



Inspection report

Premier Healthcare Support Service Care at Home

200 West Princes Street Helensburgh G84 8HA

Inspected by: Kevin Dale

(Care Commission officer)

Type of inspection: Announced

Inspection completed on: 27 April 2010

Contents

	Page Number
Summary of this inspection report	3
Section 1: Introduction	
About the Care Commission	5
About the National Care Standards	6
What is inspection?	7
How we decided what to inspect	9
What is grading?	10
About the service we inspected?	11
How we inspected this service	12
Section 2: The inspection	15
Section 3: Other information	
Other Information	19
Summary of Grades	20
Terms we use in our reports and what they mean	21
How you can use this report	23
People who use care services, their relatives and carers	23

Service provided by:

Premier Healthcare

Service provider number:

SP2008009687

Care service number:

CS2008173018

Contact details for the Care Commission officer who inspected this service:

Kevin Dale Telephone 01631 564144 Email enquiries@carecommission.com

Easy read summary of this inspection report

There is a six point grading scale. Each of the Quality Themes we inspected, is graded using the following scale:

We can choose from six grades:















excellent

very good

good

adequate

weak

unsatisfactory

We gave the service these grades

Quality of Care and Support (i) 5 Very Good



Quality of Staffing

N/A

Quality of Management and Leadership (🕹) 5 Very Good



This inspection report and grades are our assessment of the quality of how the service is performing in the areas we examined during this inspection.

Grades for this care service may change after this inspection due to other regulatory activity; for example, if we have to take enforcement action to improve the service, or if we investigate and agree with a complaint someone makes about the service.

What the service does well

Premier Healthcare provides a very good quality of service to service users and their relatives. Discussions with relatives and responses from questionnaires evidenced that their was a high degree of satisfaction with the service and praise for the management and staff.

What the service could do better

The service should continue to develop their participation strategy and progress the strategic plan. Staff training had been identified and training events will take place in the near future.

What the service has done since the last inspection

The service had met the Requirement and Recommendation from the last inspection and had improved support planning and recording. The grading for this service had improved following this inspection.

Conclusion

The service offers a very good quality to service users and we found that the manager and staff are committed to continuously improve the service with better outcomes to service users and relatives.

Who did this inspection

Lead Care Commission Officer Kevin Dale

Other Care Commission Officers
Not Applicable

Lay Assessor Not Applicable

Please read all of this report so that you can understand the full findings of this inspection.

About the Care Commission

We were set up in April 2002 to regulate and improve care services in Scotland.

Regulation involves:

- · registering new services
- inspecting services
- investigating complaints
- taking enforcement action, when necessary, to improve care services.

We regulate around 15,000 services each year. Many are childminders, children's daycare services such as nurseries, and care home services. We regulate many other kinds of services, ranging from nurse agencies to independent healthcare such as hospices and private hospitals.

We regulate services for the very young right through to those for the very old. Our work can, therefore, affect the lives of most people in Scotland.

All our work is about improving the quality of care services.

We produce thousands of inspection reports every year; all are published on our website: www.carecommission.com. Reports include any complaints we investigate and improvements that we ask services to make.

The "Care services" area of our website also:

- allows you to search for information, such as reports, about the services we regulate
- has information for the people and organisations who provide care services
- has guidance on looking for and using care services in Scotland.

You can also get in touch with us if you would like more detailed information.

About the National Care Standards

The National Care Standards (NCS) set out the standards that people who use care services in Scotland should expect. The aim is to make sure that you receive the same high quality of service no matter where you live.

Different types of service have different National Care Standards. When we inspect a care service we take into account the National Care Standards that the service should provide.

The Scottish Government publishes copies of the National Care Standards online at: www.scotland.gov.uk

You can get printed copies free from:

Blackwells Bookshop 53-62 South Bridge Edinburgh EH1 1YS

Telephone: 0131 662 8283

Email: Edinburgh@blackwells.co.uk

What is inspection?

