



**FINALISED SOCIAL ACCOUNTS**

**July 2007- June 2008**

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### **Appendices:**

- Appendix 1: Service User Evaluation Form**
- Appendix 2: Service User Interview Form**
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- Appendix 6: Employee Focus Group Results**
- Appendix 7: Board of Directors Consultation Results**
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### **Further Appendices: Available to the panel**

- (1) Scottish Commission for the Regulation of Care Annual Report on HHC
- (2) HHC 2007 Annual Chairperson Report & Financial Summary
- (3) Service User Introduction Pack
- (4) Copies of Board Minutes
- (5) Employee Contract

## 1 Introduction

The Chairperson of Highland Home Carers (HHC), Nick Boyle, was approached by Cooperative Development Scotland (C:DS) in September 2007 and offered the opportunity for the Company to participate in a Social Accounting and Audit Pilot Initiative run in conjunction with the Social Audit Network (SAN).

Highland Home Carers is a unique organisation within the field of social care in that there is only one other employee owned care organisation operating in Scotland. The bulk of independent care at home companies are privately owned, and increasingly the sector is dominated by a number of large country-wide organisations. We feel privileged to be both locally-based and at the forefront of a new development in this field.

The question of whether to join the project was considered and given backing by the Board of Directors and a decision was made that Highland Home Carers should implement a period of social accounting tied to its financial year. It was agreed that such a process would enable the company to seek the views of stakeholders about its service provision. We decided that it was important to focus on stakeholder perspectives with a view to acting on them and improve the quality of our service. The information gathered by the Social Accounts will assist Highland Home Carers to improve our practice thus benefiting our service users and employees.

Managing Director, Stephen Pennington, was asked to create a small team to undertake the Social Accounts, and he recruited Jocelyn Mitchell, a carer and Employee Director, and Cath McCormick, a part-time support worker, to join him.

Although HHC has previously consulted with service users in the form of postal questionnaires on company performance, the information gathered had not always been analysed in a comprehensive manner, nor acted upon in the best way possible. The process of social accounting and audit provides the opportunity to engage more fully with selected groups of stakeholders; the information will be considered in greater detail and presented for all to see. The process will provide indicators for the future improvement of our services.

At the end of the process, the Highland Home Carers Draft Social Accounts were verified by an approved social audit panel which convened on 8<sup>th</sup> September 2008. The accounts have been modified in accordance with the wishes of the panel.

## 2 Background to Highland Home Carers

Highland Home Carers was founded in 1994 by the current Chairperson, Nick Boyle, and became a Limited Company in April 2001. It has grown to become one of the major independent providers of home care and support services in the Highland region.

In April 2003, Stephen Pennington was recruited to manage the company and to put it onto a more professional basis. Nick wished to secure the future of the company as an independent successful company for its employees and service users, and after reading an article in a national newspaper, he approached the Baxi Partnership Trust to negotiate a sale of HHC to its employees. Accordingly in July 2004 the ownership of the company was placed into the hands of the employees, and a Board was selected to oversee the business. The Board comprises 2 Executive Directors, 3 elected Employee Directors and 1 Non-Executive Director. The Board is responsible for setting the policy and strategic direction of the company, as well as ensuring that its financial basis is strong.

The transfer into employee ownership was facilitated by Baxi Partnership Ltd (BPL), which provided the funding to purchase the majority of Nick's shares, and placed half into an Employee Benefit Trust (EBT). BPL continues to hold the other 50% in the form of preference shares which will be released when the loan which funded the buy-out is repaid. However Baxi do not operate any controls over the running of the company on a day to day basis, nor have they taken up an option to place a Director on the Board. There is however an open invitation for them to attend all our Board meetings. The current deal secures their role in partnership with HHC in perpetuity, since they are bound by their own trust deeds to ensure that the company will continue as an employee-owned organisation, and have the authority to step in and appoint a majority of the Board if there were to be a threat to this status. The EBT now holds the ownership of the company on behalf of the employees. Through a Share Incentive Plan (SIP), shares are given to employees each year to signify their ownership of the company. These share issues are allocated according to criteria set by the Board on the recommendation of the EBT trustees, who are also elected by the employees. The shares can be sold back to the company after a certain holding period dictated by the Inland Revenue (HMRC), and the market remains an entirely internal one. (For further information about BPL, please consult its website on [www.baxipartnership.co.uk](http://www.baxipartnership.co.uk))

The day to day decision making and management of the company is undertaken by Stephen and the operational management team of 4 persons. Each has a depth of experience and qualifications in social work or nursing and have lived and worked in the Highlands for many years. The company prides itself on being locally based with no formal attachment to any national organisation.

Highland Home Carers currently employs 139 members of staff: 127 of these employees are Care and Support staff and the remaining twelve staff members are administration and coordination & management staff.

Highland Home Carers provides a home care, live-in care, support and housing support service for older people and people with disabilities in Inverness and the Highlands. The majority of our service users are referred and funded by the Highland Council. In those cases, we are usually contacted by a Social Worker who has already completed an assessment of an individual's needs, and developed a care plan. There is an element of negotiation as to whether we can fulfill the requirements of the package of care or support. Charge rates are fixed so in general there is no need to discuss financial aspects. However approximately 20% of the care & support we provide is to individuals who purchase it privately. They or someone on their behalf contacts us and we arrange for a member of the operational team to visit and agree what assistance from a carer or support worker might be required. An introduction pack is provided including charge rates. A contract is signed prior to our commencing the provision of the service.

Our Care and Support staff members are all employees – many of whom work part-time and are able to combine work with other family interests and commitments including other jobs.

The nature of the work provides a level of flexibility and control over their working time. Given the distances involved in working in the Highlands we carry out much of our communications in matching staff members to service users by telephone and email.

We can also provide emergency cover, although do not have care/support staff on call, apart from in the area of Nairn & Ardersier. There is an emergency out-of-hours telephone line so that service users & their families, the Social Work Service and staff members can get in contact with us at all times.

### **3 Mission, Values, Objectives and Activities**

The company had not previously held a specific mission statement and objectives. The Social Accounting team drew on literature already held within the company to draft out each of these statements as a first task in November 2007; they were refined after discussion with groups of employees, and advice from Alan Kay (SAN), and finally adopted by the Board in December 2007.

#### **MISSION STATEMENT:**

**“Highland Home Carers aims to provide a flexible, quality home care and support service, enabling individuals to remain in their own home with assistance in maintaining their current lifestyle and promoting independence where possible”**

#### **VALUES:**

- Providing a flexible, professional service
- Promoting an inclusive approach within the company
- Maintaining privacy and confidentiality, respecting rights and promoting equality

#### **CORE OBJECTIVES AND ACTIVITIES:**

##### **1 To enable service users to stay in their own homes with our support by...**

- Providing a 24 hour personal, domestic, live-in care, support and housing support service
- Providing an out of hours emergency phone number with staff based locally to respond effectively
- Employing trained and trustworthy staff, checked through Disclosure Scotland, to provide the said services
- Being as adaptable in our approach as is reasonably possible
- Doing our utmost to provide the service required by the user and tailored to their needs

##### **2 To be a fair and good employer and promote inclusion in the workplace by...**

- Working in association with Baxi Partnership Ltd (BPL) with staff becoming shareholders after one years employment with the company
- Providing a regular high standard of formal and informal training leading to improved performance and qualifications
- Providing appropriate supervision of staff
- Working to achieve improved conditions of service
- Recognising employees needs for flexibility and family friendly working hours
- Organising and managing an employee saving scheme

##### **3 To be a financially viable company by...**

- Maintaining sound financial management and monitoring practices e.g. reviewing accounts at board meetings, etc.
- Employing the services of an accountant and finance officer to ensure efficient administration
- Regularly reviewing accounts and records to ensure invoices are settled and accounts updated

##### **4 To contribute to the local community and economy by...**

- Providing a public service which keeps money in the local area, employing local people
- Purchasing goods and equipment from local businesses where possible

## **SUPPLEMENTARY OBJECTIVES AND ACTIVITIES:**

- 5     **To be an environmentally conscious company by...**
- Recycling where possible e.g. paper, tins, etc
  - Only using power when necessary e.g. switching off lights, etc.
  - Providing employees with bikes
  - Matching staff and locations in such a way as to try and limit petrol use
  - Purchasing goods locally where possible therefore reducing petrol consumption in transport
- 6     **To promote and support community initiatives and charitable organisations not necessarily directly involved with the company by...**
- Buying in food for training days and meetings from a local cafe staffed by individuals with a learning disability
  - Enabling employees to devote time to charitable organisations
  - Organising activities for our service users, particularly those most socially isolated

#### 4 Stakeholder Analysis

The list of company stakeholders was discussed and decided upon by the Social Accounting team and approved by the Board after initial proposal by Stephen Pennington.

It was decided that in the first year of Social Accounting those consulted would only be the key stakeholders - those who are predominately affected by the company and they are in the first column of the table below. This refers to, most importantly the service users and company employees. These are followed by the Board members, Baxi Partnership Limited, as Highland Home Carers only partner, and the Highland Council Social Work Service, as the main purchaser of our services. Here we also have Private Service Users, these are people who pay themselves for our services rather than have a package provided for them by the Social Work Services(See paragraph 2 page 12 for a fuller explanation).

After discussion with the Social Audit panel we realised that our stakeholder mapping was not nearly extensive enough and shown here is a very basic account of our stakeholders. In our next round of Social Accounts we will endeavour to produce a more rounded, in-depth stakeholder map using the Mind Mapping computer programme and brainstorming with employees to come up a more extensive stakeholder list.

Other identified stakeholders may be consulted in future social accounting periods.

See page 43 to where we indicate our future plans for Social Accounting and Audit.

Key Stakeholders	Other Stakeholders
<b>All service users (est. 250):</b> Council Funded Privately Funded Family members of service users	
<b>Employees (124):</b> Home Carers, Support Workers, Home Carers/Support Workers (113) Administration Staff, Management & Coordination Staff (11)	Employees' families
<b>Board members (6):</b> Elected Directors (3) Executive Directors(2) Non-Executive Director	Minute taker
<b>Partners (1):</b> Baxi Partnership Ltd	
<b>Purchasers:</b> Highland Council Social Work Service, Private service users & families	NHS Highland
	<b>Home carer organisations:</b> UKHCA SCAH
	<b>Regulatory bodies:</b> Care Commission Highland Council SWS Contracts Team Supporting People Team
	<b>Finance:</b> Accountants – Johnston Carmichael Bank – Royal Bank of Scotland
	<b>Local community</b> Suppliers of goods

## 5 Scope and Methodology

### 5.1 Social Accounting Period

The period of Social Accounting and Audit that Highland Home Carers chose follows our financial year and runs from July 2007 until June 2008. We have taken the decision to commit to an annual period of social accounting and audit.

### 5.2 Who did the work?

When HHC decided to implement its period of Social Accounting and Audit, Managing Director Stephen Pennington appointed Employee Director Jocelyn Mitchell and support worker Cath McCormick to undertake the work with him. It was agreed that the major tasks involved the information gathering and this would be conducted by Cath and Jocelyn, with Stephen taking on a mainly advisory role. All three participants were motivated and enthusiastic regarding the project and this team has worked well together. The guidance of Alan Kay of the Social Audit Network has proved invaluable. There has also been immense learning at the series of workshops organised by C:DS, where each of the participating organisations in this pilot project have been able to share thoughts and ideas.

