

Glenrothes and North East Fife Assessment and Reablement/Mainstream Services Housing Support Service

Homecare Team 2nd Floor West Fife House North Street Glenrothes KY7 9SR

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Service provided by:

Fife Council

Service provider number:

SP2004005267

Care service number:

CS2004086042



About the service

Fife Council is a local authority provider of a wide variety of registered care services throughout Fife. Home Care and Support Services is divided into three geographical areas, Glenrothes and North East Fife, Dunfermline and West Fife, and Kirkcaldy and Levenmouth and all have adopted a branch approach to the registration of their combined housing support/care at home services. All three geographical services are registered separately and are subject to separate inspections.

The staffing structure has an overall manager based at County Buildings (Cupar) and 13 home care coordinators.

Home care schedulers, who are responsible for arranging staff cover for service users are located centrally within a Resource Unit based in Rothesay House, Glenrothes. Each home care coordinator covers a geographical area, and is responsible for line management of the teams of home carers within their respective local areas.

Fife Council's Mobile Emergency Care Service is encompassed within the registration of Home Care and Support Service (although this is currently under review).

Fife Council states that its aim is to:

"Enable people and their carers to live in their own homes for as long as possible. This is done by providing reliable, high quality, flexible care/and or support in the community for people and those who care for them. The care offered will be the minimum needed to best help people to be independent".

What people told us

We sent out questionnaires to service users and their relatives to find out what they thought about the service and we received 41 completed questionnaires. We also visited service users in their own home whilst shadowing staff.

We had the assistance of an inspection volunteer who gained the views of the service from service users and their relatives via the telephone. An inspection volunteer is a member of the public who volunteers to work alongside Care Inspectorate inspectors during the inspection process. Inspection volunteers have a unique experience of either being a service user themselves or being a carer for someone who uses or has used services. The inspection volunteer's role is to speak with people using the service (and potentially their family carers, friends or representatives) being inspected and gather their views. The comments received by the inspection volunteer have been incorporated in this report.

Comments received during the inspection from service users and their relatives included:

"They usually tell you if they're running late. It's good; there's nothing not good about it."

"It's very good, the carers are all lovely. I don't know where I would be without them. It's not the same girls all the time. If we got the same girls all the time they would know exactly what's going on. I missed a visit 2-3 weeks ago. I phoned and they eventually sent someone out."

"The carers just arrive at the door. I don't always know who is coming but they all have their ID badges."

"I can't fault the carers as there's a small team of carers that care for our relative and all are good to them. If a new carer comes they always come here first with a known face for their first visit."

"My regular carers are spot on with coming here when they are due but if the relief carers are covering me then they come when they can, so I know if my regular carer is off then the timing won't be spot on they can come earlier or later."

"Timekeeping is pretty good I will say."

"I have no fault with the time they spend here it is just right and I have known them go over their allocated time and they were brilliant as we were worrying but the carers reassured us it was ok, and they just continued till all was well with my relative. No worries there."

"I will say the timekeeping is spot on more or less every visit. Never been left without a carer."

"The carers complete it (support plan) at the end of each visit and I've never had a review meeting that I'm aware off."

"My relative's review was last October so I think we should hear about this year's sometime soon. The carers do complete the big folder at the end of each shift."

"My carers understand about dementia as they know how to speak to my relative or coax my relative to do certain tasks. The family have no worries as the carers are all lovely caring and dedicated people."

"I know they get training as I hear them say to me 'I'm on a training session tomorrow so I won't be covering here tomorrow'. I have good carers; no worries as they are attentive and good to me."

"The carers are very competent in the use of mobility aids, they do receive training on this from time to time. We think the carers are excellent at their role."

Self assessment

We did not request a self assessment this year. We discussed and considered the service's own development plan as part of this inspection.

From this inspection we graded this service as:

Quality of care and support4 - GoodQuality of staffing4 - GoodQuality of management and leadership4 - Good

Quality of care and support

Findings from the inspection

Concerns and suggestions could be made through Fife Elderly Form which meets on a regular basis. This is an independent group which offers information and advice to older people in Fife. The team manager attended this forum on a regular basis.

