

ACasa Care Ltd Support Service

Linburn House Station Road Auchtermuchty Cupar KY14 7DP

Telephone: 01337 828887

Type of inspection:

Unannounced

Completed on:

20 February 2019

Service provided by:

ACasa Care Ltd

Service no:

CS2010280174

Service provider number:

SP2010011379



Inspection report

About the service

This service has been registered since March 2011.

ACasa Care Ltd is registered by the Care Inspectorate to provide a support service - care at home. The service is provided by ACasa Care Ltd, a private company. The service operates throughout Fife, Dundee and Clackmannanshire

What people told us

Prior to our visits we asked the registered manager to distribute questionnaires to people using the service and their families. Seven were returned to us. We also met with four people during our inspection visits.

People were very happy with the support and care they received from ACasa. They spoke highly of the carers who worked with them. People clearly appreciated having visits from staff they knew well. We heard that people felt respected, listened to and were cared for with great kindness. Comments included;

"The staff treat me with respect, are courteous and treat me as if I was part of their family"

"I am very satisfied with the service provided"

"The girls are so helpful. Nothing is too much trouble for them"

"My mum looks forward to her carers coming in to help her. They are always cheery"

"The girls are always nice and cheerful. They take care of me and my needs. I wouldn't manage without them".

Self assessment

We did not ask the provider to complete a self-assessment prior to this visit.

From this inspection we graded this service as:

Quality of care and support5 - Very GoodQuality of staffing5 - Very GoodQuality of management and leadershipnot assessed

What the service does well

People told us they were very happy with the care and support they received from ACasa. They felt respected, listened to and treated with kindness. The organisation worked hard to make sure people were supported by the same carers. When this was not possible, through sickness or holidays, people were told about the change. People who were supported by ACasa told us how much they valued having carers who knew them well. We saw how this way of working had enabled staff to develop meaningful, warm and compassionate relationships. The efforts of all levels of staff should be commended in developing this ethos.

During our visits we looked at the personal files for a number of supported people. We saw that peoples' needs were reviewed regularly. This included unplanned reviews which happened when a change was identified. The support each person needed was recorded in a clear, asset based and person centred way. This meant that important information about peoples' preferences and abilities was readily available for all staff. We saw that information was checked regularly by the care co-ordinators. This meant that people were receiving the right support and any changes were identified and addressed guickly.

The service had established ways that people could provide feedback about their support. This included reviews, questionnaires and both informal and formal complaints. We saw that, where issues were raised, the management team responded positively. There was an ethos of transparency and learning from events.

People can be reassured that the service works hard to keep them safe. This was reflected in robust finance, medication, recruitment and incident and accident procedures which we examined during our visit. Staff were confident to recognise and raise any concerns they might have. When concerns were raised, we saw that the management team took the right action to keep people safe.

We were struck by the motivation and commitment to providing high quality services demonstrated by all staff. We heard how staff felt valued, listened to and provided with first class opportunities to learn and develop. It was clear that the management team valued the ACasa workforce and worked hard to lead by example and create supportive working conditions. We were pleased to see that questionnaires for staff had been introduced this year. We look forward to seeing how the results have been used to influence service development at our next inspection.

What the service could do better

The provider should have a more transparent way of showing how they assess risk. This would be achieved by having a clear assessment which identifies potential safety concerns for people using the service and staff. This would support staff in developing appropriate risk management plans which details the safety arrangements in place. A recommendation has been made (See recommendation 1).

Although we were fully reassured that the provider would act on any protection concerns, we have asked that all staff receive training in adult support and protection. This should be included in the mandatory training for all staff and be repeated at regular intervals. This makes sure that everyone is fully aware of their role in protecting people. The manager was fully welcoming of this suggestion.

We suggested the service takes small steps towards introducing an outcomes approach to how they plan, deliver and review peoples' support. This way of working measures the impact the support is having in meeting peoples' goals. We sign-posted the manager to learning resources which might be helpful in supporting this change.

The service had good ways of monitoring staff training and support opportunities such as supervision. However, we noted that some staff were not receiving supervision as regularly as others and some training was overdue. We suggested the management team use these monitoring resources more proactively at meetings. We thought this, along with clearer minutes which identify action points, would help drive improvements.

We thought the management team could use the feedback they received from people using the service, families and staff in a better way. We discussed this during our feedback and suggested that this should be the foundation of the service development plan. We provided further guidance in relation to service development plans following our inspection.

