association (UKHCA) describes the Care Fees Planning service which provides help, guidance and support to review the options available. Another leaflet, 'Paying for long-term care in England' is available from 'Think Local, Act Personal' (see below).

State entitlement / local authority funding: To find out if you are eligible for funding, you will need to be assessed by your local authority. They will work out the amount of money to which you are likely to be entitled to meet your social care needs. You can use this money to spend on things that meet your needs in ways that make most sense to you. You can manage your budget yourself by taking a 'direct payment'. This means that the money will be paid directly to you. You can also ask the council to manage your budget for you, or you can have a combination of the two.

There is a variety of information available online, which we can help you access:

Paying for Care. Go to [www.payingforcare.co.uk](http://www.payingforcare.co.uk)

Or telephone: 0800 0845 045.

In Control. Go to [www.in-control.org.uk](http://www.in-control.org.uk)

Or telephone: 01564 821 650

Think local, Act Personal. Go to [www.thinklocalactpersonal.org.uk](http://www.thinklocalactpersonal.org.uk) or telephone: 020 7766 7400

### **13. Confidentiality**

Our work means that we need to know a good deal about you. We cannot provide good care without this information. Due to the nature of our business, we cannot guarantee that the information provided will be handled only by the member of staff to whom it was first passed. We do however ensure that information is seen by other staff only on the basis of their need to know.

We have a Confidentiality Policy relating to the handling of this information and we take any breaches of this policy very seriously. A full copy of the policy is available upon request.

We will only break the rule of confidentiality in very extreme circumstances.

### **14. Data protection**

As already mentioned we have to record, store and process a lot of information about you. In line with the Data Protection Act 1998, we have policies and procedures which prevent us from giving your information to anyone else without your permission. Under the Act, you have the right to see the personal information we have about you (depending on some conditions). If you want to see the records that we have of information about you, please contact our office.

### **15. Comments, compliments and complaints**

To make sure that the service we provide matches your needs and your expectations, we are always pleased to hear your feedback. We want to learn from you in order to improve the service we provide. You are entitled to make a complaint or raise a concern at any time. If you want to complain about the services you are receiving, or raise a concern, you should, if possible, discuss the problem with your care worker first. They will do their best to solve the problem. If you feel you are not able to discuss the problem with your care worker, or if they are not able to deal with the problem quickly and to your satisfaction, you should contact your care manager. Their contact details will be at the front of your Care Plan. You can also ask to see a copy of our complaints procedure.

We encourage you to express your feelings without worrying about what may happen. Unless there are exceptional circumstances, we would like you to give us the chance to put the matter right.

### **Advocacy Services**

Advocates are trained to support people by speaking up on their behalf. By talking to an advocate some people feel more able to express their choices and opinions about matters affecting their everyday lives.

Generally advocates are based locally, operated by different agencies in each borough.

If you wish to talk to an advocate, the advocate will make an initial appointment with you during which they will:

- Listen to and establish your views and wishes
- Provide information and discuss the range of available options.
- Represent your views and wishes to service providers.

- Seek to empower you by ensuring you are actively involved in decisions affecting you, and by offering you support to express your views and wishes.

People who have used advocacy services say the benefits for them include:

- Being able to stand up for their rights.
- Obtaining the healthcare, social and housing services that they need.
- Making a complaint when services are inadequate.

You can refer yourself or a friend, or you can be referred by a relative, carer or professional. Advocacy Services are free and we hold details of all local advocacy services at our offices.

Alternatively, if your concern relates to the NHS:

### **Patient Advice and Liaison Services (PALS)**

There is a PALS in every NHS trust. They can provide further information and discuss options with you about how your complaint can be resolved. Some complaints can be taken up by PALS on your behalf. You can find your local PALS office via the website: [www.pals.nhs.uk](http://www.pals.nhs.uk) or

by asking your local GP surgery or hospital for their details. Or you can phone NHS Direct on 0845 4647.

