

Mears Nurseplus North Nurse Agency

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Inverness
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Telephone: 01463 245989

Type of inspection:

Announced (short notice)

Completed on:

5 February 2019

Service provided by:

Mears Care (Scotland) Limited

Service provider number:

SP2009010680

Service no:

CS2014334280

About the service

This service registered with the Care Inspectorate on 8 April 2015.

The provider of the service is Mears Care (Scotland) Ltd. Registration to operate the service was granted in April 2015. Mears Nurseplus North is registered to supply registered nurses to a maximum of 20 service users. The service operates from two office bases, one in Aberdeen and one in Inverness. The areas covered are Aberdeen, Inverness and Highland. At the time of the inspection two nurses were working in the Inverness area, providing care to people who were receiving care from other services and to two service users in their own homes.

This report should be read in conjunction with the Care at Home inspection report which was completed at the same time.

What people told us

We spoke with two close relatives who were both complimentary about the service they received.

Self assessment

A self-assessment was not requested by the Care Inspectorate before the inspection.

From this inspection we graded this service as:

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

Quality of information

Findings from the inspection

The nurse agency supplied potential users of the service with a pack which contained useful and relevant information about the service that could be provided. There were details of the complex health conditions about which their staff were trained. The pack described how a care package would be developed and implemented. Also how it would be evaluated and effectiveness ensured. There were details of the service's clinical governance. There was an emphasis on partnership working through the participation policy. There was a booklet which was for people who used the service who lived in Scotland.

Most individual's care was funded through NHS Highland who provided details of the agreed care package. These details were included in the service user's personal support plan. If someone had employed the service privately they would receive a copy of the full contract from Mears. The previous recommendation about the need to provide information based on Scottish legislation had been met. We discussed with the manager that the information should refer to the Health and Social Care standards.

The company had a website which contained relevant information and links to useful publications.

Requirements

Number of requirements: 0

Recommendations

Number of recommendations: 0

Grade: 4 - good

Quality of care and support

Findings from the inspection

There were important strengths with some areas for improvement. The strengths had a significant positive impact on people's experiences and outcomes. Improvements are required to maximise wellbeing and ensure that people consistently have experiences and outcomes which are as positive as possible

This small nurse agency provided specialist care to a few young people or children who had complex health issues and enabled them to remain in the community. Those spoken with were highly appreciative of the service. 'Without this service my daughter would have to be in hospital.'

Personal care plans provided very good detail about the support the service users needed and about health equipment in use. People who used the service had a range of health conditions, and needed help for example with feeding tubes, perhaps with a tracheostomy, stoma care, ventilation and respiratory care. The nurses had received further specific training to be able to offer this support, which was updated regularly. Those that received a service all had a close relative who would be trained to provide all care necessary. When the relative was confident in the care staff, depending on the situation they might be able to leave the house for a short time while the care staff were there.

We found that although there was good communication within the service and with the families receiving a service there were few records about the reviews that were taking place. Due to the complex health conditions there were usually regular multi-disciplinary meetings. Management need to ensure that records are kept of reviews to show any changes to the care plans. Personal support plans should contain information about the person that helps staff to get to know the person as an individual. We saw that management had started to address this in one care plan. **(See recommendation 1)**

Generally care plans contained risk assessments to indicate to staff any action they needed to take to reduce significant risk. These were updated.

Requirements

Number of requirements: 0

Recommendations

Number of recommendations: 1

1. It is recommended that care plans be improved by:

a) including person centred details about the individual for example, about their choices and preferences, their history and important people in their lives and about how they communicate.

b) reviewing the care plan at six monthly intervals or sooner if requested or there has been significant change. If appropriate the person receiving the service and/or close relative(s) should be included in the review. Minutes should be kept showing who attended, what was discussed, actions identified and who was responsible to carry these out.

This is to ensure that care and support is consistent with the Health and Social Care Standards: 1.12 which states that; 'I am fully involved in assessing my emotional, psychological, social and physical needs at an early stage, regularly and when my needs change,'

1.15 which states that; 'My personal plan (sometimes referred to as a care plan) is right for me because it sets out how my needs will be met, as well as my wishes and choices' and

2.9 which states that; 'I receive and understand information and advice in a format or language that is right for me.'

Grade: 4 - good

Quality of staffing

Findings from the inspection

There were some important strengths.

We found that recruitment procedures were robust and followed best practice. This would help to ensure only suitable persons were employed.

Training was now monitored through an electronic tracker. The training team kept this up to date so that management could easily see each staff's training needs. All staff spoken with, indicated that their training was up to date. Staff thought the quality of the training was very good. This helped staff to feel confident in very demanding roles.

Staff felt well supported by co-ordinator and management. There were difficulties providing opportunities for staff to meet to discuss their work due to the limited size of the group and the wide geographical distribution of the staff. There were occasional meetings whilst there were training sessions.

Nurses had effective working relationships with community and hospital health personnel. The manager was available to the nurses for advice and consultation and conducted the annual appraisal. The nurses provided supervision to care staff and observed their practice.

The nurses were suitably registered with the Nursing and Midwifery Council and their registration was checked to ensure that it was valid.

The nurse spoken with demonstrated her commitment to providing a quality service and to supporting the care staff she supervised.

Requirements

Number of requirements: 0

Recommendations

Number of recommendations: 0

Grade: 4 - good

Quality of management and leadership

Findings from the inspection

There were a number of important strengths which taken together clearly outweigh areas for improvement.

