

## Appropriate Services Home Care Support Service

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Type of inspection: Unannounced  
Inspection completed on: 16 November 2017

**Service provided by:**  
Appropriate Services Limited

**Service provider number:**  
SP2012011909

**Care service number:**  
CS2012310967

## About the service

Appropriate Services Home Care registered with the Care Inspectorate on 18 November 2013. The provider is Appropriate Services Limited.

The service aims to provide a tailored and flexible home care service to individuals living in their own homes in the Glasgow area. The service offers assistance with daily living activities such as cooking and shopping, as well as helping with personal care tasks.

At the time of this inspection the service was being provided to one person for 13.5 hours per week and to one other person on an ad-hoc basis. The service was currently staffed by the registered manager and one homecare assistant who provided care and support.

The provider's stated aims and objectives are:

"To help people in their own homes who need some support to maintain their independence, at times convenient to them and in ways that they find most beneficial."

## What people told us

We received feedback on the service via email from one person currently receiving support and spoke by telephone to the other. We also heard from one person's relative. All spoke positively of the support provided by the worker and also with communication from the manager.

Comments included:

"I'm happy with the support. I'm not afraid to tell the manager if there's anything. He does what I need him to do."

"I am happy with my support from Appropriate Services. My care plan is constantly updated usually through review meetings or other face to face interaction. I get on well with staff from Appropriate Services and feel comfortable with them doing my support."

A relative told us "(Name) for the first time has been able to speak directly with his care providers instead of going through us as a family. This to me shows a deep understanding of how (name) communicates and a trust level he has not had for a while with a care agency."

## Self assessment

Services were not required to submit an action plan this year.

## From this inspection we graded this service as:

Quality of care and support	4 - Good
Quality of staffing	3 - Adequate
Quality of management and leadership	3 - Adequate

## Quality of care and support

### Findings from the inspection

Both people who use the service spoke positively of the care and support provided and appreciated the flexibility of the service to meet their needs. They had opportunities to give their views through care reviews and satisfaction questionnaires although both told us they preferred to communicate with the manager directly and could do so at any time. We saw evidence of improvements to the service as a result of an issue raised at a review. This showed us that the manager listened to and acted on feedback. We discussed the need for the service to ensure that each person's care was reviewed every six months whether or not the person chose to attend. (See Recommendation 1)

In general we found care plans to be person centred. We saw that since the last inspection they had been improved to ensure they were up to date and reflected assessed needs. We discussed ways in which they could be improved further by only including areas relevant to the person. We would now like to see more of a focus on identifying outcomes for the person rather than focussing on tasks to be completed.

Risk assessments had also been updated to identify some specific risks and how they should be managed. However we thought that they too could be improved further by including only risks relevant to the person. This would support a more person centred approach.

A detailed service user guide provided new and prospective service users with a good range of information outlining the services provided based on the values of the company. This helped people to make an informed decision on whether or not the service was appropriate for them.

### Requirements

**Number of requirements:** 0

### Recommendations

**Number of recommendations:** 1

1. The manager should ensure that each person's care and support is reviewed every six months irrespective of whether the person chooses to attend the review.

National Care Standards, Care at home, Standard 4: Management and staffing

**Grade:** 4 - good

## Quality of staffing

### Findings from the inspection

People who use the service and a relative spoke very positively of the staff providing their care and support. We found the homecare assistant to be professional and motivated to provide good care.

We found that staff recruitment procedures followed best practice for safer recruitment which helped to ensure the safety of people using the service. The worker was aware of their responsibilities with regard to adult protection.

The homecare assistant we spoke to told us that their induction, which included a period of shadowing, prepared them for their role. We saw their training record which showed that they had come with a wide range of previous training and experience. However the service had not provided any formal training other than food hygiene, medication and fire safety during induction. We could see that the manager was beginning to source relevant training but now needed to develop a training plan to meet current and future staff training needs to keep them up to date with best practice to improve outcomes for people they support. (See Recommendation 1) It was particularly relevant at this time for the manager to source autism training as identified at the last inspection. (See Recommendation 2)

The homecare assistant told us that they felt well supported by the manager and director who they could contact at any time. However there continued to be no formal planned supervision and so we could not see how staff had opportunities to discuss their work and any training and development needs. We have repeated a recommendation that staff receive formal supervision so that they can be properly supported in their role. (See Recommendation 3) We were told that this would be the responsibility of the newly recruited homecare supervisor (see Quality of Management and Leadership for further information) and will follow it up at the next inspection.