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Participation leaflets describing the different ways service users and their families can voice their opinion on how well the service is doing and suggest areas for improvement were in the service users' personal plans.

The majority of service users and their relatives told us that they were very happy with the care and support they received from Fife Council Home Care Services when their regular carers attended. They told us that problems arose when different carers were allocated. This is addressed further under quality theme 4.

Service users and/or their families were involved with the development of support plans when starting the service. The service had 'meet and greet' checklists which were completed by the home care coordinators with the service user shortly after starting the service. This gave the service users an opportunity to say what was working well for them and request any changes to their support package. It was highlighted during the last inspection that the home care coordinators usually did not work weekends, therefore it would be difficult to carry out 'meet and greet' checklists with service users who receive support at weekends only. The manager and coordinators agreed to find a solution to this. During this inspection we were informed that as from April/May this year three care coordinators will be on duty every weekend.

We found that some service users' reviews were overdue. We also found that some service users' support plans had not been updated to reflect changes in their needs. This was discussed with the manager last year who told us that these types of issues would be identified and addressed during the quality assurance procedure (this procedure is detailed more in the 'quality of management and leadership' section in this report). During this inspection we still found areas for improvement for example:

- some support plans stated 'apply cream' but the type of cream was not documented
- days and times of service delivery had not been changed in the support plan to reflect actual service delivery
- the service to be delivered had not been updated in many support plans i.e they still stated domestic tasks were being delivered on certain days and Fife Council no longer delivers this service
- no evidence of regular reviews in some care plans (this is further addressed under quality theme 4).

We have made a recommendation (1) regarding support plans.

Requirements

Number of requirements: 0

Recommendations

Number of recommendations: 1

- 1. It is recommended that the manager should review service users' support needs:
- (i) when requested to do so by the service user or any representative
- (ii) when there is a significant change in a service user's health, welfare or safety needs
- (iii) at least once in every six month period whilst the service user is in receipt of the service.

Reference is made to the National Care Standards, Housing Support Services; standard 2 - Your legal rights, standard 3 - Management and staffing arrangements and standard 4 - Housing Support Planning.

Grade: 4 - good

Quality of staffing

Findings from the inspection

People being supported were very complimentary of their regular staff supporting them and their high level of professionalism. They also told us of the stress they experienced if different carers attended on a regular basis. This is further addressed under quality theme 4.

The training liaison team met every three months to discuss staff training needs and incorporate this into the training programme. All new staff were required to undertake five days core skills training before they could start working. All staff were required to undertake regular moving and handling refresher training and we were informed it could be difficult to release staff for this. As a result the service was implementing a new system which included e-learning and a shorter manual training session. This should mean that all staff are kept up-to-date with best practice guidelines. We saw that mandatory training was up-to-date for most staff and the manager was working with the training facilitators to capture those who had missed. We discussed the importance of all staff being up-to-date with best practice guidance.

SVQ (Scottish Vocational Qualification) level II is mandatory for all care and support staff in accordance with the SSSC (Scottish Social Services Council - the regulatory body for health and social care workers) registration criteria. Systems were in place to enable the service to meet this criteria.

Supervision provides opportunity for the management and employee to discuss any matters of concern, review work performance against agreed objectives and review the employee's personal learning and development plan. We found that staff were receiving supervision on a regular basis.

We saw that staff had the opportunity to attend regular staff meetings to keep them updated with service delivery.

Some service user specific training was available, however, some staff told us that they had requested training such as Dementia Care for a long time and not received it.

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It was the schedulers' responsibility to allocate service users to the carers at the start of the service. The schedulers had no access to details of service users' needs and abilities therefore could not be matched to carers' skills. The resource centre manager told us 'preferred carers' were documented for every service user which matched their needs and staff skills. However, we found that this was not always taken into account when allocating carers to service users during periods of regular carers' unforeseen absences. We have made a recommendation (1) regarding training.

Requirements

Number of requirements: 0

Recommendations

Number of recommendations: 1

1. The manager should ensure that staff have the appropriate training and skills to meet the needs of the people they are giving care and support to.