### 5.3 Who has been consulted and who has been omitted from the social accounts?

It was decided that in our first foray into social accounting we should focus our attention on our Key Stakeholders, those being Service Users and where appropriate their families, HHC employees, Board members, Baxi Partnership Ltd and the main purchasers (other than private service users) which is the Social Work Service of Highland Council.

Those omitted from the consultation include employees' families, the local community, NHS Highland, other independent home care providers, regulatory bodies, our accountants and bank, and suppliers of services and goods.

Although we have not consulted directly with any of the regulatory bodies, the Care Commission conduct a yearly inspection of Highland Home Carers and all social care organisations and their 2008 report is included with the additional appendices(1).(documents which are available to the panel and in the HHC office to anyone else with an interest in viewing them). The Care Commission inspection report is available online at [www.carecommission.com](http://www.carecommission.com)

### 5.4 Who has been consulted about what?

As each stakeholder group has been consulted about varying aspects of the company's performance and Mission, Values, Objectives etc. we have included a matrix detailing exactly who has been consulted about what, as shown below:

Stakeholders	Topics consulted on							
	Services	Mission statement	Values	Obj.s	Act.s	Treatment at work	Training	Commu'n
Service Users	✓ Q'aire		✓ <i>Inter'ws only</i>		✓ <i>Indirectly</i>			✓ <i>Interviews only</i>
Employees		✓	✓	✓ <i>Q'aire only</i>		✓	✓	✓
Board Members		✓	✓	✓		✓	✓	✓
Baxi Partnership		✓	✓					
Social Work Department Private users		✓	✓	✓ <i>Obj.1</i>	✓ <i>Obj.1 Activities</i>			

## **5.5 Methodology**

After discussion it was agreed that we would use a combination of questionnaires, semi-structured interviews and focus groups to gather qualitative information from our Key Stakeholders. We have included representative comments in the Draft Social Accounts.

The information gathered through these methods has then been reported using narrative descriptions and in the form of graphs, pie charts and tables. These enable those interested to see the results of the consultation and opinions of those consulted at a glance.

## Key Stakeholders Consultation

Key Stakeholder Groups	Topics you want to ask each stakeholder group about	Consultation Method	When	Comments
<b>Service users and family members</b>	Values and Objective 1 Service received Communication Reputation Employee ownership	Questionnaires and interviews with private service users	Feb 2008	250 questionnaires sent out. 143 were returned. 10 private Service Users were interviewed and they were randomly selected from our list.
<b>Employees:</b> Carers, Live-in, Carers, Support Workers, coordination office staff, Management	Mission, Values and Objectives 1, 2, 3, 4, 5, 6 Terms and Conditions Employee ownership	Questionnaires, Focus Groups	Mar 2008	124 questionnaires went out, 56 were returned. Four Focus Groups were held attended by 29 staff members
<b>Board Members</b>	Mission, Values and Objectives 1, 2, 3, 4, 5, 6 Employee ownership	Questionnaire and Focus Group	May 2008	Focus Group at the Board Meeting was attended by 5/6 Directors
<b>Partners:</b> Baxi Partnership Ltd	Mission, Values.	Interview	May 2008	Interview with the Baxi Partnership representative – Carole Leslie
<b>Purchasers:</b> Social Work Department Private Service Users	Mission and Values, Objective 1. Opinions on employee ownership	Focus Group	Apr 2008	Focus group with 4 members of the Highland Council Social Work Department. 9 were invited.

First to be consulted were the **Service Users** with all 250 being sent a questionnaire (see appendices) regarding HHC performance and service provision. After discussion the decision was taken to refine and add to previous years' service evaluation questionnaires. Although this meant that the service user's questions and results would not link directly to the Mission, Values and Objectives it was strongly felt that a) the questions were relevant to our service provision and b) the questionnaire was kept as short and uncomplicated as possible to ensure maximum response. It was felt that anything too lengthy and complicated may deter Service Users from responding. To this end we decided not to consult on individual activities at this stage either. The questions posed were closed questions with a choice of answer for ease of analysis although opportunity was also given for written comments.

The next step was to interview ten **private Service Users** to expand on the questionnaire results. We chose this number because it was manageable, and did not contact individuals who had already been sampled by the Care Commission Inspection. It was felt that this was an important area to explore as private service users actively choose HHC to provide their service as opposed to being provided with a package through the Social Work Service. With Direct Payments and the personalisation agenda, this is an area in which Highland Home Carers may need to expand in the future, and it would be valuable to begin to understand what influences their choice. Ten interviewees were chosen randomly by picking every tenth user from a list of names. Where an individual could not or did not wish to take part the next name on the list was chosen. Jocelyn and Cath interviewed five of these people each. The interviews were semi-structured with a choice of answers provided as well as open ended questions.

The next group to be consulted was the **employees**, with all being sent a Questionnaire. The questions posed were again multiple choice, with room given for comment (see appendices). Employees were given the opportunity to volunteer to participate in a Focus Group but as no-one took us up on this offer, we randomly chose attendees using the same method as with the Service User interviews. Two Focus Groups were held in Inverness, and attended by nine employees each out of ten invitations. One Focus Group was held on the West Coast of the Highlands in order to include six of our more isolated staff, and the Fourth was held in the HHC office with five office staff present.

The method used in the Focus Groups along with room for general discussion of topics and suggestions was a variation of an H-form with those present being asked to score the questions on a scale of 1-10. The results could then be reported and compared in chart format. In the first Focus Group held, we did not get many comments when it came to the Values section of the meeting as some of those present appeared to fail to see the relevance of the exercise. When it then came to the Objectives we tried to go through the same exercise. Unfortunately all present appeared to lose interest, feeling that these were somewhat repetitive and again there seemed to be a general lack of understanding as to the relevance of scoring the objectives. As such the decision was taken to exclude this part of the agenda and move on to our discussion topics and scoring on treatment at work and training. This format was then repeated throughout the employee Focus Groups with the Objectives being excluded except for that of the office staff who were consulted on Objectives 4 and 5. This was simply due to the fact that they appeared to have an understanding and enthusiasm for the process.

**Board members** were consulted in the form of a Focus Group which took place at a Board Meeting on 29/5/08. Five board members were present as unfortunately the sixth non-employee member was unavailable. Again the scoring of 1-10 was used as this had previously worked well for us.

An informal interview took place with the **Baxi Partnership** representative Carole Leslie which was followed up further by E-mail, Carole giving opinions on the Social Audit framework.

Our last consultation took place on 19/6/08 with members of the **Social Work Services** teams of Highland Council who contract with HHC. Nine Team Managers were invited to attend or to send a delegate in their place and four representatives did manage to attend.

## **6 Report on Performance**

### **6.1 Overall Performance**

Our Mission Statement is...

**“Highland Home Carers aims to provide a flexible, quality home care and support service, enabling individuals to remain in their own home with assistance in maintaining their current lifestyle and promoting independence where possible”**

#### **a) The Care Commission**

The Care Commission Officer carried out an Inspection on 20<sup>th</sup> March 2008 and made no Requirements as a result. There was one Recommendation as follows:

*It is recommended that the complaints policy, procedure and recording is reviewed and updated to ensure it is robust, fit for purpose and demonstrates resolution*

The care commission report was very positive regarding Highland Home Carers service provision. The following are a brief selection of service user comments taken from the report:

‘Service is a lifeline’  
‘Very happy...good staff’

The report went on to say that some service users that were interviewed by telephone had indicated that HHC’s service was helping to maintain their independence at home, without which they felt they would be forced into care.

Staff training was also given a good review in the report.

#### **b) Views of the Service Users**

The service users were not asked directly about our mission statement but rather the overall quality of the service provided.

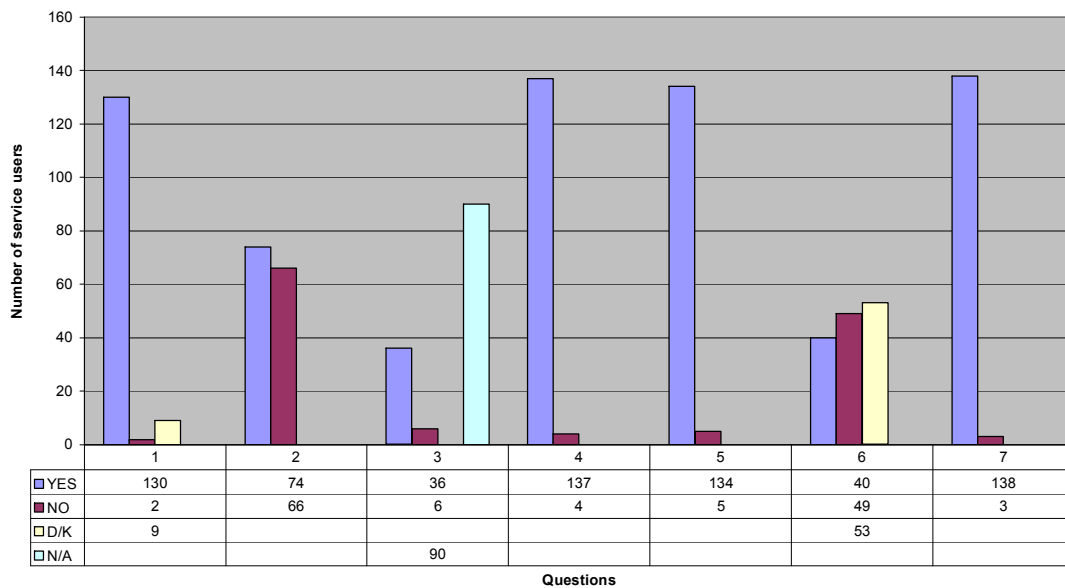
Out of a total of 250 questionnaires sent out to service users, 145 were returned, 143 of which were completed. Three of these were only partially completed.

Overall we had a 57% response rate which is a successful response and provides a good indication of the service users’ perceptions.

The overall response from service users points to the majority feeling that they do receive a flexible, reliable and quality service from Highland Home Carers, and are comfortable and confident with staff. Overall the feedback has been hugely positive and supportive of the company and employees.

**Table 1**

**SERVICE USER EVALUATION REPORT**



1. HHC aims to provide a flexible service .Do you think we achieve this?
2. Are you aware of the 24hour emergency phone service provided by HHC?
3. If you have used this service, did you feel you received a helpful response?
4. Do you feel comfortable and confident with HHC staff?
5. Do you think that the carers/support workers are reliable?
6. HHC is an employee owned company. Do you think this has any effect on the service provided?
7. Do you think HHC provides a quality service?

Of the 143 service users' who took part in the evaluation 57 (40%) made comments and suggestions. **The following are a selection of the comments received:**

*Keep up the good work* *Thoroughly satisfied with service*  
*Punctual, kind and very willing to help with requests*  
*Staff on the whole have been conscientious, on time and have a pleasant manner...*

On a less positive note, of those who responded, there were five who referred to occasionally having experienced a breakdown in communication between office staff, carers/support workers and the service users themselves with, for example, messages not being passed on to the necessary person. This is an area which will need to be addressed in the near future with action taken to improve the current situation.

