

Healthcare at Home Nurse Agency

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Type of inspection: Announced (short notice)
Inspection completed on: 6 February 2018

Service provided by:
Healthcare at Home Limited

Service provider number:
SP2004006616

Care service number:
CS2004072127

About the service

Healthcare at Home are the providers of this registered Nurse Agency. Healthcare at Home provide a U.K. nationwide service which has regional nursing offices. The base for the region of Scotland is currently situated in Coatbridge with a distribution facility where medication and intravenous treatments are stored. Other distribution centres are located further north in Scotland. Treatments can be delivered directly to patients' own homes or they may be taken by the nurse who is visiting the patient.

Nurses are provided by the agency to carry out intravenous treatments to patients in their own homes throughout the whole of Scotland, including the islands. The service is contracted by both the NHS and private healthcare insurance companies.

The referral process is made via a hospital consultant, clinical nurse specialist or pharmacist. The referral is then forwarded to Healthcare at Home customer services, or private referrals co-ordinator who obtain approval and initially contact the patient. The scheduling team then contact the local nursing team to allocate the patient's visit. The team then contact the patient prior to the first visit. There is an on-call service available 24 hours a day.

Healthcare at Home say that they "work with pharmaceutical companies and health systems to deliver the best possible care outside of the hospital for both acute and long-term conditions." Their philosophy is "the patient comes first."

What people told us

During the inspection we spoke to a number of people using the service. Some of their comments included:

"The information provided is useful and concise."

"The nurses build good relationships and put me at ease."

"I trust the nurses and have confidence in them."

"All the nurses are brilliant and treat me as an individual."

"Staff are very considerate."

"The service is so convenient."

"I really am very happy with the service."

"It saves so much time."

"The nurses are so efficient when they come in."

"The nurses are highly professional."

"They always come in smiling no matter what their journey has been like."

"Out of hours isn't brilliant as it is impersonal."

"I've completed surveys but don't get feedback about the results of them."

"Forward planning of the service could be better."

"The nurses are very flexible and accommodating but more notice would make it better."

"More notice of when the visit will be would be an improvement."

"More notice of the visit time would be better to save hanging around."

Self assessment

The Care Inspectorate did not request a self assessment for this inspection year.

From this inspection we graded this service as:

Quality of Information	5 - Very Good
Quality of care and support	5 - Very Good
Quality of staffing	5 - Very Good
Quality of management and leadership	4 - Good

Quality of information

Findings from the inspection

Information was available via the website which had different sections for patients and health professionals. Informative videos about the patient experience, relevant contacts and information provided initial information. The type of information available was varied. Information available for hospital consultants who referred patients to the service for home treatments was of a different format to patient information. It was appropriate for information to be presented in a format suitable for different people.

A welcome letter given to all patients prior to treatment outlined key information about the team who would support them and instructions of how to make contact with people if required. Written information given to patients was determined by the type of treatment being received. These documents were well presented, clear and provided patients with important information. Improvements had been made to the information available for people receiving the service in Scotland. People told us that information provided was clear. One person said, "I know where to get details if I need to get in touch".

Information regarding medication was clear. Delivery and storage instructions was communicated in writing with additional information provided by phone or text message if required. Booklets for specific medications contained information about the medicine as well as associated information and support. These formed a patient held record of treatment.

People were confident that staff could provide additional information about their care if required and also provided it at the right time. One person told us "I know the nurses can answer any questions and clarify issues for me, they are knowledgeable.

People were given the opportunity to give feedback about the service to the provider. Questionnaires were in use and the service plan to introduce a different way to seek feedback using multiple methods. They will be able to more easily evaluate feedback specific to Scotland and provide survey responses back to patients. We look forward to seeing how that progresses.

People commented on the very good communication with staff that included staff keeping them up-to-date with any issues that would impact on their visit.

Requirements

Number of requirements: 0

Recommendations

Number of recommendations: 0

Grade: 5 - very good

Quality of care and support

Findings from the inspection

People receiving the service valued the ability to have treatments in their own home. They welcomed the professionalism and knowledge of staff. People told us this gave them confidence in the treatment and allowed them to retain some of their own routines. People appreciated the relationships developed with staff which enabled them to be comfortable and confident. One person said "The nurses put me at ease and are so professional."

People placed importance on the flexibility of nurses who were very good at keeping people up-to-date with delays, such as weather conditions and impact on timings.

Hand held tablet devices were used for documenting care delivery. This electronic system provided a comprehensive recording mechanism. Consent for treatment was recorded in patient's homes. These things helped promote safe and effective care. An information and treatment record booklet was retained in the person's home which provided them with their own record and kept them involved with their care. Any adverse reactions were reported and risk assessments were completed prior to medication administration. All of these things protected patients and put them at ease. One patient said, "The nurses really understand what you are going through and it makes a difference."

Medication management involved several stages to ensure safe administration. Systems to manage prescriptions, temperature controlled medication storage, collection and delivery all played a part in safe administration in the patient's home. Pump systems for medication administration were maintained in accordance with manufacturer's guidelines.

Medication could be delivered directly to the patient or transported by the nurse. Clear protocols were in place to ensure safe administration. Medication records were completed fully and on completion of treatment, people signed their electronic records which kept them involved.

The system for reporting incidents or complaints created a positive culture which meant staff were open to reporting. Responses to adverse events were managed both by a central team and by the manager which allowed analysis and learning from these events to promote safe care.

Some people commented that when using the out of hours telephone number that it took some time to get to the right person for assistance and that it seemed to take some time for call handlers to find their records. People told us that scheduling of visits could be improved. People felt that more notice could be given when visits were being planned especially when treatments were given regularly.

