

Blackwood Care - Tayside Services Housing Support Housing Support Service

Unit 2
4 Jack Martin Way
Dundee
DD4 9FF

Telephone: 01382 622875

Type of inspection: Unannounced
Inspection completed on: 30 June 2017

Service provided by:
Blackwood Homes and Care

Service provider number:
SP2003000176

Care service number:
CS2004077164

About the service

This service provides a combined Housing Support and Care at Home service to people who have a wide range of needs living in the community. The service is available to adults of various ages living in Dundee, Perth and Angus. The service is provided in people's own homes, including sheltered housing developments.

In their information given to new customers they say: *We are committed to providing services that are personalised to your individual needs and preferences that support you to achieve the best quality of life possible.*

What people told us

During the inspection, 27 service users and/or their carers were spoken with via telephone interviews or in person in their own homes. Views were also garnered from Care Service Questionnaires (CSQs) which had been distributed to service users by the service. Twenty two were returned.

In general service users praised the quality of the staff who came to their homes but were much less positive about the administrative aspects of the service such as the times that workers turned up at their homes, some visits to them not taking place and communication with Blackwood via the telephone. Here are some of the comments made:

- I do not always get a rota which means I am not aware of who is coming and at what time.
- I have telephoned Blackwood on a number of occasions and do not always get a reply.
- Not always providing care schedules to know who is coming each day.
- The carers are superb and I have no complaints about them...the administration staff leave a lot in question.
- My morning time was agreed at 9.30 but comes in at 8.00.
- I have nothing to say but it is all working perfectly.
- On the whole I find the staff kind and helpful but timekeeping seems to be a problem.
- There appears to be no care plan in my mum's folder.
- Overall we are happy with the carers but the timing of the evening visit is still not regular.
- Overall I am happy with the care. I like the regular staff I get. They are very good and go the extra mile for me.
- I do not have a support plan in my home.
- We are not sure how long carers are meant to come for to give my grandmother a shower. It all seems too rushed.
- Staff treat me with dignity and respect.
- Staff have missed two appointments recently.
- They did not come at all one day last week.

Self assessment

A self assessment was not required to be completed at this inspection; however the service spoke about their goals and aspirations for the forthcoming year. The management team had identified some of the strengths and areas that they wanted to develop and will be working on their improvement plan over the next few months.

From this inspection we graded this service as:

Quality of care and support	3 - Adequate
Quality of staffing	3 - Adequate
Quality of management and leadership	3 - Adequate

Quality of care and support

Findings from the inspection

The service provided an adequate level of care and support for service users. The service has continued to experience staffing problems since the last inspection. Most service users who expressed their views felt that the staff who came to them were of a high quality. However they were much less positive about the organisation and administration of the service in relation to continuity of staff, times of visits, whether scheduled visits took place or not and their ability to communicate with the service effectively.

Observation of staff practice, and practice reported by service users, showed that staff had good relationships with the people they supported. They knew how to move and handle them effectively and generally followed good practice around infection control. Service users reported that staff were flexible and friendly, would wear protective aprons and gloves while providing personal care and treated them with dignity and respect.

In the homes that were visited by the inspector there were support plans but these were out-of-date and people reported that they did not know how long each visit was contracted to last. They knew that there had been staffing problems and many were tolerating disruption to visiting times, which changed often at short notice, as did the identity of staff who were to visit them.

A very clear picture had emerged of a service that was falling short of good practice around its administration of continuity of staff, visiting times, communication and some occasions of missed visits. This was discussed with the area manager who confirmed that there had been some disruption to the management team during the last six months which had meant the service had been operating without its manager and all four designated team leaders. The manager felt that, if seen in context, the service had managed a very difficult situation as well as they could drawing upon the commitment and hard work of the remaining staff available to administer the service.

In response to this the provider had, since May 2017, employed three new team leaders and a new service manager and had been proactively addressing the issues. It also showed the inspector that 10 new care staff were due for induction in July 2017 and would be operational by the end of July. In addition to this the service was in the process of re-instigating the schedule that service users got to outline which staff would be coming to support them and at what time they would arrive. It was now providing a phone service that was continually personed during operating hours so that service users would always get a response when they rang up. It was also in the process of ensuring that all service users had an up-to-date support plan in their homes and over 50% were reported by them as now having them in place.

