

# Renfrewshire Council Home Care Service Housing Support Service

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Type of inspection: Unannounced  
Inspection completed on: 17 November 2017

**Service provided by:**  
Renfrewshire Council

**Service provider number:**  
SP2003003388

**Care service number:**  
CS2004080299

## About the service

Renfrewshire Council home care service is operated by Renfrewshire Council Health and Social Care Partnership (HSCP). The service delivers support to assist people to remain living in their own home. The service is registered with the Care Inspectorate to provide a combined housing support and care at home service.

People who use the service have a variety of support needs including physical disabilities, sensory impairment and difficulties associated with dementia.

Renfrewshire Council home care service commissions other providers to deliver support hours in the area. The service also manages community meals and technology enabled care services (telecare).

The reablement, long term home care and extra care housing services are referred to within this report. These are the elements of the service that are registered with the Care Inspectorate.

## What people told us

We met with four people living within one of the extra care housing services and two of their relatives. We also visited 13 people at their home address and had opportunity to meet with relatives at the same time.

An inspection volunteer carried out telephone interviews with a further 17 people who either received the service directly or were the relatives/representatives of people receiving the service.

Prior to the inspection we sent care standard questionnaires to the provider to distribute people using the service or their relatives/representatives. The Care Inspectorate received 34 completed questionnaires from the 50 sent.

Generally people indicated that the service provided was good with some expressing high levels of satisfaction. Less favourable comments, although fewer, were also expressed, some of the things people told us are as follows:

"we can't fault the carers, they are all very polite and helpful".

"my life has changed between the help I've had from the team and the help I've had from my family".

"they cheer you up and make me happy in the morning".

"do not get the same carers all the time, sometimes I have to tell what is wrong with me".

"the carers attending to my relative can change on a daily basis causing distress and upset".

"carers from agency service can be used and they are unaware of the service users needs and not sure how to use equipment that is required for moving and handling".

"the staff appear to be extremely busy while they give me all the support that I need, they could do with some more staff".

"no support plan has been completed - no copy at home for reference".

"feel the carers in the morning and at night are rushed".

"all of the care staff who have attended to me have all been very kind and caring".

"I am so happy with the care I receive. The ladies are so caring and helpful and make a wonderful team".

"the staff are great, I have no complaints how they treat and care for my relative".

Further analysis of the questionnaires indicated that people did not always feel that the service asked for their opinion about how it could improve. Others noted that they were not aware of the service's complaint procedure or that they could complain directly to the Care Inspectorate. We highlighted these points to the provider.

## Self assessment

We received a completed self assessment document from the provider. This identified what the provider thought it did well, areas for improvement and developments that were planned or had taken place.

## From this inspection we graded this service as:

<b>Quality of care and support</b>	4 - Good
<b>Quality of staffing</b>	not assessed
<b>Quality of management and leadership</b>	3 - Adequate

## What the service does well

Renfrewshire Council home care service continued to support people with diverse needs in a responsive way. The provision of immediate care for people being discharged from hospital was a service strength as delayed discharges can result in people losing independence and life skills.

The reablement service continued to work closely with community health staff. This partnership approach helped people to receive the necessary input and support to live at home. "I have always had an excellent service from the carers, they had assisted me in all aspects of my reablement".

The provider demonstrated a commitment to making the service more efficient. Effective links with the pharmacy technicians and subsequent medication reviews had reduced the frequency of medication prompts for some people.

Homecare staff who provided direct supports demonstrated resourcefulness and leadership values and people receiving the service and their relatives spoke positively about staff. Where people expressed dissatisfaction this was generally in areas outwith the control of staff. "The carers were absolutely super, very bright and bring the outside world in".

Opportunities for staff to meet with their colleagues and managers contributed to peer learning and development.

Robust absence management and on-going recruitment meant that there had been less reliance on agency staff since the previous inspection.

This had helped reduce the incidence of people being supported by staff who didn't know them. The introduction of formal induction training and shadowing opportunities had helped prepare new staff for their role. Dementia training was offered within the induction training.