In addition to this, a small number of respondents mentioned a lack of continuity in the carers they received, stating that they had visits from several different carers over a short period of time. As Highland Home Carers appreciates the importance of consistency and building up a trusting relationship between carers/support staff and service users, because of the value of knowing an individuals needs, this is also an area in which service provision can improve.

**Positive comments from the service user interviews:**

*Staff extremely helpful and nice* *Without Highland Home Carers what would we do?*  
*Carers all dedicated* *By jings we are looked after well!*

**Negative comments from the service user interviews:**

*Carers are well trained but communication skills are lacking in the office.*  
This was the only negative comment received.

In the individual interviews with service users, when asked “Do you think HHC have a good reputation?” 8/10 said yes, 1/10 no and 1/10 don’t know.

The one user who answered ‘no’ to this question explained that she had previously heard nothing of HHC in her area and felt the local community hospital where she received treatment lacked information on the company and home care in general. She went on to say that she would give HHC a good reference and recommend us to friends. For the full service user evaluation report see *appendix 2*.

**c) Views of the Employees**

***Do you think the Mission Statement is a suitable description of what we do?***

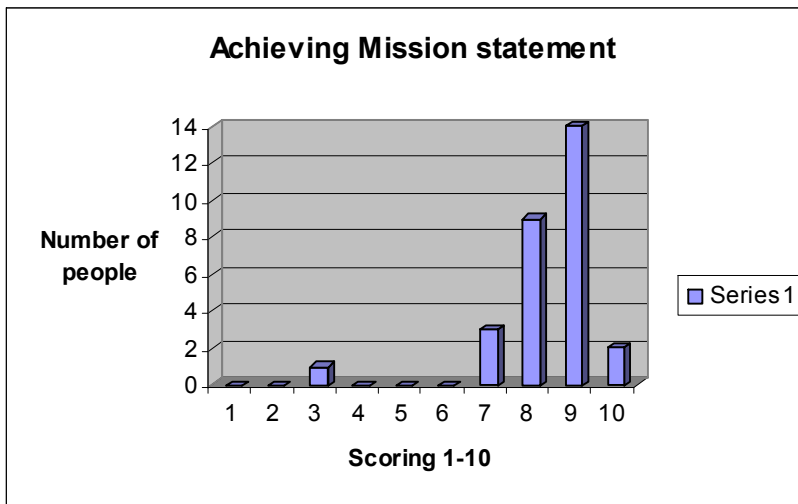
**Table 2**



As can be seen from the pie chart 98% of employees who responded felt that the mission statement is a suitable description of what Highland Home Carers do and none thought it is not. Everyone agreed that the statement encompassed what the company is trying to do and felt it appropriate.

When consulting with employees in the staff Focus Groups those taking part were asked if HHC is achieving the goals as set out in the mission statement. The chart below shows the response of those employees (where a score of 10 is *very much achieving* and 1 is *not achieving at all*).

**Table 3**



On the whole the statement was scored highly. Reasons given for low scores included lack of time off (due to no staff cover) and inadequate support for staff, thereby preventing them doing the job to the best of their ability; it was suggested this has a knock-on effect on the service provided and so reduces the achievement of the Mission statement.

In the Focus Groups one employee felt that occasionally there may be a failure to 'promote independence' due to interference from family members. He felt it should be made very clear to relatives that carers are there to do what the individual wants and needs rather than what the family thinks they need.

It was stated by one individual, and agreed by others, that the company does everything in its power to achieve the mission statement, but restrictions imposed by the council and outside bodies due to lack of available funding, infringes upon our ability to do so. This caused some employees to place their score lower down the scale, unlike the majority who based their score on the company efforts.

**d) Views of the Board members**

On the question of achieving the mission statement, the five Board members rated HHC performance on a scale of 1-10. One rated achievement at 8/10, three at 9/10 and one at 10/10. Most present felt they could not score as highly as a ten as there are occasions when HHC is unable to completely fulfil its mission due to external constraints. One person suggested that perhaps HHC could do more to challenge the Social Work Service on its assumptions that a residential or nursing care model is cheaper and engage more to change that perception and perhaps better meet the needs of those in the community.

**Selected comments:**

*This is what we do  
Do a good job  
Accurate reflection*

When asked if anyone would change or add anything to the statement, nobody had any alternatives.

**e) Views from Baxi Partnership**

The Baxi representative, Carole Leslie, was asked about the appropriateness of the mission statement as well as whether she believes HHC is achieving it. Carole felt the statement should perhaps include a reference to the employees. She also mentioned a speech once given by the company chairperson Nick Boyle where he spoke of the tremendous privilege to

be able to give people choice and his statement that *'this is what we do'*. The conviction of Nick's words made an impression on Carole and she felt that this perhaps did not come across strongly enough in the Mission Statement. As regards to achieving the mission, Carole stated that "yes" she thinks HHC do it to the best of their ability, but could possibly do better if more resources were available.

#### **f) Views from the Social Work Service representatives**

The four social workers who attended the consultation meeting all felt the statement was appropriate and had nothing to add to it. However when questioned about HHC's overall service provision those involved stated that they use HHC because of the: *'reliability, adaptability and flexible personalised service....'*

#### **Summary**

- **Service users feel that they receive a flexible, reliable and quality service**
- **Communication at various stages of the service delivery needs improving**
- **Employees agreed that the Mission statement is appropriate and in the main we are achieving it**
- **Both Employees and Board members feel that funding restraints can impinge upon our ability to achieve the Mission statement**
- **Board members thought the Mission statement to be an accurate reflection and stated 'this is what we do'**

#### **Action points**

- **Address Care Commission recommendation on Complaints Policy**
- **Continue current practice of sending out news letters and information to employees and service users**
- **Look at ways to improve staff cover at peak periods**
- **Improve dialogue with purchasers through regular meetings**
- **Arrange a meeting with Social Work Services to discuss service provision**

## **6.2 Values**

As with the mission statement the company did not previously have any explicit written values, although the foundation of the company was based on strong standards and implicit values. These stated values were developed within the Social Accounting team and refined in discussion with Alan Kay in December 2007. The three values are:

- **Providing a flexible, professional service**
- **Promoting an inclusive approach within the company**
- **Maintaining privacy and confidentiality, respecting rights and promoting equality**

#### **Overall responses on the Values**

##### **a) Views of the Service Users**

In the Service User questionnaire we did not ask directly about the company values. However, this was addressed in the ten private Service User personal interviews. They were asked how well do we live up to them:

Value 1: 4 persons stated *very well*, 4 - *quite well*, 1 - *ok* and 1 - *poorly*. This latter interviewee, a family carer, was expressing a negative reaction to an issue which had already been addressed.

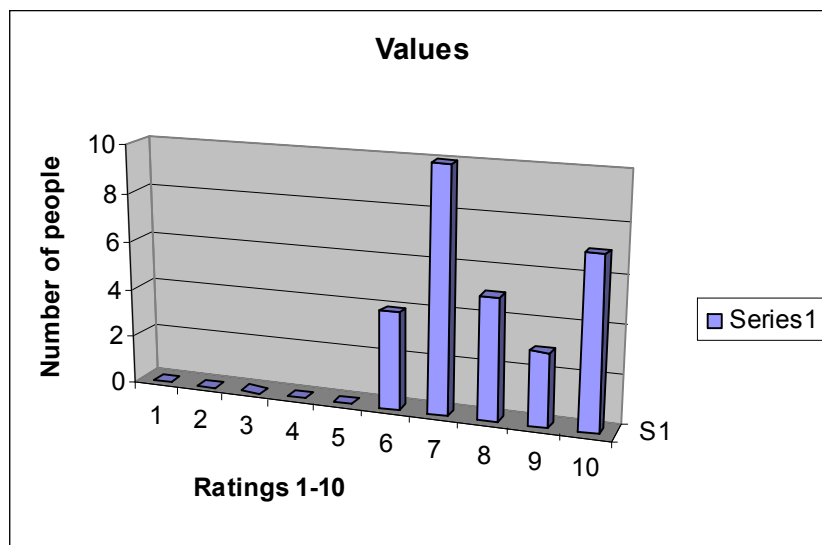
Value 2: 1 *very well*; 4 *quite well*; 2 *ok* and 3 *did not know*.

Value 3: They gave the following answers: 3 - *very well*; and 7 - *quite well*.

## b) Views of the employees

Staff attending the Focus Groups were asked if the values as a whole are appropriate. The chart below displays the results:

**Table 4**



We can see that all rated the values with higher scores from 5-10. Most appeared to feel that they are certainly values the company should be striving towards. Where the scores were only just above the mid-point, this reflected confusion over the question asked. Some have apparently based their answer on if we are achieving them rather than if they are appropriate although the distinction between the two was stressed.

All present rated the values highly, agreeing that these were values the company should be aiming to achieve. It was stated that nobody could disagree that these were good values and that we do provide a professional, flexible service.

In discussion it was stated that new carers commencing in the work and not knowing what to do had a bearing on the professionalism of the service provided. The comments made at this stage will be included later in the report, although it was felt that not enough shadowing (this refers to a new employee being accompanied and guided by an experienced staff member) has an impact on the quality of service provided and therefore on whether we achieve the values. It was stated that *'HHC were slightly better in this area than other agencies'*.

## c) Views of the Board Members

All present at the Board discussion agreed that these are values we should be striving to achieve. There was discussion about changing the wording of the second value as the meaning may not easily be understood. This will be reviewed at the end of the audit.

## d) Views of Baxi Partnership

When asked what she thought of the company values Carole stated that she agreed with HHC values but felt that they should include some reference to *caring*. This statement was taken to mean 'caring' in the sense that HHC and its employs are a 'caring' company.

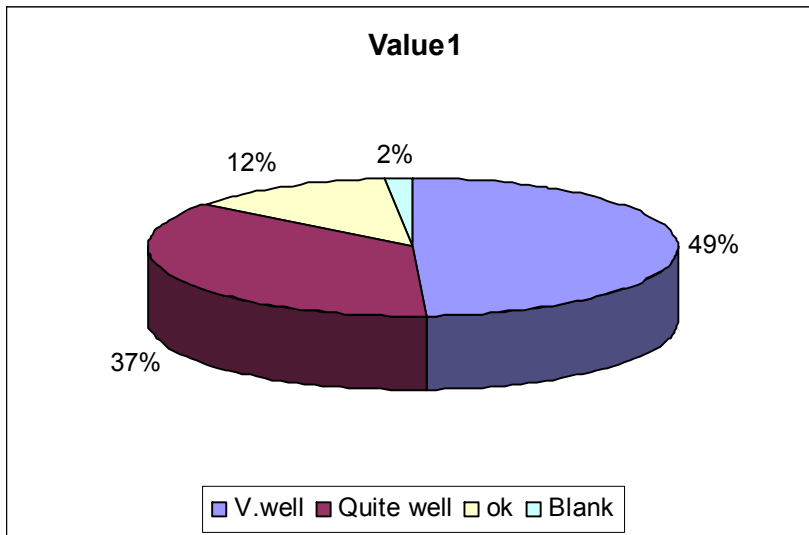
## Value 1: Providing a flexible, professional service

### a) Views of the employees

HHC employees were consulted on the values in the employee questionnaire and in the Focus Groups. The following pie chart shows the results from the questionnaires:

*How well do you think we live up to Value 1?*

Table 5



A high majority (86%) of responding employees feel we are living up to Value 1

### b) Views of the Board Members

*Is this value appropriate?*

All five members rated this at 10/10.