### **Independent Complaints Advocacy Service (ICAS)**

ICAS is a free, confidential and independent service which can help you make a formal complaint about NHS services and has offices across the country. Find out more, including contact details, at [www.carersfederation.co.uk/what-we-do/icas](http://www.carersfederation.co.uk/what-we-do/icas) or by calling NHS Direct on 0845 4647

### **The Patients Association**

This is a national healthcare charity that highlights the concerns and needs of patients. They provide advice, health news, signposting to further information and general advice.

**Helpline:** 0845 608 4455

**Email:** [helpline@patients-association.com](mailto:helpline@patients-association.com)

**Web:** [www.patients-association.com](http://www.patients-association.com)

## **16. How we ensure a good quality service**

We will visit you regularly to check that we are meeting your needs. We carry out spot-checks, individual and group meetings with staff to assess how they are performing.

The Care Quality Commission (CQC) regularly inspects what we do. Our last inspection was in December 2016. You can get a copy of the latest inspection report from us or the CQCs website at [www.cqc.org.uk](http://www.cqc.org.uk) or by telephoning the CQC on 03000 616161

Every year, we also send you a 'client satisfaction survey', and an independent assessor reviews the information and gives us a summary report.

You can also leave a review of our services on the website "Good Care Guide" [www.goodcareguide.co.uk](http://www.goodcareguide.co.uk)

We will also use the feedback you, your family, your representatives and carers provide (and that provided by our other clients) to develop and improve what we do.

#### **17. Our policies and procedures**

To ensure we maintain a high standard of practice we have written down where we stand on certain important matters and how we handle certain common situations. Our policies and procedures cover the following areas:

- Our 'Statement of Purpose', which explains our aims and objectives.
- Personal safety for staff.
- Making sure we keep information confidential.
- Making sure we do not discriminate against anyone.
- Health and safety.
- Moving and handling people we care for.
- Dealing with accidents and emergencies.
- Dealing with abuse and bad practice.
- Data protection and giving the people we care for access to their care records.
- Meeting client's nutritional needs
- Helping with medication.

- Handling money and dealing with financial matters on behalf of people we care for.
- Maintaining records in the home.
- Dealing with challenging behaviour.

- Entering and leaving people's homes.
- Complaints and compliments.
- Staff discipline and complaints.
- Staff learning and development.

These policies and procedures are available for you to inspect at any time.

We also follow the code of practice for social care workers and their employers as issued by the General Social Care Council (GSCC).

You can get copies of this code of practice from us.

## **18. Equality and Diversity**

We subscribe to the view that equality and diversity are all-encompassing principles. By following them, it ensures that people receiving a service have their individual needs comprehensively addressed and that they are treated without discrimination. This takes place regardless of the individual's ethnic background, language, culture, faith, gender, age or sexual orientation.

We do not assume that equality and diversity principles apply only to staff. Our clients must also respect the ethnicity, culture, religion, gender and disabilities of staff, and not discriminate against them on any of these grounds.

## **19. How to contact us**

Our office is staffed between 9.30am and 5.00pm, Monday to Friday. Our staff will be able to answer any questions you may have. Outside of these hours your call will be taken by our duty manager.

You may contact us:

by phone: 020 7871 9450

by email: [info@kingsmithcare.co.uk](mailto:info@kingsmithcare.co.uk)

by post: Bishop Creighton House, 374 - 380 Lillie Road,  
London SW6 7PH.

More details are available at our website: [www.kingsmithcare.co.uk](http://www.kingsmithcare.co.uk)

## **20. Insurance cover**

We are fully insured to deliver care services in your home, (except nursing care). We have employer's liability insurance of £10 million, and public liability (including malpractice and treatment risks) of £10 million. You can get a copy of our insurance policy and schedule from our office.

## **21. Revisions of this document**

We review all of our policy documents from time to time to make sure that they are still relevant and accurate. We welcome any comments you have about this or any other document we provide.

## **22. Useful contact details**

We hold an up to date database of local, regional and national contacts that might be useful for you. If you would like us to help you to get in touch with organisations that may be able to help you (including charities, advocacy groups, support groups and specialist health and social-care advice groups), please let us know and we will do our best to help.