

Keane Premier Support Services Housing Support Service

2 Turnberry Crescent Chapelhall Airdire ML6 8HX

Telephone: 0141 647 2022

Type of inspection:

Unannounced

Completed on:

12 October 2018

Service provided by:

Keane Premier Support Services Ltd

Service no:

CS2013319859

Service provider number:

SP2013012187



Inspection report

About the service

Keane Premier Support Service was registered with the Care Inspectorate in August 2015. It is a combined housing support and care at home service and is provided to adults with physical disabilities and/or learning disabilities and/or mental health problems living in their own home.

What people told us

We received a total of 17 questionnaires as part of our inspection of the service. These were completed by people who use the service and/or their relatives. On reviewing these questionnaires we found that 94% of responders completing the guestionnaire were overall happy with the quality of the service provided.

When contacting people as part of the inspection, in some cases, comment was made regarding the relatively high number of staff people felt supported them. We have addressed this concern within the report. We had no significant concerns about the service.

People who chose to leave comments included:

"I feel staff would benefit me more if I had more time on morning visit, feel isn't enough time to [part of service], otherwise happy with the staff"

"Delighted with the service being provided."

"I personally am happy that the carers on a daily basis not only look after and perform my personal care and nursing needs but do so never forgetting that me as a person is at the heart of it all."

"Having the same familiar faces who are familiar with my personal care is of the upmost importance to me, due to my complex needs."

"Keane offer very good service to my [relative]. Good friendly staff and know their job well. Very happy with the service provided."

"Recently, my [relative] passed away. She was treated with respect by all of the carers and they attended to her needs with great dignity."

Self assessment

The Care Inspectorate did not request the service submit a self-assessment as part of this year's inspection process.

From this inspection we graded this service as:

Quality of care and support 5 - Very Good

Quality of staffing not assessed

Quality of management and leadership 4 - Good

What the service does well

People's care and support plans should be right for them because they set out how people's needs will be met, as well as their wishes and choices. We found there to be good quality care plans in place with single page summaries in front of each person's file. Plans indicated what people's health conditions were and provided guidance as to what practical support people needed for each visit. We also saw evidence of staff working with people for longer periods of time to engage in community activity.

People we spoke to were very complimentary about the very good quality of care they received from service staff. Where people raised concerns specific to them, with their permission, we discussed these with the management team as part of the inspection and asked the service to respond to each person individually. We had no significant concerns about the very good quality of care provided by the service.

Any treatments or interventions that people experience should be safe and effective. We could see people were supported to take their medication as necessary. We were satisfied people got the medication they needed. However, we did find some errors in recording. We referred the service to recent guidance which can be found at https://hub.careinspectorate.com/. The guidance we specified provides a template against which a medication policy can be reviewed and updated. Advice within this guidance could alleviate the issues we identified with record keeping.

People should be supported by an organisation and service that are well led and managed. Staff informed us during inspection that the management team were approachable, supportive and accessible should any advice or assistance be needed. We found the staff teams were cohesive and supported each other to ensure people got their care and support in line with agreed times. People we spoke to told us staff were generally on time or reasonably punctual given there could be issues with traffic or previous visits.

We found the service had systems in place to ensure staff practice was monitored and staff informed us they received regular supervision with access to advice and resources when needed. However, we found that management oversight and associated records could be better. The management team had plans to improve this.

The management team were very enthusiastic and had a clear desire to improve the service and were happy to take advice and carry out actions immediately to improve the standard of care and support.

What the service could do better

We found that the service regularly reviewed records completed by staff that had been returned to the main office, often taking actions to address any issues identified. This included an audit of medication support entries, daily log entries and areas completed in care plans. We asked the service further improve this process by formally recording the detail of all audits completed and any actions taken to completion. This ensures this scrutiny is recorded and followed up properly. This also allows for trends and practice issues to be identified service-wide and ensure any corrective actions can be reviewed and provide clear oversight on service performance.

We found for some of the people being supported service reviews and associated actions were recorded in a review document. However, for the majority of people these review meetings led to plans being updated but the meeting itself was not recorded. It is important people are involved in their service reviews. To be able to clearly evidence people's participation and agreement with any changes to their supports the service should ensure it formally records all review meetings. It should also evidence that people have agreed the changes to their care plans through relevant sign off either by the person supported or their representative where applicable.

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It was noted the service had not always completed the care plan reviews in line with the six month frequency as stipulated in legislation. We accepted that the service had regular contact with people to ensure plans were updated, and plans we saw appeared to be up to date. However, we advised the service to ensure going forward these are done strictly as needs change or on a six-monthly basis for all people being supported.

Some people we spoke to informed us that they had a lot of different staff supporting them and felt a smaller team of staff would be preferable. This, however, did not impact for most on the very good quality of care people were receiving. We discussed this with the management team and asked they schedule staff to work in smaller teams with the people supported and improve the level of consistency in this regard.

Requirements

Number of requirements: 0

Recommendations

Number of recommendations: 0

Complaints

There have been no complaints upheld since the last inspection. Details of any older upheld complaints are published at www.careinspectorate.com.

Inspection and grading history

Date	Туре	Gradings	
10 Oct 2017	Unannounced	Care and support Environment Staffing Management and leadership	5 - Very good Not assessed 5 - Very good Not assessed
18 Aug 2016	Unannounced	Care and support Environment Staffing Management and leadership	4 - Good Not assessed Not assessed 4 - Good
2 Sep 2015	Unannounced	Care and support Environment	4 - Good Not assessed

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Date	Туре	Gradings	
		Staffing Management and leadership	5 - Very good 4 - Good

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