## Value 2: Promoting an inclusive approach within the company

### a) Views of the Service Users

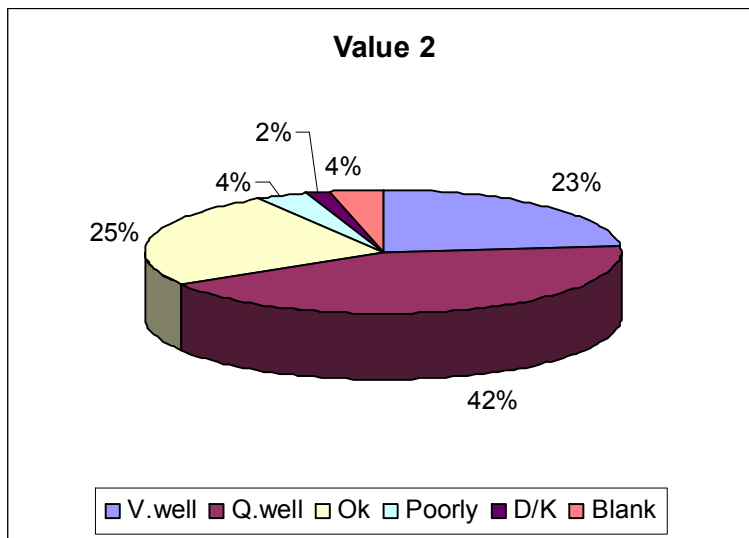
In response to how well do we live up to value two, the service users interviewed answered: **1 - very well, 4 - quite well, 2 - ok and 3 – don't know** .

It was agreed that this value relates more to HHC employees than service users so that it was hard for them to answer.

### b) Views of the Employees

The company employees were asked in the questionnaire how well do we live up to Value 2. Their answers are displayed in the chart below:

**Table 6**



Again a majority (65%) felt that HHC was living up to Value 2 very or quite well; this Value is of most relevance to the employees

**c) Views of the Board Members**

*Is this value appropriate?*

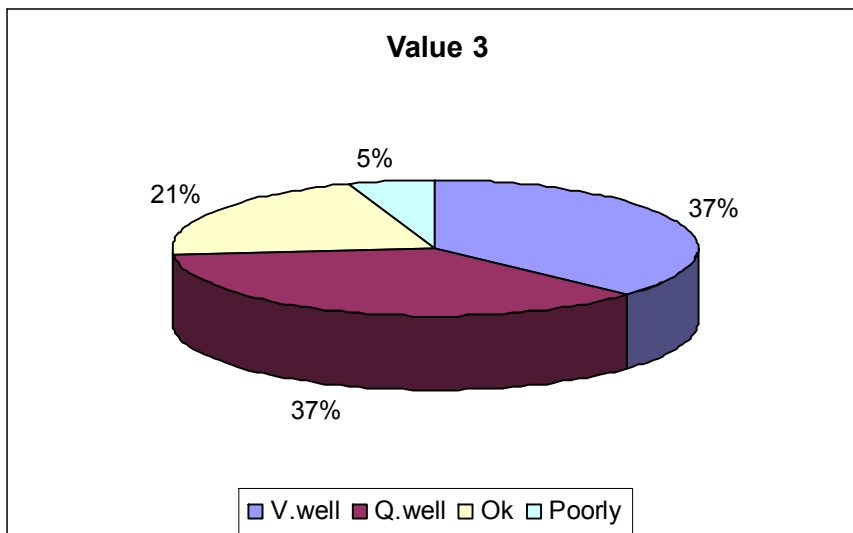
All five members rated this at 10/10.

**Value 3: Maintaining privacy and confidentiality, respecting rights and promoting equality**

**a) Views of the employees**

As previously the employee questionnaire asked how well does HHC live up to Value 3? The chart below displays the employee answers:

**Table 7**



Nearly three-quarters (74%) of the respondents felt that this Value was being lived up to well.

#### **b) Views of the Board Members**

All five members rated the appropriateness of this value at 10/10.

#### **Summary**

- **Service users were positive that the values were being met**
- **Employees and Board members agree with the values and feel that HHC is living up to them**
- **Some employees felt that HHC could do better in living up to the values**

#### **Action points**

- **Ensure the Values are given a higher status throughout the whole company**
- **Improve communication skills between the office and care/support staff through regular meetings and newsletters**
- **Appoint a member of staff with the express remit of identifying communication breakdowns and facilitating their prevention in the future**
- **To review the stated Values, including the wording of Value 2 and breaking Value 3 into two separate Values**

## **6.2 OBJECTIVES**

### **Objective 1: To enable service users to stay in their own homes with our support**

This was agreed as our primary objective because this essentially is what Highland Home Carers is all about. HHC aims to provide service users with an alternative to entering into an institutionalised setting such as a hospital or care home.

During the period covered by these social accounts, HHC has provided Service Users with a total of 188,351 hours. This is the amount of direct contact time received by Service Users and does not include the additional time spent in meetings, reviews and on record-keeping.

Approximately 75% of the work undertaken by HHC falls under the category of Home Care, the majority of this work is Personal Care. The other 25% is Support Work, of which 3/5ths is Housing Support funded through Supporting People.

The out-of-hours emergency phone service is manned by staff from the office with access to the database and service user details, but there is no log kept to show how many calls are taken by the service. This is due to the extra resources that would be required to do so and added pressure on staff. However all messages are documented.

#### **a) Views of the Service Users**

Although not asked directly about this Objective, the Service Users were asked a question on Activities 2 and 3 which contribute to HHC to carrying out Objective 1:

#### ***Activity2: Providing an out of hour's emergency phone number with staff based locally to respond effectively***

Service users were asked: *Are you aware of the 24hour emergency phone service provided by HHC?* Only 53% reported that they were aware of the emergency phone service with 47% not knowing about it. Since then this issue has been dealt with in the form of a letter reminding Service Users that Highland Home Carers do indeed provide this emergency facility and informing them of the contact telephone number.

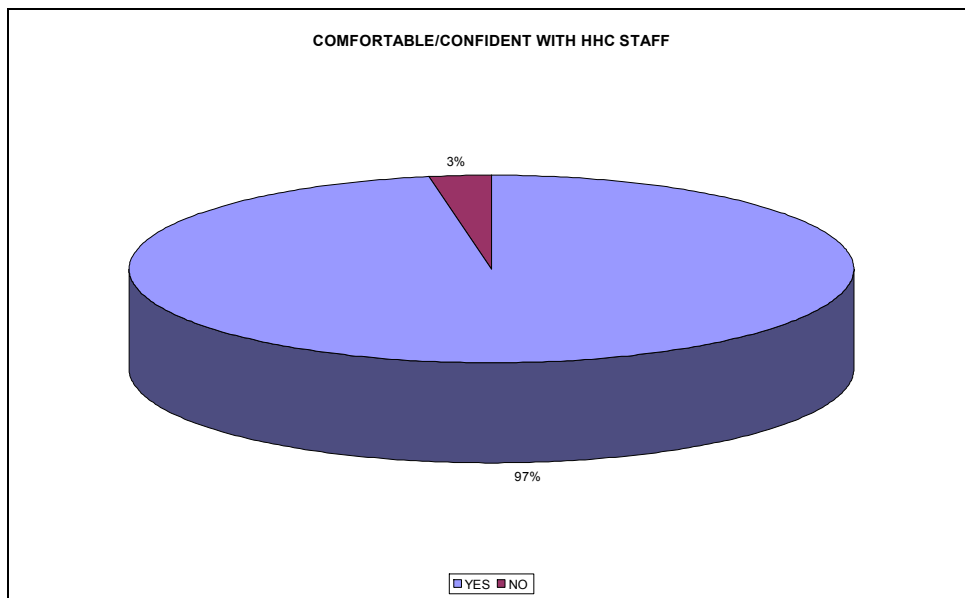
Those who had accessed the emergency number were asked if they had received an appropriate response:

84 respondents had not accessed the number, 34 (85%) people ticked that they had received an appropriate response, and 6 (15%) that they had not. This appears a high negative response, but on looking at the questionnaires, a likely explanation is that they ticked NO instead of N/A.

**Activity 3: Employing trained and trustworthy staff, checked through Disclosure Scotland, to provide said service**

The vast majority of those who responded are comfortable and confident with HHC staff with only 3% stating otherwise, as is shown in the chart below:

**Table 8**

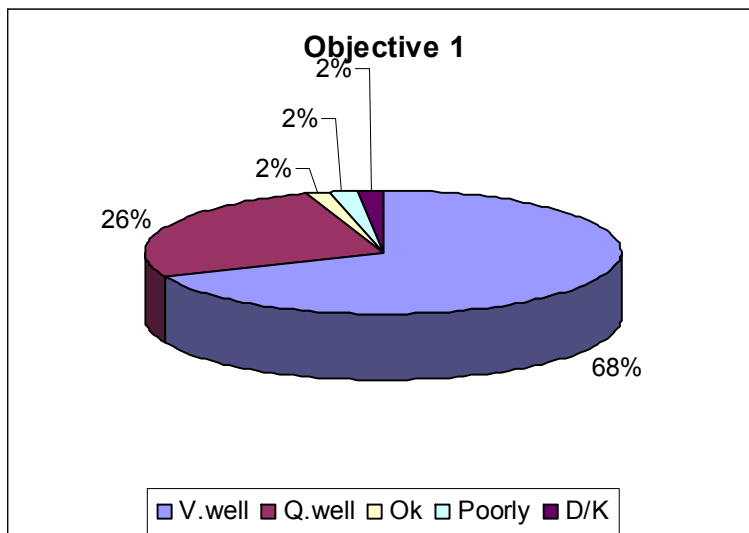


**b) Views of the employees**

Employees were consulted on the Objectives in the questionnaire and to a degree in the focus groups. The following chart shows the results from the questionnaires:

**How well do you think we achieve our objective of enabling people to stay in their own homes?**

**Table 9**



**c) Views of the Board Members**

***How well are we achieving this Objective?***

The Board Members rated Objective One as follows:

2 persons scored 8/10 and 3 persons 9/10 (where 10 is *very well* and 1 is *not at all well*)  
Members stated that at times HHC does not quite achieve this Objective; it can be prevented by finances and sometimes family members.

**d) Views of Baxi Partnership**

Carole Leslie was not consulted on any of the Objectives because it was felt that these areas do not directly concern the Baxi Partnership.

**e) Views of the Social Work Service representatives**

The consultation with the Social Workers focused entirely on Objective 1 and its related activities. While the whole of this consultation is reproduced in the appendices the following are some of the main points to emerge:

***Activity 1.1 Providing a 24 hour personal, domestic, live-in care, support and housing support service...***

All agreed that HHC do provide the services well.

***Activity 1.2 Providing an out of hours emergency phone number...***

Yes - all were aware of the stand-by service. Two Social Workers had experience of accessing it either themselves or through their service users, and found this to be very helpful. This was stated as one of the reasons for using HHC, because of the personal contact and caliber of support.

***Activity 1.3 Employing trained and trustworthy staff...***

All agreed that HHC staff are generally well trained (and sometimes more so than other agencies). Points were raised about areas where additional training could be beneficial. In conclusion, it was stated that training is fairly good but could be better and one individual stated it is excellent.

