

# Carewatch (Inverclyde) (Ayrshire) (Dunbartonshire) (Argyll & Bute) Housing Support Service

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Telephone: 01475 883 050

# Type of inspection:

Unannounced

## Completed on:

28 March 2018

## Service provided by:

Inverclyde & North Ayrshire Care Services Ltd

#### Service no:

CS2003053843

# Service provider number:

SP2004004438



#### About the service

Carewatch (Inverclyde), (Ayrshire), (Dunbartonshire) and (Argyll & Bute) offers a combined housing support and care at home service primarily to adults and older people living in their own homes.

The main company office is located in Greenock with a second office base in Irvine. The provider is Inverclyde & North Ayrshire Care Services Ltd.

The service operates across six local authorities: Inverclyde, Argyll & Bute, East Dunbartonshire, West Dunbartonshire, East Ayrshire and South Ayrshire.

A stated aim of the service is 'to ensure that you receive the highest quality of care and support at all times, and that you are happy with the service we provide to you.'

The service has been registered with the Care Inspectorate since 1 April 2011.

# What people told us

We visited three people at their homes and had the opportunity to meet with relatives at the same time. We spoke with two other relatives by phone.

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

Prior to the inspection, we sent care standards questionnaires to the provider to distribute to people using the service or to their relatives. We received 44 completed questionnaires from the 150 sent.

Feedback about the service varied. Some of the comments we received included:

- "No problems really, they come and do the job and smile and chat which really does help."
- "The staff talk to us in an optimistic and cheerful manner which we appreciate."
- "The staff are very friendly and helpful."
- "The carers carry out their duties very efficiently and always with a smile."
- "Too many different carers, causes confusion, and they don't all know all the needs required."
- "There is no communication regarding my needs."
- "Communication seems to be a problem!"

#### Self assessment

We did not request a self assessment for the year 2017 - 2018.

# From this inspection we graded this service as:

Quality of care and support3 - AdequateQuality of staffing3 - AdequateQuality of management and leadership3 - Adequate

# Quality of care and support

#### Findings from the inspection

Daily 'flash' meetings' ensured prompt coordination of immediate care for people discharged from hospital. This was a service strength because delayed discharges can result in a loss of people's independence and life skills.

Consistency in the core support team led to greater confidence that staff knew how to support people appropriately. Better planning of staffing schedules, in particular areas of the service, also improved continuity of care and support for some people. One person told us: "I am very happy with my two main carers". Another person said: "At times disorganised when not regular carers". The manager confirmed that not every person using the service was experiencing the same level of consistency. The service aim to introduce the scheduling improvements across the whole service and this should improve outcomes for people.

The service fully implemented a new care plan process after the last inspection. We recognise this was a big achievement and discussed ways to improve the quality of information included in some of the new care plans. To demonstrate how staff involve people, at an early stage in determining their support, the plan should record this information. We think that a more detailed care plan would better demonstrate that people receive the right care and support at the right time. Records should also reflect people's needs, choices and strengths to protect and promote independence, resilience and wellbeing.

Similarly, review documents lacked detail. While some valuable information was gathered, there was limited evidence that discussion was taking place with the person or their relative. Both care plans and reviews should be developed to promote an outcome-focus. This would provide clearer evidence of the way the service responds to people's changing needs. (See recommendation 1)

Risk assessments can ensure the safety and wellbeing of people who use the service and also staff who work at the service. We found risk assessments were not always completed when required. For example, when a care plan identified a number of risks we didn't always find an assessment to address these. Some risk assessments did not include enough information about potential risk to ensure good outcomes for the person or the staff. We talked to managers about the need for prompt review and risk assessment of two people who were provided with support.

Managers know that risk assessments must be completed for people who require them. Improving this aspect of the service will assist staff to protect people from harm, and ensure staff work safely, consistently and in line with best practice.

Despite staff training and progress with introducing risk assessments, an existing requirement was not fully met (See requirement 1).

#### Requirements

#### Number of requirements: 1

1. The provider must further improve their systems to assess, monitor and manage risk to people. Staff require refresher training to ensure risk assessments are kept up-to-date and are used to inform decisions about the care that is planned and delivered to every person who uses the service.