It was clear that the service had been proactive about addressing the problems that had arisen and were acknowledging that there had been problems with management. At the time of this inspection these changes had only just been implemented and would obviously take time to have an effect on quality. This is why there will be requirements or recommendations around provision of schedules (see Recommendation 1), the provision of an effective communication system between customer and service (see Recommendation 2), having systems in place to ensure that visits are not missed (see Requirement 1) and that all service users have an up-to-date support plan in their homes (see Requirement 1 in the Quality of management and leadership section). This is why, despite a proactive response from the service, a grade of adequate remains in relation to quality of care.

Requirements

Number of requirements: 1

1. The service should ensure that where a person has a scheduled visit there are systems in place to ensure that this takes place and that if a visit is missed the service knows about it quickly and can take steps to ensure that person is safe and supported.

This is in order to comply with: Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations SSI 210/2011 Regulation 4 - Welfare of Service Users.

Timescale for implementation: One month from receipt of this report.

Recommendations

Number of recommendations: 2

1. The service should ensure that all customers receive a schedule outlining what staff are coming to support them and at what time this is planned to take place. The schedule should be given to people in advance of the time so they can plan their lives around this.

See NCS 4 Care at Home - Management and Staffing: 6 You know that the service will be consistent and reliable in who is giving the care and also in the way and timing of how it is given. You will be notified in advance of any necessary changes to the timing of your care at home service and who is your home care worker.

2. The service should ensure that there is an effective communication system in place so customers can contact team leaders when there is a problem with the support they are receiving.

See NCS 4 Care at Home - Management and Staffing: You experience good quality care at home. This is provided by management and the care staff who have the skills and competence to carry out the tasks you require. The service operates in line with all applicable legal requirements and best-practice guidelines.

Grade: 3 - adequate

Quality of staffing

Findings from the inspection

The service provided an adequate quality of staffing. Most service users were positive about the support they got from the care staff who came to them but a significant proportion were unhappy with some aspects of their practice such as times of visits, not knowing who was coming to support them and if a worker would turn up or not.

Most people spoken with were happy with the practice and support they got from the care staff once they arrived. They felt they were friendly, treated them with dignity and respect, maintained their privacy and were able to support them to move effectively. The inspector observed, and customers confirmed, that staff wore appropriate protective gloves and aprons when providing personal care.

Most people spoken with were unhappy with the variability of the times that staff turned up and the fact that sometimes they did not know who was going to turn up. Some also reported that there had been a few occasions of staff not turning up at all. This resulted in them trying to contact the service and sometimes not getting a response. One missed visit was reported as being as recent as the week before the inspection. Others were unsure of the length of time that their care was scheduled for.

Discussion with staff indicated that they had not received much supervision during the past few months and that they themselves were frustrated with the variability of the times they were given for visits. Staff did report that team meetings had re-commenced recently. The inspector acknowledged the hard work and commitment that care staff had put in during the changeover in management.

It should be acknowledged that now a new set of managers/team leaders was in place, the service had been proactive in relation to beginning to address the issues highlighted here. On the week of inspection, schedules had been sent out to all customers, a programme of reviews was taking place which came with new support plans in people's homes. Communication had been addressed and phones/emails were being covered by designated team leaders.

Given the continuing issues with outcomes for service users balanced against the proactive approach to these by the service to address them, it was felt that the grade should remain at adequate even though progress was being made.

Requirements

Number of requirements: 0

Recommendations

Number of recommendations: 0

Grade: 3 - adequate

Quality of management and leadership

Findings from the inspection

The service provided an adequate quality of management. Since the last inspection the service had experienced a change in management staffing levels which had impacted on the service for customers. The service, however, had been proactive about addressing the problems that had arisen.

There had been an impact on visiting times, staff continuity, support plans (see Requirement 1), schedules and communication channels for customers. These were all in the process of being addressed by the service. However new staff, including a new manager, had only been in place since May and new staff need time to learn their new job roles and be inducted. As a result the progress on addressing issues was understandably at an early stage.

Staff out in the community had also suffered from a break in their usual supports and reliance on team leaders. These issues were also being addressed at the time of inspection without the inspector having to direct that they be addressed. Team meetings had taken place and team leaders were getting to know their staff and the designated areas they were to work in.

Blackwood are generally a trusted service who have been, in recent times, innovators in the use of digital care technologies, keen trainers of staff and providers of high quality care and support. Having to recruit a new management team had hampered their progress but they were obviously being proactive and were committed to improving the situation. There were early signs of improvement but not enough at this inspection to see any significant improvement coming through from customers. This is why the grade remains at adequate.

Requirements

Number of requirements: 1

1. The provider should ensure that all service users have an up-to-date personal care plan in their homes.

This is in order to comply with: Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/210) - Regulation 5 Personal Plans.