***Activity 1.4 Being as adaptable in our approach as is reasonably possible***

One individual stated that in the main we are extremely flexible - *'someone always gets back to me, other agencies don't'*

***Activity 1.5: Doing our utmost to provide the service required...***

One participant referred to a lack of HHC staff to cover evening shifts and work having to be put elsewhere. This referred to occasions when the regular support worker was not available and suggested replacements are not found to be suitable for the particular service user.

In conclusion the meeting was asked if anyone had any more general comments about the Company and the following comments were elicited:

*(HHC used for...) Reliability, quality, adaptability, flexibility and personalised service.*

*There is always someone there when you phone*

*Sometimes have to use other agencies when HHC are too busy*

## Summary

- **A substantial number of the service users who responded were not aware of the 24 hour emergency phone service**
- **Those who had accessed this facility were satisfied with the response they received**
- **97% of service users surveyed felt comfortable and confident with HHC staff**
- **Employees believe we are meeting the Objective of enabling service users to remain in their own homes**
- **Social Work Service representatives were very positive about HHC and the achievement of Objective One and its accompanying Activities**

### Action points

- **Produce a quarterly newsletter for Service Users to keep them informed**
- **Service users have already been informed of the emergency phone service and will be reminded in the future through the newsletter**
- **Investigate the cost and value of a telephone log system**
- **Investigate and report on the cost/benefit to users of the out of hours telephone service**
- **Better training for staff and evidence that it is happening**
- **Aim for greater flexibility in service provision by encouraging Service Users to engage more with office staff regarding changes to their Care/Support package**
- **Measures have already been implemented to achieve greater flexibility including half hour care visits which HHC had not previously undertaken (an hour being the shortest visit time) and changes are made to the times of bed runs to suit individuals' changing needs**

## Objective 2: To be a fair and good employer and promote inclusion in the workplace

Objective two was included because the company believes that it is vital to be a fair and good employer, so that we receive a level of commitment in return. As an employee-owned company, HHC strives to create a sense of belonging and inclusion within the company. We are committed to developing a partnership culture throughout our structures and operations. This we have pursued by holding staff meetings and training sessions, putting out regular newsletters, as well as the formal opportunity to elect Directors.

In addition to all employees having a vote each year to elect a new employee Director – the elected person serves for 3 years – employees who have worked for HHC for at least 6 months qualify to receive free shares in the Company. Shares are allocated on a formula agreed by the Board on the advice of the Employee Benefit Trust. HMRC rules dictate that the shares must be held for 5 years before they can be cashed in without being subject to tax payments. Shares can only be held by employees and will be forfeited if the individual leaves the employment of the Company.

In the period relevant to the Social Accounts, staff have received 827 hours of training and 38 hours of shadowing. This amounts to a total of 865 hours. These are the figures recorded in the data base, but administrative staff inform us that there is in fact more time given to both activities, without it being recorded in this way. Sometimes care/support staff are paid by additions to wages. 156 hours were allotted to formal individual and group supervision, but much informal supervision goes unrecorded in a direct manner.

In addition to formal training, e.g. moving and handling, time is also given for some employees to study for SVQs and the Home Care Practice License. Staff are also encouraged to approach management with details of courses they would like to pursue. One staff member completed an Open University course in Health and Social Care last year which was funded by the company. Another employee is due to begin training as a Social Worker in

October sponsored by Highland Home Carers. It is also interesting to note that according to the 2006- 2007 Baxi partnership survey 70% of employees who responded were happy with the training they received. Highland Home Carers also provides training required to meet compliance issues as required (see page 41 for full list of compliance procedures,policies and codes of practice).

A large number of HHC employees work part-time and are able to combine work with other family interests and commitments including other jobs. The nature of the work provides a level of flexibility and control over their working time.

Information on terms and conditions is included within the contract of employment, a copy of which is available in the appendices.

The company also provides bicycles for staff who wish to use them to travel between service users. As well as benefiting the health of staff, this practice is also environmentally friendly. Since the scheme was initiated in 2005, 21 bikes have been issued to employees, and 13 remain in operation. (2 have been gifted to employees who have left HHC, 2 have been stolen, 2 written off and 2 returned to the pool)

HHC initiated a Staff Savings Club, subsequent to the Farepak debacle when a number of employees lost their savings. It is run and managed at arm's length from the Company, and participants elect to have savings deducted from pay and transferred straight into the scheme. Since 4<sup>th</sup> July 2007, there have been a total of 27 members of the Club:

There are currently 19 employees saving regularly with the Club;  
 Total deposited £19,355.02; Total withdrawn £11,735.00;  
 Interest earned £77.36 – for common good purposes.

**a) Views of the Service Users**

The service users were not consulted on the company objectives but again the evaluation questions did relate to the themes of the objectives and the activities.

**b) Views of the employees**

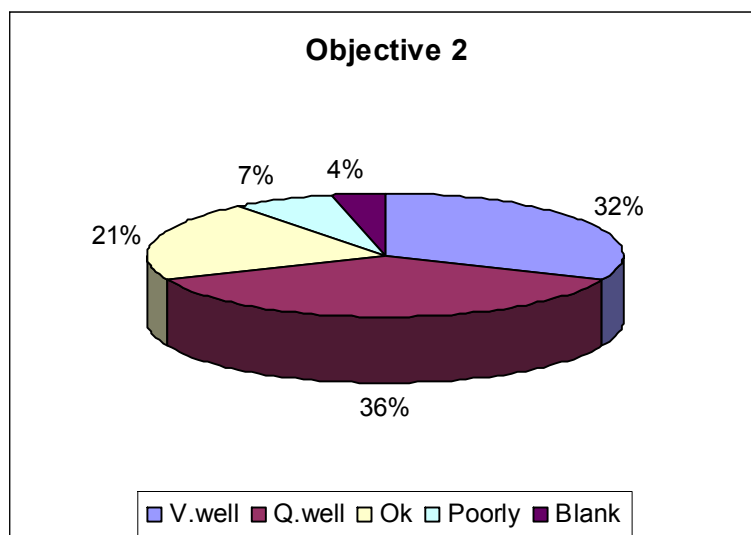
**Summary of Baxi Survey**

Each year the Baxi Partnership conducts an employee survey across their partner companies. The survey was conducted at the latter end of 2007, and the summary report is included as an Appendix.(see appendix 10). In the main this survey compares HHC performance in comparison with fellow partnership companies.

Employee results from the questionnaire:

***How well do you think we achieve Objective 2?***

**Table 10**



Employees were also asked what motivates them about their job. They were asked to tick the box for any or all of the items in the column that accurately represent their feelings, then number 1-5 (1 being the **most** important) for the items that most influence them.

There appears to have been considerable confusion relating to the completion of this table, as employees filled the table in various different ways. For instance, some numbered their priorities 1-5 in the correct column as intended but others numbered all the way from 1-10 and others rated 1-5 in the happy/unhappy column instead. As such the numbers, particularly in the priorities column do not add up. With hindsight we realise that the wording and presentation of the exercise could have been clearer. The priorities column in the table reproduced below has been left blank due to this confusion but displays the numbers of staff who are happy/unhappy with important aspects of the job.

**Table 11**

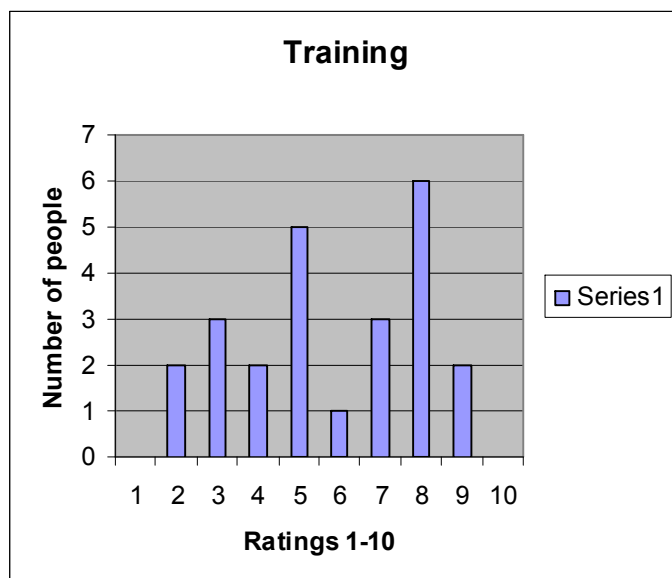
	Happy/ Motivated	Unhappy/ Unmotivated	Priorities
<b>Pay</b>	31	21	
<b>Job security</b>	43	13	
<b>Terms and conditions of employment</b>	47	6	
<b>Safety from discrimination, bullying and harassment</b>	41	10	
<b>Appropriate facilities and supervision</b>	34	15	
<b>Training and developing new skills</b>	31	20	
<b>Ability to grow and be challenged through work</b>	35	15	
<b>Opportunities to develop and advance in your role or in other roles within the organisation</b>	27	21	
<b>Control and flexibility over your own work</b>	45	10	
<b>Recognition and appreciation of your work</b>	33	32	
<b>Communication</b>	23	32	

**Activity 2: Providing a regular high standard of formal and informal training leading to improved performance and qualifications.**

Staff were questioned in the Focus groups about the training provided and their opinion of it, in relation to Activity 2.

**What do you think of the training you have had?**

**Table 12**



5 of those present did not respond to this question, as explained in the Focus Group report.

Some of the staff present felt that although the training they have had was good, they had not been given enough training, particularly recently. This is reflected in the generally low scoring of this question. In retrospect, this question was not particularly well phrased.

In the Focus groups, employees were also asked about what training they wanted/ felt they needed. The following are some of these suggestions:

Training wanted:

- First aid/ yearly
- Seizures/epilepsy
- Peg feeds
- Catheter care
- Moving and handling
- Moving and handling on site
- Dementia /Alzheimer's
- Diabetes
- MS
- Choking
- Communication issues
- Writing reports
- Rights and responsibilities
- De-escalation
- Mental health issues
- Refresher courses
- Pressure care
- Training to suit individual client needs

All other staff wanted more training and many felt there had not been enough recent training. There was also a general feeling that there should be more 'shadowing' for new, inexperienced employees. That said, most enjoyed the training they had been given.

### **c) Views of the Board Members**

#### ***How well are we achieving this Objective?***

Board members rated achievement of this objective with one at 7/10 and four at 9/10.

The person who scored a '7' stated that this was an area in which we ought to do better and more could be done to promote inclusion. Also that HHC is a relatively fair and good employer.

**d) Views of the Social Work Service representatives**

Social work department representatives were consulted only on Objective one and its activities and none of the remaining objectives.

**Summary**

- **The majority of the stakeholders consulted on this Objective felt that HHC is a fair and good employer**
- **Employees felt that the training was good but there should be more**
- **One member of the Board stated that more could be done to promote inclusion**

**Action points**

- **To develop more training opportunities especially for remote workers**
- **To survey more carefully employees training needs**
- **To make a concerted effort to involve staff more in decisions about the company, again using meetings and newsletters but also with more interaction between Staff and the employee directors**
- **Instigate an employee of the month scheme and reward system**
- **To investigate the possibility of a staff pension scheme**
- **Review policy statements to include all national standards**

**Objective 3: To be a financially viable company**

This objective exists simply because the company must be financially viable to remain in business and serve its purpose to service users and employees alike.