This in order to comply with: The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011. 4-(1) A provider must- (a) make proper provision for the health, welfare and safety of service users.

Timescale for meeting this requirement: 17 January 2019.

#### Recommendations

#### Number of recommendations: 1

1. Staff who are responsible for care and support planning should receive appropriate training about outcome-focused practice. This would enable the service to demonstrate the difference they make to the quality of people's experience and is in line with Health and Social Care Standards.

National Care Standards: Housing Support Services, Standard 3 - Management and Staffing Arrangements.

National Care Standards: Housing Support Services, Standard 4 - Housing Support Planning.

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

Grade: 3 - adequate

# Quality of staffing

#### Findings from the inspection

There was good attendance at team meetings. Staff were positive about the ways this contributed to them working confidently within their role. The service introduced a 'Carers Council' which provided another platform for staff to communicate with managers. This assisted the service to identify areas for development, with a view to improving services for people.

Training is key to supporting staff in improving outcomes for people. We found improvement in induction training and refresher training. The service had established good links with a local college to support staff with qualifications which will help to promote practice improvement.

We discussed the need to support managers and staff with refresher training in areas including care planning and recognising and assessing risk. It would be beneficial to focus on a person-centred approach rather than a generic assessment. We signposted the service to the SSSC resource the Continuous Learning Framework (CLF).

Regular one-to-one supervision and direct observation can support staff to reflect, learn and develop. Self-reflection can improve staff practice. The supervision process could be further developed by recording the opportunities provided for staff to reflect on their practice and identify training needs. Keeping minutes of one-to-one supervision can support staff to obtain and maintain registration on the appropriate part of the Scottish Social Services Council (SSSC) register. We signposted the service to the SSSC resource 'Step into Leadership'.

#### Requirements

Number of requirements: 0

#### Recommendations

Number of recommendations: 0

Grade: 3 - adequate

# Quality of management and leadership

#### Findings from the inspection

The management team demonstrated a commitment to providing a more responsive and efficient service. Areas for improvement were identified and agreed. We were encouraged by the team's candid approach and their determination to deliver a high quality service.

Advance notice about visits is important for people who use the service. One person said: "I find it difficult to plan ahead for meals, etc. as we have no prior idea of when the carers are coming." Another person told us: "I didn't know until recently I could get a schedule, sometimes I get one, sometimes I don't". Managers know that providing a rota is an important way to demonstrate a reliable and helpful service. A rota enables people to maintain their daily routines and retain their independence.

Quality assurance systems were in place to gather people's views on the service. Further development of this process would better demonstrate how suggestions, feedback and concerns were used to improve the service for people. Quality assurance systems could also demonstrate ways people were included in wider decisions about service provision.

Managers agreed that improvements would be made to the information notified to the Care Inspectorate about staff disciplinary actions. A checklist was devised during the inspection to ensure pertinent agencies were informed in a timely manner.

The manager confirmed that policies would be updated to reflect current Scottish legislation. Information in policies should be relevant and accurate.

#### Requirements

Number of requirements: 0

#### Recommendations

Number of recommendations: 0

**Grade:** 3 - adequate

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

# Previous requirements

#### Requirement 1

The provider must ensure risk assessments are reviewed regularly and staff follow instructions in risk assessments when working with service users. The provider must:

- Review and update all risk assessments for all service users
- Ensure all risk assessments have clear guidance for staff to follow
- Ensure all staff attend risk assessment training
- Ensure all staff are aware of their responsibility to follow instructions in risk assessments
- Ensure all risk assessments have a date identified for the next review.

This in order to comply with: The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011. 4-(1) A provider must- (a) make proper provision for the health, welfare and safety of service users.

Timescale: All areas to be completed by 30 June 2017.

#### This requirement was made on 18 April 2017.

#### Action taken on previous requirement

Team meeting and staff supervision were used to ensure staff were aware of their responsibility to follow guidance set out in risk assessments. It would be beneficial to include regular discussions about risk and risk assessment at team meetings and supervision until policy and procedure is embedded in practice.

Staff completed online training about risk assessment. Managers completed a more detailed training about moving and handling and other risk. Some refresher training would be beneficial.