The manager was aware of the requirement for staff to register with the Scottish Social Services Council and we discussed the need for them to achieve a relevant qualification to maintain their registration.

## Requirements

**Number of requirements:** 0

## Recommendations

**Number of recommendations:** 3

1. The manager should develop a training plan for individual staff that reflects the current and future needs of people who use the service.

National Care Standards, Care at home, Standard 4: Management and staffing

2. The manager should source appropriate training in autism for staff working with people with autism.

National Care Standards, Care at home, Standard 4: Management and staffing

3. The provider should develop and implement a system of supervision of staff that offers the opportunity to discuss practice issues, learning and development and performance on a regular basis.

National Care Standards, Care at home, Standard 4: Management and staffing

**Grade:** 3 - adequate

## Quality of management and leadership

### Findings from the inspection

A positive development since the last inspection has been the appointment of a homecare supervisor to help expand the service and ensure compliance with appropriate standards in areas such as supervision, training, staff competency and quality assurance. The new supervisor was due to start in the next few weeks. We will assess the impact of this new appointment at the next inspection.

We found some systems in place for quality assurance - reviews, annual questionnaires and feedback from people who use the service and relatives. The regular contact the manager had with both people who use the service enabled him to have a good overview of the care provided and to identify and respond promptly to any changes. It also meant that people could directly communicate anything they were not happy about. However more comprehensive quality assurance systems now need to be developed. This is important as the service has plans to expand to provide care and support to more people who are likely to have a wide range of support needs. Audits should include observation of staff practice and checks on the quality of care plan paperwork to ensure best practice. (See Recommendation 1) We were told that this was another area that the newly appointed homecare supervisor would have responsibility for.

There was an improvement plan for the company overall but not one specifically for the care service. We discussed with the manager the need to now develop a service specific improvement plan that was continuous and took into consideration the views of people using the service, relatives and staff. (See Recommendation 2)

During this inspection the manager has complied promptly with our requests for information and we found him to be receptive to suggestions for improvement. We are satisfied that he is aware of his responsibility with regard to submitting the information we require to carry out our regulatory activity when he is required to do so. We considered that the service now has the capacity to improve but much is still at the planning stage and we have yet to see results. The provider now needs to ensure that the plans for development are carried through and sustained in the long term.

### Requirements

**Number of requirements:** 0

## Recommendations

### Number of recommendations: 2

1. The manager should ensure that there are robust systems in place to audit all areas of the service and assure quality. All checks should be recorded along with evidence of any follow up.

National Care Standards, Care at home, Standard 4: Management and staffing

2. The provider should develop a service improvement plan that is continuous and includes areas for improvement identified by the service as well as areas identified at this inspection. It should also take into consideration the views of people using the service and staff and be regularly reviewed and show when actions have been completed.

National Care Standards, Care at home, Standard 4: Management and staffing

**Grade:** 3 – adequate

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

## Previous requirements

### Requirement 1

In order to receive a good quality of care and support, service users must have personal plans that contain accurate up to date information about their needs, risks and desired outcomes.

Service users must receive care that is responsive to their needs and helps them live a quality of life in a safe and enabling way. We found that risk assessments were not reviewed at the minimum frequency and did not incorporate identified risks, meaning that there was no evidence of planning to ensure people's safety.

The provider must ensure that service users' health and wellbeing needs are being met through effective care planning and risk assessment practices.

This is in order to comply with:

The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/210) Regulation 4(1)(a) Welfare of users – a provider must make proper provision for the health, welfare and safety of service users and Regulation 5(2)(b) Personal plans.

Timescale for meeting this requirement: within four months from receipt of this report.