Prior to HHC becoming employee owned, all financial aspects of the Company were managed by Nick Boyle, as the proprietor, and the company accountant, Brian Main, now of Johnston Carmichael. Baxi required that the Company provide properly audited accounts, and Jim Murray of Baxi has assisted us in developing annual budgets. Brian remains involved as our accountant, and his independent advice based on his long knowledge of the Company has been invaluable. We employ a bookkeeper/financial assistant, Aureen Hardie, on a part-time basis, working from home, to produce our monthly accounts and manage the tax and NI aspects of the wages. All employees are paid fortnightly in arrears for the work they have undertaken. Within the office, the administration team is responsible for all purchasing and monthly payments of invoices. All such payments have to be authorised by the Managing Director or Chairman. Detailed accounts are presented monthly to the Board for approval, and the annual audited financial report is presented at the Annual General Meeting, which is usually held in November.

The annual accounts for 2007-08 are still being processed and awaiting audit. However draft figures are available and can be seen by the panel, should you wish. The key aspects are:

**Table 13**

	<b>DRAFT 2007-2008</b>	<b>ACTUAL 2006-2007</b>
<b>TURNOVER</b>	£2,462K	£2,093K
<b>GROSS PROFIT</b>	£761K	£648K
<b>OPERATING PROFIT</b>	£307K	£218K
<b>PROFIT POST TAX</b>	NK	£94K

Highland Home Carers (HHC) has achieved consistent growth over the last 3 years with an average increase of approximately 15% per annum. Based on the current level of business in the final month of the 2008 financial year, this level of increase is likely to continue into 2009 taking the business close to the £3m level.

The growth in turnover has been achieved without any reduction in profit margins and the containment of overhead increases has ensured that the net profitability of the business has improved. This increased profitability is necessary so that the business can generate the cash resources to maintain the quality of service provision, fund future expansion and enable the repayment of long term debt.

**Table 14**



To date no dividends have been paid on shares, and because of the 5 year holding rule, no shares have yet been cashed in by employees. The first round of shares given to employees in 2004 will be ready to be cashed in to the Employee Benefit Trust at the end of 2009. The Board took the view that it was extremely important that those employees who wished to realise their value at that time, should not be prevented from doing so because of lack of funds. Accordingly they opened a special investment account and have deposited sufficient money in there to cover all the potential sums required. At the same time, it is recognized by the Board that the employee buy-out created a debt to Baxi Partnership, which must be repaid in the future, and savings to meet this sum are also required

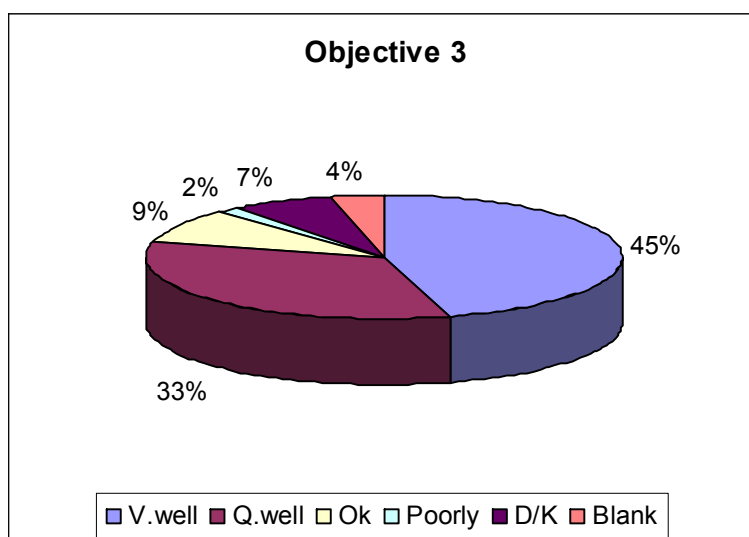
Instead of dividends to share owners, the Board has granted bonus payments to all staff when cash flow has been healthy. During the past financial year, bonuses were paid as follows:

18<sup>th</sup> July 2007 - £58.14 each to all employees who had been with the Company for 6 months  
 10<sup>th</sup> December 2007 - £50 to all employees

**a) Views of the employees**

Employees were asked: *How well do you think we achieve this objective?*

Table 15



It is interesting that 22% of employees are unaware of the financial viability of their Company or have a sense that HHC is performing only moderately, as opposed to the reality of the financial position

#### b) Views of the Board Members

##### *How well are we achieving this?*

All Board members rated this Objective at 10/10.

All agreed that the company is financially viable and *"it does really well"*. It was stated that the Board is as vigilant as can be, although there is always potential for bigger profit. This statement was followed by the comment that the company would never be purely profit driven; it has never been the prime motive and never will be.

##### Summary

- The majority of stakeholders consulted felt HHC is achieving this Objective to be financially viable
- A surprising number of employees were not aware of the financial position of the Company
- While the company is viable and the Board is as vigilant as possible, it was stated that profit has never been the prime motive and never will be
- There remains a significant and increasing debt to Baxi Partnership

##### Action points

- The Company must remain financially vigilant for the sake of its employees
- A strategic plan for the repayment of the debt must be established
- Funds to cover the value of the shares issued must be retained
- Keep the employees better informed about the financial position of HHC

#### Objective 4: To contribute to the local community and economy...

The Social Accounting team decided upon this objective as the company prides itself on being a local business, established in Inverness and employing local staff. The company provides local people with a service enabling them to remain a part of their community. HHC also endeavours to purchase from other local companies thereby contributing to the local economy.

Highland Home Carers impacts on the local economy in that the company provides employment for a current total of 139 staff. 40 have joined the company in the last twelve months and the recruitment of staff is an on-going process. Any advertising for staff is placed locally, and if people living outwith the area enquire about employment with us, we always tell them to contact us again when they have an address in the locality. New staff are always required as more service users are taken on and the Company continues to expand. The workforce all live locally, this referring to Inverness, Ross-shire, and the Highlands and Islands. As such those employees bring money into the area where they live.

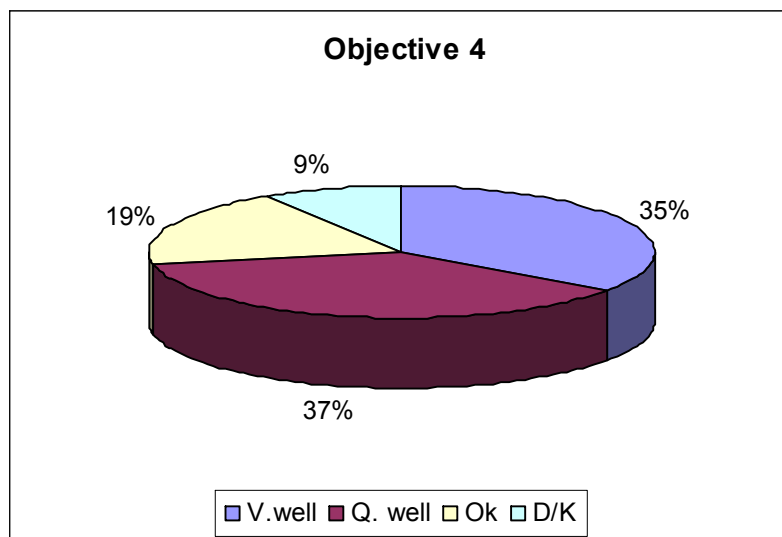
Wages paid from July 2007 – June 2008 = £1,698,247

Highland Home Carers also tries where possible to purchase from local independent businesses. Supplies such as gloves, aprons, bicycles, stationary and IT equipment are all purchased from local firms. We have actively resisted all attempts by the Scottish home care organisations to enter into joint purchasing agreements.

##### a) Views of the employees

In the questionnaire, employees were asked: ***How well do you think we contribute to the local community and economy?***

Table 16



Almost three-quarters of the staff thought that we were making a good contribution.

The office staff were also questioned in their Focus Group about Objective 4 and two rated HHC's achievement at 7/10 and three at 8/10.

## **b) Views of the Board Members**

### ***How well are we achieving this Objective?***

On this objective, two Board members rated 8/10, two 9/10 and one 10/10.

It was stated that HHC does actively favour local purchasing having switched suppliers of stationary and computer hardware to local businesses. It was also stated that employees are all local, living and spending locally. That said, it was also stated that the company could do better in this objective and are sometimes limited in what is locally available.

### **Summary**

- **Overall the stakeholders consulted believed the company is achieving this Objective**
- **It was stated by the Board that HHC could do better in this area**

### **Action points**

- **Continue to use local businesses and encourage employees to do so**
- **Discuss and report on the appropriateness of an ethical purchasing policy**
- **To work with all employees to look at how we might make a greater contribution to the local community and economy**

## **Objective 5: To be an environmentally conscious company**

This objective was created by the team because we felt that environmental issues should be at the forefront of all our minds, be it individuals or companies. However we decided that it should not be one of the core Objectives to be addressed in this Social Accounting period.

Highland Home Carers does not currently have a written environmental policy, although we have, in a limited way, tried to become as environmentally conscious as possible. As part of this accounting process, we have decided to initiate such a policy using 'The Green Office Guide' for reference.

Materials in the office are recycled when possible, although no formal record is kept of this. Items that are recycled include cans, plastic bottles and paper. Confidential documents are shredded prior to recycling. It is also felt that if the Highland Council was more active with its recycling policy and opportunities, then we could do better. The Highlands appear to be slower than other regions in its recycling practices.

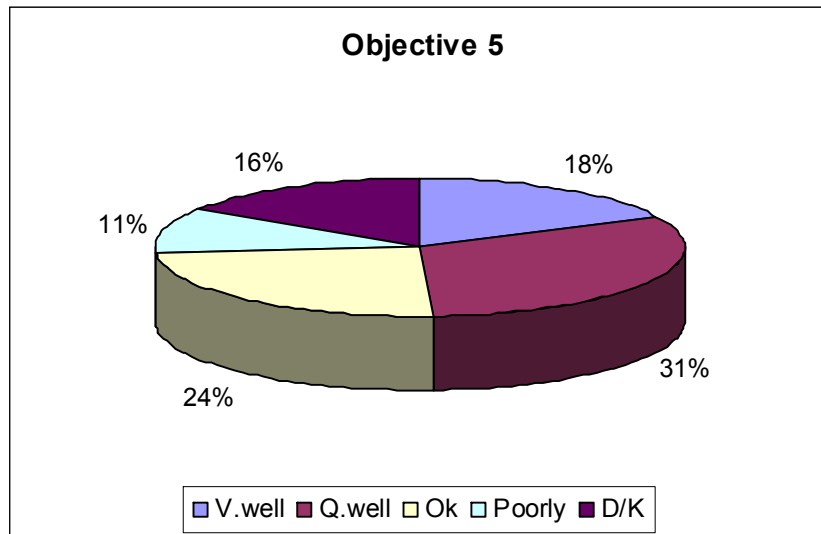
Energy efficiency is taken into account with lights in the office being turned off when not required.