Our inspectors, known as Care Commission Officers (CCOs), check care services regularly to make sure that they are meeting the needs of the people in their care.

One of the ways we check on services is to carry out inspections. We may turn up without telling the service's staff in advance. This is so we can see how good the care is on a normal day. We inspect some types of services more often than others.

When we inspect a service, typically we:

- talk to people who use the service, their carers and families, staff and managers
- talk to individuals and groups
- · have a good look around and check what quality of care is being provided
- look at the activities happening on the day
- examine things like records and files, if we need to
- find out if people get choices, such as food, choosing a key worker and controlling their own spending money.

We also use lay assessors during some inspections. These are volunteers who have used care services or have helped to care for someone who has used care services.

We write out an inspection report after gathering the information. The report describes how things are and whether anything needs to change.

Our work must reflect the following laws and guidelines:

- the Regulation of Care (Scotland) Act 2001
- regulations made under this Act
- the National Care Standards, which set out standards of care that people should be able to expect to receive from a care service.

This means that when we register or inspect a service we make sure it meets the requirements of the 2001 Act. We also take into account the National Care Standards that apply to it.

If we find a service is not meeting these standards, the 2001 Act gives us powers that require the service to improve.

Recommendations, requirements and complaints

If we are concerned about some aspect of a service, or think it could do more to improve its service, we may make a requirement or recommendation.

- A recommendation is a statement that sets out actions the care service provider should take to improve or develop the quality of the service but where failure to do so will not directly result in enforcement.
- A requirement is a statement which sets out what is required of a care service to comply with the Act and Regulations or Orders made under the Act, or a condition of registration. Where there are breaches of the Regulations, Orders or conditions, a requirement must be made. Requirements are legally enforceable at the discretion of the Care Commission.

Complaints: We have a complaints procedure for dealing with any complaint about a registered care service (or about us). Anyone can raise a concern with us - people using the service, their family and friends, carers and staff.

We investigate all complaints. Depending on how complex it is, a complaint may be:

- upheld where we agree there is a problem to be resolved
- not upheld where we don't find a problem
- partially upheld where we agree with some elements of the complaint but not all of them.

How we decided what to inspect

Why we have different levels of inspection

We target our inspections. This means we spend less time with services we are satisfied are working hard to provide consistently high standards of care. We call these low-intensity inspections. Services where there is more concern receive more intense inspections. We call these medium or high intensity inspections.

How we decide the level of inspection

When planning an inspection, our inspectors, or Care Commission Officers (CCOs) carefully assess how intensively each service needs to be inspected. They do this by considering issues such as:

- complaints
- changes to how the service provides care
- any notifications the service has given us, such as the absence of a manager
- what action the service has taken in response to requirements we have made.

The CCO will also consider how the service responded to situations and issues: for example how it deals with complaints, or notifies us about incidents such as the death of someone using the service.

Our inspections take account of:

- areas of care that we are particularly interested in (these are called Inspection Focus Areas)
- · the National Care Standards that the service should be providing
- recommendations and requirements that we made in earlier inspections
- any complaints and other regulatory activity, such as enforcement actions we have taken to improve the service.

What is grading?

We grade each service under Quality Themes which for most services are:

- Quality of Care and Support: how the service meets the needs of each individual in its care
- Quality of Environment: the environment within the service (for example, is the service clean, is it set out well, is it easy to access by people who use wheelchairs?):
- Quality of Staffing: the quality of the care staff, including their qualifications and training
- Quality of Management and Leadership: how the service is managed and how it develops to meet the needs of the people it cares for
- Quality of Information: this is how the service looks after information and manages record keeping safely.

Each of the Quality Themes has a number of Quality Statements in it, which we grade.

We grade each heading as follows:



We do not give one overall grade.

How grading works.

Services assess themselves using guidance that we given them. Our inspectors take this into account when they inspect and grade the service. We have the final say on grading.