**This requirement was made on 22 May 2017.**

**Action taken on previous requirement**

Personal plans had been updated and contained information that reflected people's assessed needs.

**Met - within timescales****Requirement 2**

In order to receive good quality care and support, service users must have their needs regularly reviewed. We found that one care plan was significantly out of date.

Care plans were not being reviewed on a six monthly basis or sooner as required. Care plans must be reviewed in conjunction with service users on a regular basis. This must take place at least six monthly or sooner if a person's needs change. This is to ensure that care is being provided in line with the person's needs and preferences and if any changes are needed these are made. Service users must receive care that is relevant to their needs at all times.

The provider must ensure all service users' health and welfare needs are fully reviewed at least every six months or sooner if the service user's care and support needs change. In addition, the provider must be able to evidence these reviews and any changes to a service user's care and support which have taken place.

This is in order to comply with:

The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/210) Regulation 4(1)(a) Welfare of users and Regulation 5(2)(b) Personal plans.

Timescale for completion: within six months from receipt of this report.

**This requirement was made on 22 May 2017.**

**Action taken on previous requirement**

The information in both plans had been recently reviewed and reflected assessed needs. Where a person chose not to attend their review we discussed the need for a review of the care plan information to be carried out anyway and have made a recommendation to that effect. See Recommendation 1 under Quality of care and support.

**Met - within timescales****Requirement 3**

In order to ensure that staff can meet the needs of service users to a good standard, staff must receive training appropriate to their role. The provider must keep an up to date record of this, ensuring that it includes dates of training attended by individual staff and identifies when/if refreshers are due. We found that this was not in place within the service and the provider relied on staff having prior training from other providers in order to be able to safely care for and support service users.

This is in order to comply with:

The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/210) Regulation 15(a) and (b) Staffing.

Timescale for meeting this requirement: two months from receipt of this report.

**This requirement was made on 22 May 2017.**

## Action taken on previous requirement

The provider had a record of training that staff had completed. They had begun to source relevant training but we thought that more could be done to progress this. We have made a recommendation about developing a training plan and a recommendation about autism training. See Recommendations 1 and 2 under Quality of staffing.

**Met - outwith timescales**

## Requirement 4

In order for service users to receive the best possible quality of care, the provider must have systems in place that effectively assure quality of care, staffing and management of the service. We did not see that the service had implemented any of the systems it identified in its agreements with service users, including spot checks and quality audits.

The provider must ensure that quality assurance systems are robust and effective.

This is in order to comply with:

The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/210) Regulation 4(1)(a) Welfare of users.

Timescale for meeting this requirement: four months from receipt of this report.

**This requirement was made on 22 May 2017.**

## Action taken on previous requirement

We considered that enough action had been taken to meet most of this requirement but have made a recommendation to support further improvement as the service develops. See Recommendation 1 under Quality of management and leadership.

**Met - outwith 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 develop and implement some system of supervision of staff that offers staff the opportunity to discuss practice issues, learning and development and performance on a regular basis. This could take the form of group supervision that can incorporate a defined element of group supervision as well as a defined element of team meeting/business matters. This would offer staff the opportunity to meet together as well as to receive clear guidance and support from the service manager.



National Care Standards Care at Home: Standard 4 - Management and Staffing.

**This recommendation was made on 22 May 2017.**

#### Action taken on previous recommendation

This recommendation has not been met and the first part is repeated. See Recommendation 3 under Quality of staffing. The second part does not apply as there is currently only one member of staff.

## Complaints

There have been no complaints upheld since the last inspection. Details of any older upheld complaints are published at [www.careinspectorate.com](http://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	
15 Mar 2017	Announced	Care and support	2 - Weak
		Environment	Not assessed
		Staffing	2 - Weak
		Management and leadership	2 - Weak
10 Mar 2016	Announced (short notice)	Care and support	2 - Weak
		Environment	Not assessed
		Staffing	2 - Weak
		Management and leadership	2 - Weak
31 Oct 2014	Unannounced	Care and support	3 - Adequate
		Environment	Not assessed
		Staffing	3 - Adequate
		Management and leadership	2 - Weak

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