The company also provides bicycles for employees who wish to use them to get around. We currently have 13 bicycles in use. However we do remain very dependent on cars being used by care/support staff in order to do their work and maximise their income. The office staff who draw up rotas and allocate work have been asked to consider where somebody is travelling from before they ask them to attend. To assist in this process we have invested in a postcode routing tool for our database, although at present we have been unable to install it. Anecdotal evidence from care/support staff would suggest that they are not being asked to make as many cross-town journeys. The most recent Board meeting agreed a change to our mileage payment policy, a product of which should be a decrease in the amount of miles undertaken. Ironically, it was the introduction in 2006 of a generous Highland Council mileage payment scheme that has acted as a disincentive to the reduction in car miles.

### a) Views of the employees

Employees were asked in the questionnaire: ***How well do we achieve this objective of being an environmentally conscious company?***

Table 17



Only 49% of respondents thought we were doing *well*, and a not insignificant 27% thought *poorly* or *did not know*.

Office staff were also consulted on this objective in their Focus Group and rated achievement with two scoring 6/10 and three 7/10.

### b) Views of the Board Members

The Board members scored one 5/10, one 6/10, two at 7/10 and one 8/10.

Board members commented that the company could do a lot better- particularly with matching staff to location. It was also stated that they could do a lot more as a company in being more environmentally friendly.

### Summary

- **HHC could do a lot more to improve on environmental practices**

### Action points

- **Implement a Green office checklist**
- **Appoint a member of the office team to take responsibility for environmental issues**
- **Continue to limit the use of cars when alternative transport is available**
- **Encourage employees to be more environmentally conscious both at work and at home**
- **Seek ideas from employees and external consultants as to how we might become more environmentally active**

**Objective 6: To promote and support community initiatives and charitable organizations not necessarily directly involved with the company**

This objective was included because the company does support community and charitable initiatives when asked, and to allow employees time to devote to work with charities where possible. Since 2004 HHC has arranged social outings twice a year, for the more isolated service users, with an outing by bus in the summer months and a Christmas party in December.

On 25<sup>th</sup> August 2007 a coach was hired to take 13 service users out for a day trip to Cromarty. They were accompanied by 5 staff. The total cost was £381.95. This year's trip recently took place and saw 19 service users head out in the area of Nairn.

On 20<sup>th</sup> December 2007 we were able to invite 40 Service Users to the Craigmorie Hotel Inverness for a Christmas party. This cost HHC £513.23

In the employee questionnaire we asked if anyone devotes any of their time to charity or volunteer work. Although this has nothing to do with the company, we felt that as well as being interesting to include in the report, it would also give some recognition to those who shared the information.

One employee told of volunteering for the past 15 years with youth organisations and Shop Mobility and would like to do more. Another gave time to Blythwood Care and another devotes Friday nights to presenting hospital radio. Other employees told of giving support to Oxfam and generally helping others in their spare time.

In 2005 a number of HHC employees went to Romania for 2 weeks to assist a project for young people. Although the group used their own holidays for this purpose, the company did support them administratively and financially.

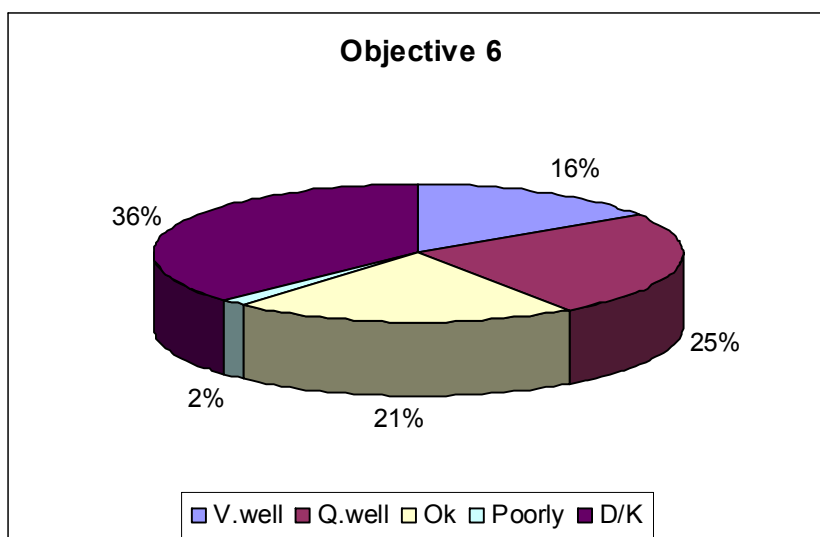
Chairperson Nick Boyle gives time to working as Chair of Visual Impairment Services Highland, and Managing Director Stephen Pennington spends on average one hour a week as the Chair for L'Arche Inverness and a trustee of L'Arche UK.

The Company has taken out a corporate membership of some local organisations in order to support them: Highland Users Group, The Spectrum Centre, and Alzheimer's Scotland.

**a) Views of the employees**

Employees were again asked in the questionnaire: *How well do we achieve this objective?*

**Table 18**



The largest number of employees who responded did not know about or had not thought about this issue

**b) Views of the Board Members**

All five members of the board agreed on 7/10 for this objective.  
The board members made no comment on this objective.

**Summary**

- **A substantial amount of employees did not know how well HHC performs on this Objective**

**Action points**

- **Raise awareness among employees about the potential for the company to support local community initiatives and charities through newsletters and company website**
- **Seek Board approval for a fund to be used in this way**
- **Look into the possibility of Organising employee charity events**
- **Review policy of volunteering during work time**

## 7 Stakeholder views on other issues

### 7.1 Employee Ownership

Employee ownership is an important part of Highland Home Carers' ethos and as such this was a topic we consulted our stakeholders on and feel we should report on.

Highland Home Carers is totally committed to the concept of employee ownership in the care sector for a variety of reasons and we will seek to develop the principle elsewhere:

- The quality of care is only as good as the quality and commitment of the people providing that care; we believe that if individual staff have an investment in what they are doing, they are more likely to want to do it to the best of their ability
- Our view is that employee ownership can improve staff recruitment and retention rates in a field in which these figures can be poor
- The financial aspects of an employee-owned company mean that, once all debts are repaid, any profit earned will remain in the local area and not go to investors elsewhere
- Highland Home Carers chose to go down the employee ownership route to secure the future of the Company, and prevent it falling into the hands of a large care company who would merely see it as an investment
- There was a wish to ensure that the people who had worked hard through their own efforts should be the ones who determine HHC's future

#### a) Views of the Service Users

From the service user questionnaire on the topic of Employee Ownership, it emerged that 34% felt this had no effect on the service provided and a further 37% answered that they did not know if employee ownership has any effect.

Only 28% claimed to think employee ownership has any effect. We have to question if those who answered 'no' and 'don't know' did so because they are unaware of employee ownership and its meaning. This was not explored in more detail in the questionnaire in order to keep it as simple and short as possible to ensure maximum response.

There was a mixed reaction to employee ownership with 7/10 of the Private Services Users interviewed having some knowledge of the topic and it was explained in more detail. 5/10 felt it is important while 2 did not and 3 did not know. Only 4 felt that employee ownership had an effect on the service provided, 4 did not and 2 did not know.

One stated '*great idea, all have a vested interest*' while another stated '*Don't think people are motivated by it*'

Whatever the case, information on employee ownership has been provided to all service users, as it has been previously, to keep all informed.

#### b) Views of the employees

Only 12/56 felt that employee ownership has an effect on how they do their job. A more promising 31/56 felt employee ownership gives them a greater sense of belonging within the company. A disappointing 24/56 did not, and 1 did not answer.

#### c) Views of the Social Work Service representatives

The Social Workers who were present were asked their views on HHC being an employee owned company and it was stated that this probably helps to keep staff. It means people have an investment in keeping high standards. It probably helps to try and move the company in a positive direction with a committed staff, which all helps for improving the quality of the service.

## Summary

- **Service users gave a mixed response as to the importance of employee ownership**
- **Few employees feel employee ownership has a bearing on the job they do but a majority surveyed feel it gives them a greater sense of belonging**
- **Social Work Service representatives were positive about employee ownership**

## Action points

- **Keep service users informed on the topic of employee ownership through a newsletter**
- **Endeavour to increase awareness of employee ownership among employees and enhance the intended sense of belonging and importance. To achieve this we must promote this topic at the induction stage and ensure employee meetings are held more regularly**
- **Ensure time is given to communication and meetings with isolated employees**
- **Pursue the partnership culture within the company**
- **Gather evidence of the positive impact of employee ownership on service delivery**

## 7.2 Communication issues

### a) Views of the Service Users

As the issue of communication within the company has been raised several times it appears necessary to include this in the main body of the report.

The service users who took part in the 10 interviews were asked if they had experienced communication problems with HHC and 3 of the 10 interviewed stated that they had experience of this but accepted that a margin of human error should be allowed for. That said, one Service User interviewed appeared to have experienced more problems than others and felt it was an area that let the company down. This individual stated that she found staff in the office did not always respond appropriately to her phone calls.

### b) Views of the employees

32/55 of staff who responded to the employee questionnaire felt unhappy/unmotivated by communication within HHC.

In the employee focus groups the following emerged:

- Lack of communication between office staff and Carers/support staff
- Messages not passed on regarding deaths
- Not enough prior information given on clients
- Clients going in and out of hospital and staff not being informed
- Office should liaise more with the Council on issues of team work, communication and occurrence of competitiveness between two agencies
- When staff phone to say they are running late, the message is not passed on to client

Communication within the company is an area where attention must be focused to improve the current situation.

### c) Views of the Board

#### Quotes:

*There has to be an understanding from all different points of view and understanding of*

*different posts, remits and priorities and constraints.*

*There can be over-active communication*

*Messages are sometimes not passed on*

*When someone answers the phone (Staff member) they do not always identify who is speaking, this should be done.*

*Have to do better in this area*

*Shared responsibility*

*Message book should be checked*

*On the flip side of the communication debate it was stated that people do have to make an effort to find out information, read information that is sent to them and attend meetings.*

*The importance of communication was discussed and how it improves business and service provided in general. It was stated that communication is the company's greatest weakness.*

## **Summary**

- **3/10 service users interviewed have experienced communication problems**
- **A substantial number of employees felt communication is a problem within HHC**
- **Communication within the company appears to be an issue that needs particular attention**

## **Action points**

- **Reduce the number of occasions when communication is poor**
- **Seek ideas from within the office and from care/support staff as to how information might be better transmitted**
- **Appoint a member of staff with the express remit of identifying communication breakdowns and facilitating their prevention in future**
- **Initiate an internal messaging system which will flag up messages directly to the intended person**
- **Initiate a system where a member of the office staff will check to ensure messages have been dealt with and communication maintained. This should operate on a rotational basis**
- **New staff have already been employed in the office to increase manpower and tackle this issue**

## **7.3 Other points made by employees**

Treatment at work warranted a lot of discussion and as we see from the chart below there was a great deal of variation in scoring. The highest number of employees placed their score at 5 which itself is fairly poor. The lowest scoring of 1 was from an employee working in isolation on the west coast who feels very cut off from others and believes she receives little communication and interaction from the office and other staff. This was her reason for such a low score.