The provider was working to ensure that it was fulfilling its statutory responsibility to review the support provided. These reviews were carried out by a dedicated team of coordinators and we noted that there had been a marked improvement in the frequency of reviews.

## What the service could do better

Whilst the provider continued to roll out dementia training there was no evaluation of the difference this had on the outcomes of people with dementia.

It was not evident what impact the dementia ambassadors and champions roles were having in respect of promoting improvements in the care and treatment of people with dementia. The provider needed to clearly define the purpose of these roles.

There was no clear pathway for staff providing direct supports to contribute their knowledge of individuals directly to their core care plan. Information contained within the core care plans we looked at lacked the level of detail required to guide staff to work with people in a person centred way.

Some areas of medication management needed to be improved to ensure that staff work safely, consistently and in accordance with best practice. We identified that the way the provider was supporting some people with their medication was putting them at risk, the local medication policy adding to staff confusion.

People who needed their medication to be administered were not being supported by staff who were trained or assessed as competent to perform this task. The details of medication prescribed to people who required assistance with medication was not recorded within their files. (See requirement)

Staff providing direct supports were not receiving formal one to one supervision. This meant that governance was not as robust as it should be.

The provider did not have a clear strategy to promote participation. We concluded that opportunities for people to help inform service development could be improved.

The provider should have notified the Care Inspectorate of some of the incidents, accidents and events that we found when we sampled accident and incident records. (See Recommendation)

## Requirements

### Number of requirements: 1

1. 1. The provider must ensure that medication support is managed in a manner that protects the health and wellbeing of service users. In order to do this the provider must ensure that:

- (a) Staff understand their role in, and accountability for prompting, assisting and administering medication.
- (b) The service's policies and procedures reflect up-to-date best practice in Scotland.
- (c) There is a system in place for regular reviews and audits of medication records to ensure medication is either prompted, assisted or administered in accordance with prescription and best practice guidelines.
- (d) Persons employed in the care service receive training appropriate to the work they are to perform.

The provider should develop a SMART action plan detailing how and when improvements will be made. This should be submitted to the Care Inspectorate by 31st January 2018

This is in order to comply with:

The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011, Scottish Statutory Instrument 210, Regulation 4 (1)(a) - a Regulation to make proper provision for the health, welfare and safety of service users, and, Regulation 15 (b) (i) - a Regulation about staff having appropriate training for the work they are to perform.

## Recommendations

### Number of recommendations: 1

1. The provider should ensure that accidents and incidents are notified timeously to the Care Inspectorate in accordance with the guidance 'Records that all registered care services (except childminders) must keep and guidance on notification reporting'.

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

## 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).

## Inspection and grading history

Date	Type	Gradings
15 Feb 2017	Unannounced	Care and support 5 - Very good Environment Not assessed Staffing Not assessed Management and leadership 5 - Very good
5 Feb 2016	Unannounced	Care and support 5 - Very good Environment Not assessed Staffing 5 - Very good Management and leadership 5 - Very good
2 Dec 2014	Unannounced	Care and support 5 - Very good Environment Not assessed Staffing 5 - Very good Management and leadership 5 - Very good
27 Nov 2013	Announced (short notice)	Care and support 4 - Good Environment Not assessed Staffing 4 - Good Management and leadership 4 - Good
23 Oct 2012	Unannounced	Care and support 4 - Good Environment Not assessed Staffing 4 - Good Management and leadership 4 - Good
18 Oct 2010	Announced	Care and support 5 - Very good Environment Not assessed Staffing 4 - Good Management and leadership Not assessed
11 Dec 2009	Announced	Care and support 3 - Adequate Environment Not assessed Staffing 3 - Adequate Management and leadership Not assessed
28 Nov 2008		Care and support 4 - Good Environment Not assessed Staffing 3 - Adequate

Date	Type	Gradings	
		Management and leadership	4 - Good

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