care inspectorate

Community Alarm Service
Housing Support Service

Merrystone Care Base
10 Blairhill Street
Coatbridge
ML5 1PG

Telephone: 01236 622400

Type of inspection: Unannounced
Inspection completed on: 5 December 2017

Service provided by:
North Lanarkshire Council

Service provider number:
SP2003000237

Care service number:
CS2004071319

HAPPY TO TRANSLATE

About the service

The Community Alarm Service is based in Coatbridge and is provided by North Lanarkshire Council across six locality areas: Wishaw, Motherwell, Bellshill, Cumbernauld, Coatbridge and Airdrie. The service provides a 24 hour alarm service to people living in their own homes and those who are tenants in sheltered housing complexes. Community alarms can be installed in the home of anyone in North Lanarkshire who has been assessed as needing one. Initial assessments are carried out by Social Work.

Response advisors based in Coatbridge respond to alarm calls from the unit installed in a person's home, via the two-way speaker system. They provide advice and reassurance to the caller. The response advisor will then contact a relative, emergency services or ask a mobile support worker to make a visit. The response advisor, when requesting a home support worker to visit a service user, will be able to give them information about the service user from the information stored on the computer system. The system has been developed to incorporate additional technology, for those assessed as needing it, alerting the call centre to doors being opened, for example, where someone with dementia may leave their home during the night.

The community alarm service leaflet describes the service as "assists people living in North Lanarkshire who need some extra support to stay in their own homes with the security of knowing they can call for assistance in an emergency, such as a fall or illness, at any time of the day or night".

What people told us

We received thirty-three completed Care Standard Questionnaires. We sent questionnaires to the service to be distributed to service users and their carers/relatives. Some of the responses given include:-

"Any time I have used it I have found the staff to be very supportive to my needs"
"Use the alert for emergencies and peace of mind for family"
"I have had it for 8 years, I used to be regularly in touch (a phone call to check the device was in working order) this all stopped prior to the introduction of paying. Recently, (once the service was reinstalled), I was visited by a manager of staff who upgraded the system. She was very pleasant, capable and helpful. I am grateful for the service as it gives me confidence in living alone knowing that assistance is at hand should I require it"
"The only additional aid is a community alarm which would be of real value if we understood all of the service which are available via this alarm which we are currently unaware of".

Self assessment

This service was not asked to produce a self-assessment as part of this inspection.

From this inspection we graded this service as:

Quality of care and support	2 - Weak
Quality of staffing	3 - Adequate
Quality of management and leadership	2 - Weak

Quality of care and support

Findings from the inspection

Inspectors found this service to be operating at a weak level for this quality theme.

Between 01/04/17 and 31/10/17 the service attended 18,391 visits to the homes of those that were using the service. These calls were responded to by 3 teams of 2 staff, each team within a response van. Inspectors found that 57% of these calls were for personal care and not in response to emergencies such as falls, illness or those that had pressed the alert but were unable to communicate.

Inspectors found that calls for emergencies such as falls, sudden illness or alerts where the person did not respond, were being prioritised over calls for personal care including toileting. Staff on their way to a personal care call could, on occasion, be diverted away from the call to attend emergency alerts that had been received in the call centre. However, if the personal care call had commenced, the emergency call had to wait until a response vehicle became available. Inspectors concluded that this practice was starting to have an effect to the waiting times of those pressing their pendant alarm in an emergency situation. For those requiring personal care, wait times were significantly increased. Inspectors heard directly from staff, responses in staff questionnaires, the services own quality survey and complaint activity, that waiting time for assistance with personal care could be between 1 and 4 hours. One person advised the service that they had waited in excess of 2 hours for assistance with toileting and was experiencing difficulties with skin sores healing. Staff in the call centre do not always have access to specific information, to easily identify where a personal care call may be a priority.

Inspectors saw examples of the alert service being used to assist with staff shortages in home care services, both within North Lanarkshire Council services and in services contracted out to private providers. There were also examples of those using home care services, refusing some elements of their care and then pressing their alert buttons later, to obtain the services they had earlier refused. This placed additional strain on the services response times. There was evidence of some people who use the service, regularly having 4 additional call outs per day in addition to their home care services. In these circumstances managers of the service link with care manager to review the case.

Earlier in the year, charging had been introduced for those with community alarm equipment installed. This had led to equipment being returned to the provider. In the summer of 2017 the charges were lifted and this led to a large number of reinstallations. Those staff that respond to alarms are also the staff that deal with the removal, replacement and installation of equipment. Although, an additional part-time staff resource had been allocated to assist with this, there was still a considerable increase in the hours required.

For requirements relating to these issues please refer to Quality of Leadership and Management.

Requirements

Number of requirements: 0

Recommendations

Number of recommendations: 0

Grade: 2 - weak

Quality of staffing

Findings from the inspection

Inspectors found this service to be operating at an adequate level for this quality theme.

Inspectors shadowed 1 team who were delivering the service and 1 response advisor, who was receiving and dealing with alert calls.

Staff responding to calls in the community were directed where to attend by the response advisor. The Inspector noted that the vehicle had travelled a considerable distance to reach a personal care call and when almost there they were diverted away to deal with an emergency call. They then had to return to the personal care call. This increased the miles driven and waiting time for both calls. Staff were observed to be kind and compassionate with those they were helping, and were knowledgeable and skilled in assisting them.

Inspectors found low morale when speaking with staff. Staff shared with Inspectors that they believed the service had lost its identity, that more and more areas of responsibility were being added, for example, covering for the absences of sheltered housing wardens, that they were inundated with home care calls and often didn't have a night-time manager for up to 2 weeks at a time. One person reflected that everything was urgent and it was difficult to find a balance of what was urgent. Another staff member reflected 'everybody relies on us too much, everything just gets put on our door, if there is sickness responders end up having to cover them, we drop off toilet paper or drop off commodes, which is inappropriate use of our staff'.