Timescale: Within two months of receipt of this inspection report.

Recommendations

Number of recommendations: 0

Grade: 3 - adequate

What the service has done to meet any requirements we made at or since the last inspection

Previous requirements

Requirement 1

The provider should ensure that all service users have an up-to-date personal care plan in their homes.

This is in order to comply with: Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/210) - Regulation 5 Personal Plans.

Timescale: Within two months of receipt of this inspection report.

This requirement was made on 21 March 2017.

Action taken on previous requirement

Carried over to this report.

Not met

Requirement 2

The service should ensure that where a person has a scheduled visit there are systems in place to ensure that this takes place and that if a visit is missed the service knows about it quickly and can take steps to ensure that person is safe and supported.

This is in order to comply with: Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations SSI 210/2011 Regulation 4 - Welfare of Service Users.

Timescale for implementation: One month from receipt of this report.

This requirement was made on 21 March 2017.

Action taken on previous requirement

Carried over onto this inspection

Not met

Requirement 3

The service should re-activate those practices which it previously undertook to support staff to ensure that they are carrying out good practice. These include team meetings, 1:1 supervision and observation of staff working in the community. This will ensure that the service is provided in a manner that promotes quality for service users.

See SSI 2011/210 3 Principles: 3. A provider of a care service shall provide the service in a manner which promotes quality and safety and respects the independence of service users, and affords them choice in the way in which the service is provided to them.

Timescale: Within three months of receipt of this inspection report.

This requirement was made on 21 March 2017.

Action taken on previous requirement

Moving towards being met.

Met - outwith timescales

Requirement 4

The service should review the procedure and practice for taking on new customers and consider the impact on existing as well as new customers.

See: SSI 2011/210 3 Principles. 3. A provider of a care service shall provide the service in a manner which promotes quality and safety and respects the independence of service users, and affords them choice in the way in which the service is provided to them.

Timescale: Within three months of receiving this report.

This requirement was made on 21 March 2017.

Action taken on previous requirement

The service had ceased taking in new customers until it had its new management team fully operational and had recruited new care staff. It is now taking new customers in a controlled and planned for way.

Met - within timescales

What the service has done to meet any recommendations we made at or since the last inspection

Previous recommendations

Recommendation 1

The provider should review the levels of team leaders working for the service and how they can best support staff and improve quality.

National Care Standards 4 Care at Home - Management and Staffing 5 You are confident that the provider monitors all aspects of the service, especially its quality.

This recommendation was made on 21 March 2017.

Action taken on previous recommendation

Three new team leaders had been recruited at time of writing report.

Recommendation 2

The service should review the telephone system which both customers and staff use to ensure that both can contact team leaders for advice, guidance or to report an issues.

National Care Standards 11 Care at Home - Expressing Your Views: You or your carer are encouraged to express your views on any aspects of the care service at any time:- 1 You can freely discuss any concerns you have with your home care worker, other staff or management of the service.

This recommendation was made on 21 March 2017.

Action taken on previous recommendation

Done and new phone numbers circulated to customers very recently.

Complaints

There have been no complaints upheld since the last inspection. Details of any older upheld complaints are published at www.careinspectorate.com.

Enforcement

No enforcement action has been taken against this care service since the last inspection.

Inspection and grading history

Date	Type	Gradings	
19 Jan 2017	Announced (short notice)	Care and support	3 - Adequate
		Environment	Not assessed
		Staffing	3 - Adequate
		Management and leadership	3 - Adequate
15 Jan 2016	Unannounced	Care and support	5 - Very good
		Environment	Not assessed
		Staffing	5 - Very good
		Management and leadership	5 - Very good
16 Jan 2015	Announced (short notice)	Care and support	5 - Very good
		Environment	Not assessed
		Staffing	5 - Very good
		Management and leadership	4 - Good
10 Jan 2014	Announced (short notice)	Care and support	4 - Good
		Environment	Not assessed
		Staffing	5 - Very good
		Management and leadership	5 - Very good
12 Mar 2013	Announced (short notice)	Care and support	5 - Very good
		Environment	Not assessed
		Staffing	5 - Very good
		Management and leadership	5 - Very good
7 May 2010	Announced	Care and support	4 - Good
		Environment	Not assessed
		Staffing	4 - Good
		Management and leadership	4 - Good
2 Jul 2009	Announced	Care and support	3 - Adequate
		Environment	Not assessed
		Staffing	3 - Adequate
		Management and leadership	3 - Adequate

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