The Quality Themes for this service type are explained in section 2 The Inspection.

About the service we inspected

Premier Healthcare was registered on 3/07/2008 to provide a Support Service - Care at Home. The service provides support including personal care to people in their own homes living in the Helensburgh area. The service operates over 24 hours 7 days per week.

The aims and objectives state that they promote independent living, deliver care in a non-discriminatory manner and provide a flexible, responsive and non- intrusive service.

Based on the findings of this inspection this service has been awarded the following grades:

Quality of Care and Support 5 - Very Good Quality of Staffing N/A Quality of Management and Leadership 5 - Very Good

This inspection report and grades are our assessment of the quality of how the service is performing in the areas we examined during this inspection.

Grades for this care service may change after this inspection due to other regulatory activity; for example, if we have to take enforcement action to improve the service, or if we investigate and agree with a complaint someone makes about the service.

You can use the "Care services" area of our website (www.carecommission.com) to find the most up-to-date grades for this service.

How we inspected this service

What level of inspection did we make this service

In this service we carried out a low intensity inspection. We carry out these inspections when we are satisfied that services are working hard to provide consistently high standards of care.

What activities did we undertake during the inspection

This report was written after an announced inspection that took place between 9.30am and 2.00pm on 27 April 2010.

As requested by us, the care service sent us an Annual return. The service also sent us a Self assessment form.

We issued 10 questionnaires to people who used the service, their family, friends and carers.

7 completed questionnaires and a letter from a family member were returned before the inspection.

In this inspection we gathered evidence from various sources, including relevant sections of policies, procedures, records and other documents, including:

Evidence from the service's Self assessment and Annual return

Discussion with the Service Provider

Discussions with a relative

Discussions with a member of staff

Personal Plans

Complaint record

Training records

Quality Assurance system

Recruitment and Selection Policy

Recruitment records and files

Inspection Focus Areas (IFAs)

Each year we identify an area, or areas, we want to focus on during our inspections. We still inspect all the normal areas of a care service; these are extra checks we make for a specific reason.

For 2010/11 we will focus on:

 Quality assurance for care at home and combined care at home and housing support services.

You can find out more about these from our website www.carecommission.com.

Fire safety issues

The Care Commission no longer reports on matters of fire safety as part of its regulatory function. Where significant fire safety issues become apparent, we will alert the relevant Fire and Rescue service to their existence in order that it may act as it considers appropriate. Care service providers can find more information about their legal responsibilities in this area at: www.infoscotland.com/firelaw

Has the service had to take any actions as a result of or since our last inspection?

Requirement 1

The policy and procedure related to Adult protection must reflect Scottish legislation. The procedure must contain contact details of local agencies responsible for the protection of vulnerable adults. This is in order to comply with SSI 2002/114 Regulation 4(1) Welfare of service users.

Action taken on the Requirement

The provider had reviewed the vulnerable adults polices and procedures to reflect Scottish legislation. Contact details for agencies responsible for adult protection had been included in the procedures.

The requirement is:

Met

Actions Taken on Recommendations Outstanding Recommendation 1

The provider should ensure that polices and procedures related to staff selection and recruitment are:

- · relevant to Scottish legislation
- · record skills and abilities of staff
- · record checks of identification, qualifications and professional registers.

National Care Standards Care at Home: Standard 4 Management and staffing.

Action taken: The provider had reviewed the recruitment policies and procedures and staff files evidenced that they had been put into practice. This Recommendation has been met.

The annual return

We use annual returns (ARs) to:

- make sure we have up-to-date, accurate information about care services; and
- · decide how we will inspect services.

By law every registered care service must send us an annual return and provide us with the information we have requested. The relevant law is the Regulation of Care (Scotland) Act 2001, Section 25(1). These forms must be returned to us between 6 January and 15 February.

Annual Return Received

Yes - Electronic

Comments on Self Assessment

We received a fully completed self assessment document from the service provider. We were satisfied with the way the service provider had completed this and with the relevant information they had given us for each of the headings that we grade them under.