Requirements

Number of requirements: 0

Recommendations

Number of recommendations: 0

Grade: 5 - very good

Quality of staffing

Findings from the inspection

Staff recruitment complied with good practice guidance. Staff were registered with the appropriate body, the Nursing and Midwifery Council (NMC) and checked under Protection of Vulnerable Groups scheme (PVG) which ensured that the service operated in line with regulations. New staff had an induction period which involved supervised practice, shadowing and one-to-one supervision. These things ensured staff were supported and competent to carry out their roles. Patients told us that any new staff member attending to them was supervised during first visits.

There was an overview of staff training which showed staff training needs had been met. A combination of face-to-face and electronic training was available to staff. The training supported staff development and competence according to the roles staff held. Staff had supported each other with professional development including revalidation with the Nursing and Midwifery Council (NMC). "My colleagues are brilliant, really supportive", one member of staff said.

Some mechanisms to support staff had not happened as regularly as planned. Supervision as part of the appraisal process and staff meetings had been less frequent than expected however, staff had supported each other throughout this period. This demonstrated their team working skills and commitment to the service.

We spoke to the majority of staff during the inspection. Staff appeared very motivated and committed to provide a flexible, efficient and compassionate service. Staff had worked hard to maintain the service during a period without a permanent manager. During this time, staff had continued to provide a consistent service to ensure patients had positive outcomes. Good communication amongst the team provided guidance to new staff which they told us they appreciated. A new manager had been appointed and staff reported an improvement in overall communication with them. Plans were in place to reinstate meetings and other support mechanisms. Patients spoke highly of the professionalism of the team. "They are just so knowledgeable and professional, really they are."

Requirements

Number of requirements: 0

Recommendations

Number of recommendations: 0

Grade: 5 – very good

Quality of management and leadership

Findings from the inspection

Organisational restructuring had taken place within the last year that had led to some different ways of working. Regular meetings amongst different departments had improved inter departmental understanding. Shared goals and interdepartmental working in turn supported day to day practice to more effectively to create positive outcomes for people using the service. There was more focus on gathering data to provide real time information to support service delivery and continuous learning. For example, analysis of incidents was more quickly disseminated to the manager to allow appropriate action to be taken at local level. A forward planner helped identify priorities for action to enable actions to be taken at the right time and by the right people.

The new manager had a structured programme of induction to ensure familiarity with the business. There was an open door policy and we heard that staff got quick responses to any questions they had either by phone, email or face-to-face. Having a new manager had increased management visibility which in turn had assisted with staff support. The staff team had shown leadership values and skills during the absence of a full time manager.

Systems for recording and monitoring factors associated with patient risk were in place. For example, formal mechanisms to record and monitor complaints, incidents and maintenance of equipment. This assured us that people using the service could have confidence in the organisation.

There was an overview of staff issues, such as dates for updating professional qualifications, ensuring staff remain on the professional register and Protection of Vulnerable Groups (PVG) membership. Although there were gaps in staff supervision and meetings, there were dates planned to ensure this was brought up-to-date on a continuous basis.

Actions could be seen from audit processes which indicated that the service had responding to issues to strive for continuous improvement. Systems from head office provided the manager with an overview of key performance indicators which allowed local resolution of issues.

Monitoring of resource issues assisted the manager to identify priorities for action. From this, a forward plan had been created to ensure the service complied with required professional development of staff.

The overall system of quality assurance had been improved since the previous inspection. The requirement about documentation made at a previous inspection had been met. The recommendation made at a previous inspection about quality assurance processes had been met.

Requirements

Number of requirements: 0

Recommendations

Number of recommendations: 0

Grade: 4 – good

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

Previous requirements

Requirement 1

The service provider must ensure that policies reflect Scottish legislation. Review and development must take place to quality assurance systems to ensure that they are effective.

This is in order to comply with SSI 2011/210 Regulation 4 Welfare of users

4. (1) A provider must-

(a) make proper provision for the health, welfare and safety of service users;

This requirement also takes account of the National Care Standards, Standard 4 Nursing Agencies – Management and Staffing Arrangements.

The service provides a consistent standard of care, delivered by nurses who are competent to work in the service area.

This requirement was made on 29 August 2015.

Action taken on previous requirement

We looked at a number of policies including recruitment, complaints, information booklets and standard operating practices. There had been an improvement in terminology with policy and legislation referred to that reflected current policy and legislation within Scotland.

This requirement has been met.

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 service provider should ensure that quality assurance systems develop and ensure that existing systems are used effectively.

National Care Standards, Standard 4, Nursing Agencies- Management and Staffing Arrangements.

This recommendation was made on 29 August 2015.

Action taken on previous recommendation

An improved approach to quality assurance was in place. A programme of multi-staff meetings, staff meetings and systems for communication and supervision were in place. Actions from audits had been taken and a forward plan for continuous improvement was in use.

This recommendation has been met.

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	
10 Mar 2017	Unannounced	Information	4 - Good
		Care and support	5 - Very good
		Environment	Not assessed
		Staffing	4 - Good
		Management and leadership	3 - Adequate
14 Jan 2015	Unannounced	Information	3 - Adequate
		Care and support	4 - Good
		Environment	Not assessed
		Staffing	3 - Adequate
		Management and leadership	3 - Adequate
14 Oct 2013	Announced (short notice)	Information	3 - Adequate
		Care and support	4 - Good
		Environment	Not assessed
		Staffing	3 - Adequate
		Management and leadership	3 - Adequate
21 Oct 2010	Announced	Information	Not assessed
		Care and support	4 - Good
		Environment	Not assessed
		Staffing	Not assessed
		Management and leadership	Not assessed
4 Dec 2009	Announced	Information	4 - Good
		Care and support	4 - Good
		Environment	Not assessed
		Staffing	4 - Good
		Management and leadership	4 - Good

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