The manager although not based in Inverness was easily contactable. She visited and worked from Inverness at least one day each week. Much was delegated to the local experienced co-ordinator who could deal with much of the day to day issues. The registered manager had other responsibilities within the company as head of care within Scotland. Therefore she usually spent a considerable part of the week working from the head office in Alloa and other offices.

Management sought the views of the people who used the service through survey, phone calls and reviews. These views helped to shape the progress of the service. The majority of responses were very positive. A relative commented through a survey questionnaire: 'I like having the team from Mears, most of them are very professional.'

People who used the service for instance a parent of a child or young person with complex needs would be involved in the recruitment of care staff for their relative. This helped to ensure that the care staff would be suitable for that particular person.

The manager was involved in the assessment of individuals who used the service and completed care plans.

Local management conducted some audits including of medicine records and of the communication log that care staff kept at each service user's house on a daily basis. The service auditor conducted an internal audit annually. The last one suggested that medication record audits should be done soon after the record was completed. This would result in any issues being addressed quickly. The manager had put this into action. Management need to evidence that all parts of the service were being audited as to their performance. The service quality assurance processes should lead to the development of an ongoing improvement plan that indicates the future direction of the service. **(See recommendation 1)**

Overall it was evident that there were good outcomes for the people who used the service.

Requirements

Number of requirements: 0

Recommendations

Number of recommendations: 1

1. It is recommended that management ensure that the service quality assurance processes cover all aspects of the service. Management should make sure that all parts of the service were performing to a good level.

Management should use information from quality assurance system to develop an improvement plan.

This is to ensure that care and support is consistent with the Health and Social Care Standards 4.19 which states that; 'I benefit from a culture of continuous improvement, with the organisation having robust and transparent quality assurance processes.'

4.23 which states that; 'I use a service and organisation that is well led and managed.'

Grade: 4 - good

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

Recommendation 1

It is recommended that the contents of the service information pack be reviewed so that it contains all indicated in the care standard.

National Care Standards, Nurse Agency: Standard 1 - Information about the nurse agency.

This recommendation was made on 10 January 2018.

Action taken on previous recommendation

The pack has been reviewed and now contains information specifically for Scotland. This has been met.

Recommendation 2

It is recommended that care plans be improved by:

- a) including person centred details about the individual for example about their choices and preferences, their history and important people in their lives and about communication.
- b) reviewing the care plan at six monthly intervals or sooner if requested or there has been significant change. If appropriate the person receiving the service and close relative(s) should be included in the review. Minutes should be kept showing who attended, what was discussed, actions identified and who was responsible to carry out.

National Care Standards, Nurse Agency: Standard 3 – Service arrangements.

This recommendation was made on 10 January 2018.

Action taken on previous recommendation

There was very good detail about interventions necessary to support health issues of individual service users. In one personal plan there was a little detail about the individual personality of the service user though in general there was little to help identify the young person or child.

There was good communication between the office and the care staff though little evidence of at least six monthly reviews. There would be multi-disciplinary meetings though the service did not always have a copy of the minutes.

This recommendation to be continued. See Quality theme 1.

This is to ensure that care and support is consistent with the Health and Social Care Standard 1.12 – I am fully involved in assessing my emotional, psychological, social and physical needs at an early stage, regularly and when my needs change.

1.15- My personal plan (sometimes referred to as a care plan) is right for me because it sets out how my needs are met, as well as my wishes and choices.

1.23 – My needs, as agreed in my personal plan, are fully met, and my wishes and choices are respected.

Recommendation 3

Management should ensure that for each person who receives a service, a risk assessment be completed that includes significant risks to the person or care staff which care staff should know about. The risk assessment should evaluate the risk and identify ways of reducing the risk. These risk assessments should be reviewed regularly.

National Care Standards, Nurse Agency: Standard 4 – Management and staffing arrangements.

This recommendation was made on 10 January 2018.

Action taken on previous recommendation

Personal plans looked at contained risk assessments that had been reviewed reasonably recently. Management should ensure that this good practice continues.

This recommendation has been met.

Recommendation 4

It is recommended that up to date records be kept of each nurse's training that indicates what they have achieved and what procedures they are deemed competent to perform. Given the specialist nature of the care provided it is important only competent care staff provide the necessary care.

National Care Standards, Nurse Agency: Standard 4 - Management and staffing arrangements.

This recommendation was made on 10 January 2018.

Action taken on previous recommendation

Service have installed a new electronic system which is kept up to date about all training. Staff spoken with confirmed that their training was up to date.

This recommendation has been met.

Recommendation 5

It is recommended that all nursing staff receive appropriate supervision and monitoring to ensure they are competent and their practice is of a good standard. Management should encourage staff to develop their skills and knowledge.

National Care Standards, Nurse Agency: Standard 4 - Management and staffing arrangements.

This recommendation was made on 10 January 2018.

Action taken on previous recommendation

Management ensured that training was up to date and was available for consultation and advice. Annual appraisals were completed during the inspection.

Recommendation 6

Management should improve records kept about complaints.

National Care Standards, Nurse Agency: Standard 5 - Concerns, comments and complaints.

This recommendation was made on 10 January 2018.

Action taken on previous recommendation

There had been no complaints.

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	
20 Nov 2017	Unannounced	Information	4 - Good
		Care and support	4 - Good
		Environment	Not assessed
		Staffing	4 - Good
		Management and leadership	3 - Adequate
10 May 2016	Unannounced	Information	4 - Good
		Care and support	4 - Good
		Environment	Not assessed
		Staffing	4 - Good
		Management and leadership	3 - Adequate

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