The service provider identified what they thought they did well, some areas for development and any changes they planned. The service provider told us how the people who used the care service had taken part in the self assessment process

Taking the views of people using the care service into account

Three questionnaires were returned by people who used the service. All strongly agreed that overall they were happy with the quality of care and support given to them.

Taking carers' views into account

Four questionnaires and one letter was returned by relatives of service users. All strongly agreed that overall they were happy with the quality of care and support their relative received. Comments included:

"I have been delighted with the level of care my relative receives. The change in them has been remarkable since this service started".

"Excellent communication from manager of service to myself in relation to any concerns".

"Premier Healthcare provided the best care we have experienced. In fact we would not have believed it possible to obtain this level of professionalism and dedication. The staff were also very observant and extremely kind in every aspect of dealing with my relative and myself".

Quality Theme 1: Quality of Care and Support

Grade awarded for this theme: 5 - Very Good

Statement 1

We ensure that service users and carers participate in assessing and improving the quality of the care and support provided by the service.

Service Strengths

The service had developed a new brochure and 'welcome pack' for people who use the service and their relatives. The brochure contained information on the Scottish Social Services Council Codes of Practice, complaints procedure, inspection report and information on advocacy services.

The service regularly sends questionnaires to people who use the service and their relatives. The manager had collated the responses from the questionnaires and formed an action plan. We found evidence of action being taken from issues arising from the questionnaires.

A relative spoken with and responses from questionnaires evidenced that communication from the service and feedback from people who use the service frequently took place in an informal way, however if any issues arose they were quickly managed.

We found that people who use the service and their relatives were involved in their home care assessment which was reviewed after the initial four weeks.

Areas for Improvement

The manager had developed a participation strategy for the service and was considering the most effective way to implement the strategy.

Grade awarded for this statement

5 - Very Good

Number of Requirements

0

Number of Recommendations

0

Statement 3

We ensure that service user's health and wellbeing needs are met.

Service Strengths

We found that service users support plans contained detailed information on their health and support needs. Support plans were person centred and drew a pen picture of service users likes, preferences and daily routines.

The service had good links with the local health centre and regularly sought advice from GPs and community health care professionals.

Support plans had a range of risk assessments in place which were regularly reviewed and updated when there was a change in circumstances. Service users and their relatives/guardians had signed the risk assessments and support plans.

Staff spoken with and responses from staff questionnaires indicated that they had detailed knowledge of service users support needs and were flexible in their approach to meeting their needs needs.

We found evidence of service users writing in their support plan and making comment about the support they received.

Staff had received training in moving and handling, catheter care, medication administration and palliative care.

Areas for Improvement

We advised the manager to review the procedure for seeking medical advice if errors in medication administration had been made.

Grade awarded for this statement

5 - Very Good

Number of Requirements

0

Number of Recommendations

0

Quality Theme 4: Quality of Management and Leadership

Grade awarded for this theme: 5 - Very Good

Statement 1

We ensure that service users and carers participate in assessing and improving the quality of the management and leadership of the service.

Service Strengths

We found that the service had a range of formal and informal systems that involved service users and relatives in making comment about the quality of management and leadership.

The manager had a strategic plan for 2010 which had been informed by discussions and responses from questionnaires by service users, relatives/ guardians, staff and other stakeholders. The strategic plan outlined goals and objectives for the service and interventions to improve the quality of the service.

Responses from service users, relative and staff questionnaires and a relative and staff member spoken with stated that they felt they could make comments about the quality of the service and how it was managed. The felt confidence in the manager and how the service was managed.

Areas for Improvement

The service was currently operating to a very good standard and should continue to develop the strategic plan to continuously improve the service.