Risk assessment training was included in induction training for new staff. This was about aspects of care including medication, infection control, Adult Support and Protection, moving and handling and health and safety.

New risk assessments were in place and reviews were underway. There was a delay in completing the implementation of new risk assessments for every person who uses the service. This was caused by supervisor and management vacancies.

The requirement is not fully met. A new requirement will be made to the service to promote the implementation and further development of their approach to risk. See information and requirement under quality of care and support.

#### Not met

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

#### Previous recommendations

#### Recommendation 1

Six monthly reviews of the service care plans should be taking place.

National Care Standards Housing Support Services: Standard 4 - Housing Support Planning.

National Care Standards Care at Home: Standard 3 - Your Personal Plan.

#### This recommendation was made on 18 April 2017.

#### Action taken on previous recommendation

The implementation of an electronic recording system highlighted when reviews were due. This enabled the management team to develop a cyclical reviewing process to ensure the timely completion of reviews of people's care plans. There was a number of reviews still outstanding. However, we saw sufficient improvement to meet this recommendation. We will monitor this at the next inspection to ensure this improvement is sustained.

#### Recommendation 2

There should be clear evidence staff are deemed competent to work on their own with service users.

National Care Standards Housing Support Services, Standard 3 - Management and Staffing Arrangements.

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

#### This recommendation was made on 18 April 2017.

#### Action taken on previous recommendation

The introduction of 'evidence of learning' areas within induction workbooks recorded staff's understanding of training undertaken. Unannounced spot checks of staff practice were being completed. Any concerns identified were noted and an action plan developed. We raised a concern with the manager regarding a gap of a month before one staff member was able to access the requisite training identified.

However, the measures implemented assisted the service to monitor staff's ongoing competency to ensure their fitness to practice. We felt that, on balance, the level of improvement was sufficient to meet this recommendation.

We have identified areas where additional staff training is needed and have made a further recommendation regarding this.

#### Recommendation 3

All staff should complete mandatory training within acceptable timescales.

National Care Standards Housing Support Services: Standard 3 - Management and Staffing Arrangements.

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

#### This recommendation was made on 18 April 2017.

#### Action taken on previous recommendation

We observed staff undertaking mandatory refresher training. This was completed within appropriate timescales. The manager informed us that where staff would previously have been taken off planned training, if this conflicted with their shift, this was no longer happening. This recommendation is met.

#### Recommendation 4

The provider should meet the supervision schedule identified in their supervision policy.

National Care Standards Housing Support Services: Standard 3 - Management and Staffing Arrangements.

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

This recommendation was made on 18 April 2017.

#### Action taken on previous recommendation

One-to-one staff supervision sessions were taking place every three months. Unannounced direct observation spot checks were also happening. Targets for supervisors are now in place to assist the service to adhere to its supervision schedules. This recommendation is 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	Туре	Gradings	
22 Mar 2017	Unannounced	Care and support Environment Staffing Management and leadership	4 - Good Not assessed 3 - Adequate 4 - Good
26 Aug 2016	Unannounced	Care and support Environment Staffing Management and leadership	3 - Adequate Not assessed 3 - Adequate 3 - Adequate
2 Sep 2015	Unannounced	Care and support Environment Staffing Management and leadership	3 - Adequate Not assessed 4 - Good 3 - Adequate
2 Jun 2014	Unannounced	Care and support Environment Staffing Management and leadership	5 - Very good Not assessed 5 - Very good 5 - Very good
30 Jan 2013	Announced (short notice)	Care and support Environment Staffing Management and leadership	4 - Good Not assessed 5 - Very good 4 - Good
22 Sep 2011	Unannounced	Care and support Environment Staffing Management and leadership	5 - Very good Not assessed Not assessed 4 - Good
19 Jan 2011	Announced	Care and support Environment Staffing Management and leadership	5 - Very good Not assessed Not assessed Not assessed
12 Jan 2010	Announced	Care and support Environment Staffing	5 - Very good Not assessed Not assessed

Date	Туре	Gradings	
		Management and leadership	5 - Very good
26 Jan 2009	Announced	Care and support Environment Staffing Management and leadership	4 - Good Not assessed 4 - Good 4 - Good

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