Reference is made to the National Care Standards, Housing Support Services; standard 3 Management and Staffing Arrangements.

Grade: 4 - good

Quality of management and leadership

Findings from the inspection

Staff told us that seniors and management were very supportive and approachable and they could speak to them when necessary.

We reviewed the accident and incident records held by the service and saw that they were completed fully and handled correctly. Where necessary they had been notified to the Care Inspectorate.

The service had a complaints procedure in place and we saw that in the main the procedure was adhered to when complaints were received. Service users told us they knew who to contact if they had any complaints or concerns

Last year we were informed that care and support reviews were carried out by the assessment and review team which was separate to the home care team. We were also told that the assessment and review team were not able to carry out six monthly reviews in accordance with legislation and usually managed an annual review only. As a result, a new procedure, the care at home quality review, supplemented by an environmental risk assessment had been developed. Home care coordinators were responsible for carrying out the audit. Unfortunately we found that in some cases this had not been carried out within the correct timescales.

Fife Council Home Care Services had developed a process with associated documentation for real-time monitoring; a system which alerts schedulers to staff's whereabouts and respond to late/missed visits.

Unfortunately some service users told us that they had experienced late/missed visits and had to report this to the service themselves before any action was taken.

There was a policy which dictated service users should be contacted if the carer is going to be more than 30 minutes late for the visit. We were informed that this did happen however we found no record to substantiate this.

Some areas for improvement had been highlighted by the service and steps were being taken to address the above and improve service delivery for example:

- the assessment and review team is returning to the remit of Fife Council Home Care Services in April this year
- flowcharts had been developed to inform staff of the extra processes in place to reduce late/missed visits. This included hourly checks of data which had reduced missed visits by 75%
- more schedulers were being recruited for the resource centre
- enhanced communication between schedulers and home care co-ordinators prior to carers being allocated to service users on commencement of service
- · clarity on the roles and responsibilities of each staff member circulated
- a formal process had been developed for recording all contacts made should a carer be running more than 30 minutes late
- a revised list of 'preferred carers' was being made for every service user for consistency.

We have made a recommendation (1) regarding quality assurance systems.

It was clear that the manager and staff spoken with were committed to providing good care and support and continually looking at ways to improve the service.

Requirements

Number of requirements: 0

Recommendations

Number of recommendations: 1

1. We acknowledge the efforts that have and are being made to improve service delivery. However, it is imperative that effective monitoring and quality assurance systems are in place. The changes that were highlighted to us during the inspection should be continually evaluated to ensure improvements are being made.

Reference is made to the National Care Standards, Housing Support Services; standard 3 Management and Staffing Arrangements.

Grade: 4 - good

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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	Туре	Gradings	
23 Mar 2017	Announced (short notice)	Care and support Environment Staffing Management and leadership	4 - Good Not assessed 4 - Good 4 - Good

Date	Туре	Gradings	
30 Oct 2015	Announced (short notice)	Care and support Environment Staffing Management and leadership	3 - Adequate Not assessed 3 - Adequate 3 - Adequate
9 Dec 2014	Unannounced	Care and support Environment Staffing Management and leadership	3 - Adequate Not assessed 3 - Adequate 3 - Adequate
9 Jul 2013	Announced (short notice)	Care and support Environment Staffing Management and leadership	5 - Very good Not assessed 5 - Very good 4 - Good
10 Jul 2012	Announced (short notice)	Care and support Environment Staffing Management and leadership	4 - Good Not assessed 5 - Very good 4 - Good
22 Dec 2011	Announced (short notice)	Care and support Environment Staffing Management and leadership	5 - Very good Not assessed 5 - Very good Not assessed
16 Dec 2010	Announced	Care and support Environment Staffing Management and leadership	5 - Very good Not assessed Not assessed Not assessed
19 Jan 2010	Announced	Care and support Environment Staffing Management and leadership	4 - Good Not assessed 4 - Good Not assessed
14 Jan 2009	Announced	Care and support Environment Staffing Management and leadership	5 - Very good Not assessed 4 - Good 4 - Good

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本出版品有其他格式和其他語言備索。

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