Inspectors found clear evidence of staff raising at supervision most of the issues that were found by Inspectors. One staff member raised the growth of call activations and consequential delayed visits. The record noted they were informed that management was aware, but no additional working resources will be made available in the foreseeable future and to prioritise visits. One staff member raised the issue of the time of reinstalling equipment and was told it would settle down over the next few months. Staff spoken to all raised the issue of working without a night shift manager and were told this was outside of the managers control, they were aware of it but it was unlikely it would improve in the near future. The manager advised inspectors that managers working night shifts are an additional post and are not specifically for the community alarm service.

The service has regular staff meetings, where the manager gives information to staff on various items. The minutes of the previous meeting are agreed. The records sampled did not record staff interaction in the meeting and action plans were also not included.

Requirements

Number of requirements: 0

Recommendations

Number of recommendations: 0

Grade: 3 - adequate

Quality of management and leadership

Findings from the inspection

Inspectors found the service to be operating at a weak level for this quality theme.

The service are working in partnership with the Community Liaison Service. This involves working towards connecting members of the public to their wider communities to promote independence and to decrease early dependency on services. A member of the community liaison team has conducted home visits with individuals from community alarms, to facilitate a personal outcomes discussion. This coincided with a data check, equipment check and review. This has led to 190 clients contacted, 139 visits taking place and 88 amendments to service. There are monthly reporting sheets to track progress. We will look at the impact of this work, on outcomes for people using this service, at the next inspection.

The Manager has been looking at new falls equipment that may improve the experience of those, that are being assisted from the floor after a fall. We will look at the progress of this at the next inspection.

Staff and Managers were clear that responding to alert calls was their main priority, however installations of alarm systems had impacted upon response times. A budget was allocated to the service for the additional hours of work required, when the decision to cease charging was made, causing an increase in service demand. Additional staff were not brought into the service at this time, leaving the service reliant upon existing staff working additional hours to achieve the re installations required.

Inspectors noted evidence of some planned care, supporting home care services. The service had also added to its emergency response to falls, illness and alerts where the person did not speak, a response for personal care and toileting, with this aspect of responses making up 57% of visits between April and October 2017. This had also placed a strain on the service.

Inspectors saw that the unplanned changes that had taken place, to the scope of the service, were causing staff to struggle to understand the expanding objectives of the service and resultant prioritisation of responses. Inspectors found that managers were advising staff that they were aware of the problems however, there were no updates, feedback or action plans on how things may improve.

Response vans had decreased from 6 with 1 staff member deployed to each van, to 3, with 2 staff members deployed to each van. This has had a mixed effect, those requiring 2 members of staff do not have to wait for two vans to arrive however, each van has to cover a bigger geographical area having a knock on effect on overall arrival times. Vans are located at the Care Base, necessitating two vans having to drive out to other areas, returning to base for a break and again at the end of the shift, all depleting van availability time, impacting on response times.

Requirements

Number of requirements: 3

1. The provider must decide on the scope, aims and objectives of the service. Those that use the service must be made aware of the scope aims and objectives of the service.
There must be an agreement in place between the service and those that use the service as to what the alert can be used for and what will be provided to them in the event of an alarm activation.

SSI2011/210 4 Welfare of users

4.(1) A provider must:

(a) make proper provision for the health, welfare and safety of service users;
Time Scales - to be completed by 30th June 18

2. The provider must have a written agreement with both external and internal health and social care partners, operating within the care base, such as the Out of Hours Management and Social Work Services, stating what the arrangements are in the event of them not being able to staff these positions. This is to ensure that Response Advisers are not carrying out aspects of additional roles of others, placing additional strain on the core service.

SSI2011/210 4 Welfare of users

4.(1) A provider must:
(a) make proper provision for the health, welfare and safety of service users;
Time Scales - to be completed by 30th June 18.

3. The provider must review the staffing numbers, transport availability and vehicle down time, to ensure that the needs of those using the service can be met within the time scales set out by the service, as agreed with those that use the service.

SSI 2011/210 15 Staffing

15. A provider must, having regard to the size and nature of the care service, the statement of aims and objectives and the number and needs of service users;

(a)ensure that at all times suitably qualified and competent persons are working in the care service in such numbers as are appropriate for the health, welfare and safety of service users;

Time Scales - within 12 weeks of the publication of this report.

Recommendations

Number of recommendations: 0

Grade: 2 - weak

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

Previous requirements

There are no outstanding requirements.

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

Previous recommendations

There are no outstanding recommendations.

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	
25 Jan 2017	Unannounced	Care and support Environment Staffing Management and leadership	5 - Very good Not assessed 5 - Very good Not assessed
29 Feb 2016	Unannounced	Care and support Environment Staffing Management and leadership	5 - Very good Not assessed 5 - Very good 4 - Good
16 Aug 2013	Announced (short notice)	Care and support Environment Staffing Management and leadership	5 - Very good Not assessed 5 - Very good 5 - Very good

Date	Type	Gradings	
24 Aug 2012	Unannounced	Care and support Environment Staffing Management and leadership	4 - Good Not assessed 5 - Very good 5 - Very good
10 Nov 2010	Announced	Care and support Environment Staffing Management and leadership	5 - Very good Not assessed Not assessed Not assessed
22 Jan 2010	Announced	Care and support Environment Staffing Management and leadership	5 - Very good Not assessed 4 - Good Not assessed
19 Dec 2008	Announced	Care and support Environment Staffing Management and leadership	5 - Very good Not assessed 5 - Very good 5 - Very good

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