Grade awarded for this statement

5 - Very Good

Number of Requirements

0

Number of Recommendations

0

Statement 4

We use quality assurance systems and processes which involve service users, carers, staff and stakeholders to assess the quality of service we provide

Service Strengths

The service used a range of quality assurance tools that informed the development of the service's strategic plan. The manager had collated the responses from service users and relatives questionnaires, developed an action plan and lettered service users and relatives with the findings of the questionnaires and the action plan.

The manager plans to hold a series of events including stakeholder meetings to gain further feedback about the quality of the service.

A depute manager had been employed in October 2009. This allows the manager more time to concentrate on management and quality assurance tasks.

Areas for Improvement

The service is currently operating to a very good standard and should continue to develop the use of the quality assurance tools that would enable the service to measure the continuous improvement of the service.

Grade awarded for this statement

5 - Very Good

Number of Requirements

n

Number of Recommendations

n

Other Information

Complaints

Enforcements

Additional Information

Action Plan

Failure to submit an appropriate action plan within the required timescale, including any agreed extension, where requirements and recommendations have been made, will result in the Care Commission re-grading the Quality Statement within the Management and Leadership Theme as unsatisfactory (1). This will result in the Quality Theme for Management and Leadership being re-graded as Unsatisfactory (1).

Summary of Grades

Quality of Care and Support - 5 - Very Good				
Statement 1	5 - Very Good			
Statement 3	5 - Very Good			
Quality of Staffing - Not Assessed				
Quality of Management and Leadership - 5 - Very Good				
Statement 1	5 - Very Good			
Statement 4	5 - Very Good			

Inspection and Grading History

Date	Туре	Gradings	
7 Apr 2009	Announced	Care and support Staffing Management and Leadership	4 - Good 4 - Good 4 - Good

Terms we use in our report and what they mean

Action Plan - When we inspect a service, or investigate a complaint and the inspection report highlights an area for improvement; either through recommendations or requirements, the action plan sets out the actions the service will take in response.

Best practice statements/guidelines - This describes practices that have been shown to work best and to be achievable in specific areas of care. They are intended to guide practice and promote a consistent and cohesive approach to care.

Care Service - A service that provides care and is registered with us.

Complaints - We have a complaints procedure for dealing with any complaint about a registered care service or about us. Anyone can raise a concern with us - people using the service, their family and friends, carers and staff.

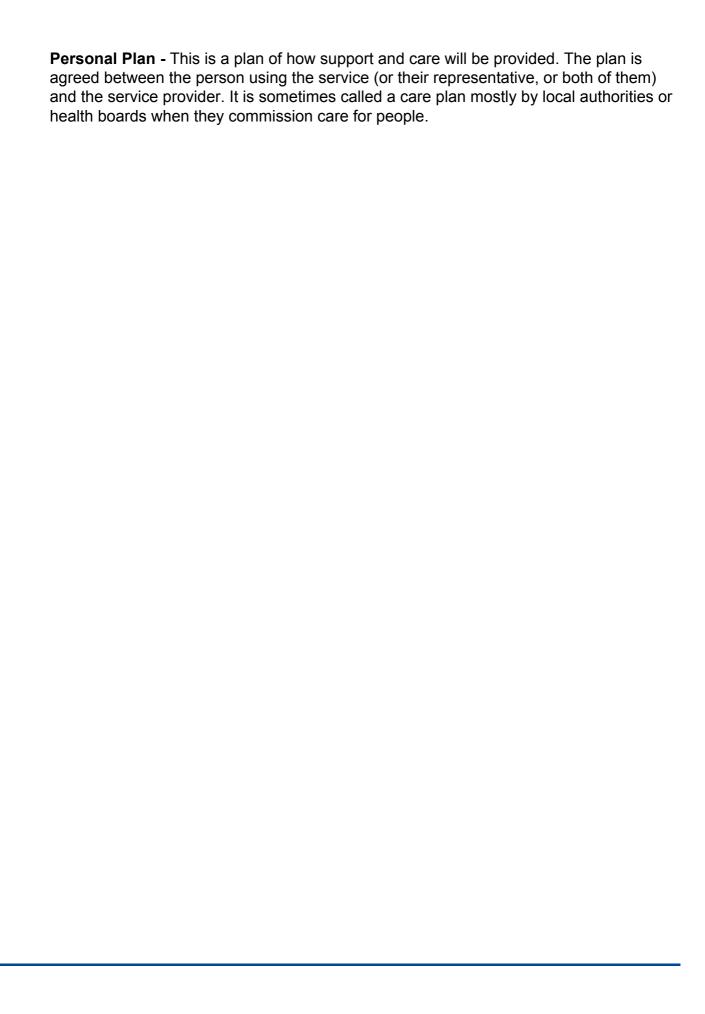
We investigate all complaints which can have more than one outcome. Depending on how complex the complaint is, the outcomes can be:

- · upheld where we agree there is a problem to be resolved
- not upheld where we don't find a problem
- partially upheld where we agree with some elements of the complaint but not all of them.

Enforcement - To protect people who use care services, the Regulation of Care (Scotland) Act 2001 gives the Care Commission powers to enforce the law. This means we can vary or impose new conditions of registration, which may restrict how a service operates. We can also serve an improvement notice on a service provider to make them improve their service within a set timescale. If they do not make these improvements we could issue a cancellation notice and cancel their registration.

Disclosure Scotland- Disclosure Scotland provides an accurate and responsive disclosure service to enhance security, public safety and protect the vulnerable in society. There are three types or levels of disclosure (i.e. criminal record check) available from Disclosure Scotland; basic, standard and enhanced. An enhanced check is required for people whose work regularly involves caring for, training, supervising or being in sole charge of children or adults at risk; or to register for child minding, day care and to act as foster parents or carers.

Participation - This describes processes that allow individuals and groups to develop and agree programmes, policy and procedures.



How you can use this report

Our inspection reports give care services detailed information about what they are doing well and not so well. We want them to use our reports to improve the services they provide if they need to.

Care services should share our inspection reports with the people who use their service, their families and carers. They can do this in many ways, for example by discussing with them what they plan to do next or by making sure our report is easily available.

People who use care services, their relatives and carers

We encourage you to read this report and hope that you find the information helpful when making a decision on whether or not to use the care service we have inspected. If you, or a family member or friend, are already using a care service, it is important that you know we have inspected that service and what we found. You may find it helpful to read previous inspection reports about his service.





The Care Commission

We use the information we gather from all our inspections to report to Scottish Ministers on how well Scotland's care services are performing. This information helps us to influence important changes they may make about how care services are provided.

Reader Information

This inspection report is published by the Care Commission. It is for use by the general public. You can get more copies of this report and others by downloading it from our website www.carecommission.com or by telephoning 0845 603 0890.

Translations and alternative formats

This publication is available in other formats and other languages on request.

Tha am foillseachadh seo ri fhaighinn ann an cruthannan is cànain eile ma nithear iarrtas.

অনুরোধসাপেক্ষে এই প্রকাশনাটি অন্য ফরম্যাট এবং অন্যান্য ভাষায় পাওয়া যায়।

ے مبای تسود رکی رونا برگید روا رولکش رگید رپ شرازگ تعاشا می

ਬੇਨਤੀ 'ਤੇ ਇਹ ਪ੍ਰਕਾਸ਼ਨ ਹੋਰ ਰੂਪਾਂ ਅਤੇ ਹੋਰਨਾਂ ਭਾਸ਼ਾਵਾਂ ਵਿਚ ਉਪਲਬਧ ਹੈ।

عرخ أ تاغلبو تاقيسنتب بلطل ادنع رفاوتم روشنمل اذه

本出版品有其他格式和其他語言備索。

Na życzenie niniejsza publikacja dostępna jest także w innych formatach oraz językach.

Telephone: 0845 603 0890

Email: enquiries@carecommission.com

Web: www.carecommission.com

Improving care in Scotland