Comments on treatment at work:

### **Lack of support**

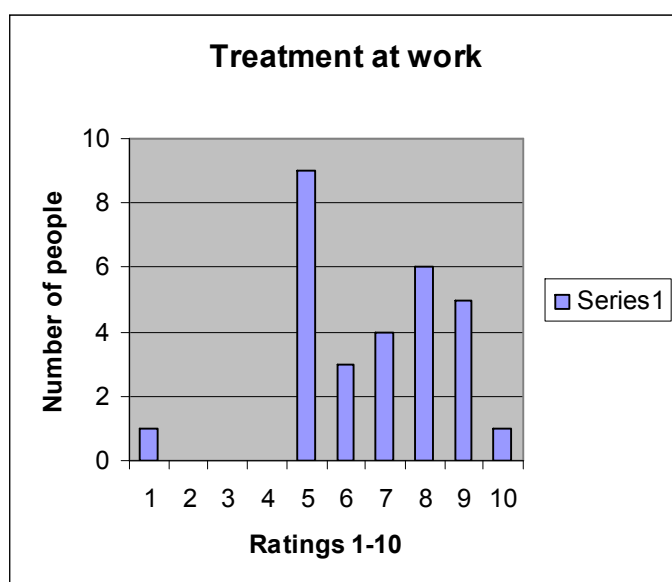
Lack of recognition and appreciation

Lack of staff to cover bed runs/nights/time off

Working long stretches as no staff to cover, feeling an element of emotional blackmail involved

Feeling of being dropped in at the deep end and left to get on with it

**Table 19**



### **Fairness**

Different rates of pay

Fairness in treatment of all workers

Favouritism

Grief over time off (for parents needs etc)

Bed runs not shared out equally

If no argument given tendency to be 'lumped with work'

New staff being given work instead of established staff

Sense of being made to feel guilty if saying 'no' to extra work

Not always spoken to nicely and treated as equals

Work appearing on rotas without being asked

Worry over phoning in sick because of perceived bad reception

### **Structural**

Gaps in rota

Mistakes in rota

Low pay

No control over hours

Problems over availability/flexibility

No set hours/wage

The difference in rates of pay was discussed. This relates to the difference in pay between home care, enhanced care and housing support. The rates for these types of work are set by the council and as support work requires more qualification than care work and more of a degree of responsibility/report writing etc this work is paid more, accordingly. This was discussed at length and care workers felt that the company should be pushing more for better rates of pay for Carers. All were in agreement on this and the company is in the midst of negotiations with the council on pay. Mileage paid to employees was also an issue, and the Board agreed a mileage rate based on what the Inland Revenue fixes and the need to cover all travel costs incurred by staff

A member of the office staff also scored fairly low on this issue due to occasional verbal abuse from members of care/support staff although felt well treated by management. There was a feeling of being expected to 'put up with' this poor treatment as part of the job. On the whole all present from the office felt well treated at work.

## **Positives:**

Like other staff  
Like working independently  
Loyal workforce  
Good at covering if staff have personal emergency  
General agreement that the flexibility of the job is good.  
Service provided is good  
Shares and wage rises  
Fair bonuses  
Overall good company  
Secure job  
Progressing company  
Happy at work  
Generally a fair company to work for  
Points are taken on board  
Good when off sick  
On the whole it is a fantastic job, HHC does a fantastic job  
Lack of interference can be a good thing  
Opinions valued  
Feel listened to  
Good employer  
Love the job

## **Employee Suggestions**

Many suggestions for improvements were made and are listed in the Results in the Appendix

### **One employee's statement:**

*'I had no clue when I started the job, the job we do in the community is second to none. Carers deserve more recognition in terms of money and respect. Rewarding but hard work. It's a wonderful job I wish everyone else could see it and what it has taught me ...'*

Others were in general agreement on this statement.

*'We are all still here after years so it can't be that bad'* quoted in relation to the various grievances.

It was also acknowledged that most people are happy in the job but when people get together all the moans come out!

All staff present agreed the group was constructive and would like more of the same.

## **Summary**

- **Employees had many issues that they had grievances with, in the main these relate to a perceived lack of support, fairness and structural issues**
- **Employees also mentioned many positive aspects of working for HHC**
- **It was acknowledged that most people are happy in the job but the moans come out when people get together**

## **Action points**

- **Take note of employee concerns and suggestions, and act upon them**
- **Ensure that employees are made aware that their opinions are valued and listened to**
- **Discuss ways of improving employee conditions**
- **Continue to facilitate meetings where employees can interact in a relaxed atmosphere**

## 8. Compliance

HHC complies with the following:

- An Independent Financial Audit
- Data Protection Registration
- Public Liability Insurance
- Care Commission Inspection Report - Available online at ( [www.carecommission.com](http://www.carecommission.com) )
- Contract with the Highland Council
- Employees checked by Disclosure Scotland
- P32 monthly report and P35 Annual report to Inland Revenue

We also have a Policy Manual Governing Home Care and Support Services which includes:

- Standards relating to the Appointment of Care and Support staff.
- Staff Placement
- Staff Training and Support
- Service Users Enablement, Empowerment and Advocacy
- Sources of Referral
- Assessment of Service User Need
- Periodic Audit
- Termination of Service Agreements
- Complaints Policy
- Risk Assessment Policy, Health and Safety Compliance
- Methycillin Resistant Staphylococcus Aureus (M.R.S.A)
- Administration of Medicines
- Moving and Handling
- Lone working policy
- Prevention of Abuse
- Challenging Behaviour (inc Management of Violence and Aggression)
- Restraint Policy
- HIV and AIDS Policy
- Occupational Health Policy
- Disciplinary Procedure
- Grievance Procedure
- Drugs and Alcohol Policy
- Confidentiality
- Record Keeping
- Whistle Blowing Policy
- Equal Opportunity Policy
- Disclosure Policy

Codes of practice pertinent to Highland Home Carers:

- The National Care Standards for Care at Home and Housing Support services, as issued by the Scottish Social Services Council; all staff are also provided with the SSSC Code of Conduct, with which they are expected to comply.
- The United Kingdom Home Care Association (UKHCA) Code of Practice. We also adhere to the various subject specific codes that are published periodically by them, such as those on the administration of medication and management of MRSA.
- Highland Home Carers has contracts with Highland Council to provide care at home, social work support, housing support services and an emergency out-of-hours service in Nairn. We have to abide by the conditions within the contracts if we are to continue being used by the Social Work Service.
- The Registration requirements as laid down by the Scottish Commission for the Regulation of Care; Highland Home Carers is inspected annually and has to submit an annual return. The Inspection report is a public document and is made available to all service users.

## 9 Main Achievements and conclusions

### Achievements:

- Feedback from service users was hugely positive and supportive of the company
- Although employees mentioned several aspects of the job and company practice which concerned them, the majority of those consulted were positive about HHC and its service provision
- The Social Work Service representatives who were consulted stated that they use HHC because of the '*reliability, adaptability and flexible personalised service...*'

### Key areas for improvement:

- Communication at various stages of the service delivery needs improving
- Funding restrictions outwith the company's control impacts on the ability to achieve our mission
- Not all employees feel as involved in HHC as we would hope as part of an employee owned company
- The training provided may not be frequent enough and not appropriately documented

### Conclusions:

It has become apparent that communication throughout the company is an area where we let ourselves down. As well as encouraging individuals at all levels within the company to be vigilant regarding communication we suggest that an individual is appointed to deal solely with communication issues and thus improve on the overall performance of Highland Home Carers.

- HHC should do more to change the perceptions of funding bodies regarding the theory that residential/ nursing home care is cheaper in an effort to make more funds available to enable people to remain in their own homes
- With regards to the economic aspect of the social accounts, while we must remain viable and financially healthy, it was acknowledged by the Board that the company would never be purely profit driven
- Overall Service users are very happy with HHC service provision

### Recommendations:

Having completed the accounts and examining the evidence from the stakeholder consultations we realise there are several important aspects of company practice which need to be addressed, as follows:

- Include information and discussion on company Mission statement, Values and Objectives in induction training
- Improve on current communication throughout the service
- To develop better training opportunities and ensure evidence of this is logged
- To survey more carefully employees' training needs
- To make a concerted effort to involve staff more in decisions about the company and raise awareness of the benefits of employee ownership

## **10 Review of the Social Accounting Process**

Highland Home Carers is in the process of converting from a privately owned and run limited company to one that is truly employee-owned. Changing the culture of the organisation is not something that occurs overnight, and we are 4 years into the project. The opportunity to conduct Social Accounts, given to us by C:DS, enables us to monitor how we are doing in this transition. The verdict from the evidence must be that we still have a way to go, and particular emphasis will need to be placed in the coming year on listening to our employees and demonstrating to them that they have a real stake in the company. At the same time we want our service users to recognise that the care/support they receive is improved because the staff who attend are operating from a different value base. The evidence gathered would suggest that the Mission Statement and Values, derived from our employee-owned status, are at the core of the business; the Objectives we have set are generally welcomed as being the right ones, but work is still needed in subsequent years to fully achieve them.

On first embarking on our period of social accounting and audit we did not know what to expect and what was ahead of us. We have learned a lot about the process itself but have also gained valuable insight into the views and perspectives of both service users and the employees. The main strengths of the process include the ability of the accounting team to work so well together making the whole process an enjoyable and interesting experience. We do feel it has been a valuable exercise in team building and working together to learn new skills. Individually the process has provided experience and gone along way in improving confidence in our own abilities and strengths.

In addition to this we feel we interacted well with our service users when conducting the interviews and believe that the process made those individuals feel valued and important. We believe also that employees have felt the benefits through the questionnaires but more so through the focus groups. These provided the opportunity for staff to get together and air opinions in a non-threatening environment. They also felt involved in the social accounts and that their views mattered.

Now that we have come to the end of the process and with the input from the panel we have realised the shortcomings in our stakeholder mapping. We should have given more time and focus to this as the company impacts on many people in many ways. All of those working in the field of service provision impact on one another and those who use the services. This spreads to friends and families and so on. A more in depth analysis would enable us to see the wider picture and plan our consultation accordingly. This is an area we can expand on in the next round of accounts.

With hindsight we could have piloted the questionnaires both for service users and employees before using them. This might have prevented questions being misunderstood e.g. employees not being clear how to highlight their priorities when asked about Objective 2 – Being a fair employer. The value of the service user questionnaire could have been improved by tying it more closely to the Values & Objectives of the Company.

## **11 Plans for the next social accounting cycle**

The Board of Highland Home Carers has committed to the production of Social Accounts as being an annual event. The current members of the team have committed to continuing into the year 2008-09, and with the completion of this report, we will be considering what aspects of HHC's operation we will target, and how we will proceed. We recognise that in this initial year we have undertaken a major study, and it is anticipated that in subsequent years we will be more focussed. However the annual surveys of service users and employees, as our key stakeholders, will continue.

## **12 Dialogue and disclosure**

The finalised, full and verified Social Accounts will be made available for all who have an interest to see it, along with the notes from the Audit panel chair Murdoch Gatward. As well as being presented to the Board of Directors, they will be presented at the Highland Home Carers AGM in November as part of the annual report. The full accounts will also be available to see on the Highland Home Carers website. In addition to this we intend to produce summary accounts which will be sent out to current and prospective service users, employees and the Care Commission and Social Work Service. The summary accounts will provide those looking to use a home care/ support agency and those seeking employment with a comprehensive guide to Highland Home Carers, its values and performance as a company.

Any feedback on the accounts from anyone with an interest would be encouraged and welcomed as the opinions and perspectives of others help us to provide the best service we can.