Inspection report

Requirements

Number of requirements: 0

Recommendations

Number of recommendations: 1

1. The provider should develop a clear and transparent risk assessment and management process to make sure safety concerns are fully addressed.

This is to ensure care and support is consistent with the Health and Social Care Standards which state that; 'My care and support is provided in a planned and safe way, including if there is an emergency or unexpected event' (HSCS 4.14) and; 'My future care and support needs are anticipated as part of my assessment' (HSCS 1.14).

Complaints

Please see Care Inspectorate website (www.careinspectorate.com) for details of complaints about the service which have been upheld.

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

Previous requirements

Requirement 1

In order to ensure that people are effectively consulted, the provider must put in place an effective 'Cancelling your service' procedure by 1 August 2018.

This is to ensure care and support is consistent with the Health and Social Care Standards which state that; 'I receive proper notice and I am involved in finding an alternative if the service I use plans to close or can no longer meet my needs and wishes' (HSCS 4.12) and; 'I have enough time and support to plan any move to a new service' (HSCS 4.13) and; in order to comply with Regulation 3 (Principles) of the Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011.

This requirement was made on 15 March 2018.

Action taken on previous requirement

A relevant procedure was now in place. This was included within the information provided to people using the service. This requirement had been fully 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 registered manager compile, and implement, a policy on the use of restraint, in accordance with Mental Welfare Commission guidance (Rights, Risks and Limits to Freedom, MWC, March 2013). To ensure staff understanding, it may be worth delivering training on forms of restraint and its implications in terms of potential abuse, but also how it is implemented for health, safety and wellbeing purposes.

National Care Standards - Care at Home - Standard 4 - Management and Staffing

This recommendation was made on 8 March 2018.

Action taken on previous recommendation

A restraint policy was now in place which reflected both the relevant legislation and organisational practice. The use of restraint was a discussion point at induction training for all staff. This recommendation has been met.

Inspection and grading history

Date	Туре	Gradings	
9 Mar 2018	Unannounced	Care and support Environment Staffing Management and leadership	5 - Very good Not assessed Not assessed 5 - Very good
8 Mar 2017	Unannounced	Care and support Environment Staffing Management and leadership	5 - Very good Not assessed 5 - Very good Not assessed
4 Mar 2016	Unannounced	Care and support	4 - Good

Inspection report

Date	Туре	Gradings	
		Environment Staffing Management and leadership	Not assessed 5 - Very good 4 - Good
19 Dec 2014	Unannounced	Care and support Environment Staffing Management and leadership	4 - Good Not assessed 5 - Very good 4 - Good
23 Dec 2013	Announced (short notice)	Care and support Environment Staffing Management and leadership	4 - Good Not assessed 5 - Very good 4 - Good
4 Sep 2012	Announced (short notice)	Care and support Environment Staffing Management and leadership	5 - Very good Not assessed 5 - Very good 5 - Very good
2 Nov 2011	Announced (short notice)	Care and support Environment Staffing Management and leadership	5 - Very good Not assessed 4 - Good 4 - Good

To find out more

This inspection report is published by the Care Inspectorate. You can download this report and others from our website.

Care services in Scotland cannot operate unless they are registered with the Care Inspectorate. We inspect, award grades and help services to improve. We also investigate complaints about care services and can take action when things aren't good enough.

Please get in touch with us if you would like more information or have any concerns about a care service.

You can also read more about our work online at www.careinspectorate.com

Contact us

Care Inspectorate Compass House 11 Riverside Drive Dundee DD1 4NY

enquiries@careinspectorate.com

0345 600 9527

Find us on Facebook

Twitter: @careinspect

Other languages and formats

This report is available in other languages and formats on request.

Tha am foillseachadh seo ri fhaighinn ann an cruthannan is cànain eile ma nithear iarrtas.

অনুরোধসাপেক্ষে এই প্রকাশনাটি অন্য ফরম্যাট এবং অন্যান্য ভাষায় পাওয়া যায়।

ਬੇਨਤੀ 'ਤੇ ਇਹ ਪ੍ਰਕਾਸ਼ਨ ਹੋਰ ਰੂਪਾਂ ਅਤੇ ਹੋਰਨਾਂ ਭਾਸ਼ਾਵਾਂ ਵਿਚ ਉਪਲਬਧ ਹੈ।

本出版品有其他格式和其他語言備索。

Na życzenie niniejsza publikacja dostępna jest także w innych formatach oraz językach.