Inspection report

Carr-Gomm Scotland - East & Midlothian - Care at Home Support Service
8 The Loan
Loanhead    EH20 9AF

Inspected by:                               Saartje Drijver
(Care Commission Officer)

Type of inspection:

Inspection completed on:    6 February 2009
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**Introduction**

Carr-Gomm East and Midlothian is registered as a combined Housing Support and Care at Home service to provide a service to adults with a wide range of needs living in the community across East and Midlothian. Of the four teams within the service, two provide a visiting support service to individuals in their own homes, and the other two teams provide a support service to individuals living in shared accommodation. Each team has a staff base where client documentation, policies and procedures are kept and where team meetings, supervision and appraisals are held.

At the time of the inspection 158 adults were receiving a service from Carr-Gomm East and Midlothian.

Carr-Gomm Scotland is a national provider which has a number of similar services across Scotland. The organisation's headquarters are in Edinburgh.

Carr-Gomm Scotland states that it 'is committed to a society, which in its values, public policies and individual actions, respects, encourages and supports everyone to take control of their own life'.

The service has been registered with the Care Commission since October 2004.

Based on the findings of this inspection the service has been awarded the following grades:
- Quality of Care and Support - 5 - Very Good
- Quality of Staffing - 5 - Very Good
- Quality of Management and Leadership - 5 - Very Good

This inspection report and grades represent the Care Commission’s assessment of the quality of the areas of performance which were examined during this inspection.

Grades for this care service may change following other regulatory activity. Please refer to the care services register on the Care Commission’s website (www.carecommission.com) for the most up-to-date grades for this service.

**Basis of Report**

**Before the Inspection**

The inspection was announced and took place between 3 and 6 February 2009.

**The Annual Return**

The service submitted a completed Annual Return as requested by the Care Commission.

**The Self-Assessment Form**

The service submitted a self-assessment form as requested by the Care Commission.

**Views of service users**

Prior to the inspection the Care Commission had received contact details of all the adults currently using the service. The Care Commission sent questionnaires to 65 service users (41%). The questionnaires could either be completed by somebody receiving the service or by their friend or family member. Of these 26 returned questionnaires were completed by the person who received the service. The Care Commission Officers also met with two service...
users during the course of the inspection.

Regulation Support Assessment
The inspection plan for this service was decided after a Regulation Support Assessment (RSA) was carried out to determine the intensity of inspection necessary. The RSA is an assessment undertaken by the Care Commission Officer which considers complaints activity, changes in the provision of the service, nature of notifications made to the Care Commission by the service (such as absence of a manager) and action taken upon requirements. The Care Commission Officer will also have considered how the service responded to situations and issues as part of the RSA.

This assessment resulted in this service receiving a low RSA score and so a low intensity inspection was required. The inspection was based on the relevant Inspection Focus Areas and associated National Care Standards, recommendations and requirements from previous inspections and complaints or other regulatory activity.

During the inspection process

Staff at inspection
The inspection was conducted by Saartje Drijver and Sandra Hall, Care Commission Officers, who will be referred to as 'the Officers' throughout the report.

Evidence

During the inspection the Officers met with; the operations manager, two service managers and eight support workers. The Officers had the opportunity to attend staff meetings of two of the staff teams. In addition the Officers took into account the responses given in 15 staff questionnaires that were returned to the Care Commission.

The Officers viewed a range of documents. These included policies in relation to: Involvement Strategy, Professional Responsibilities and Public Interest Disclosure Act (whistle blowing), Suggestions and Compliments, Complaints, Medication, Restraint, Adult Protection and Child Protection.

The Officers viewed the support plans and other documentation in relation to ten adults who were receiving a service.

In May 2008 one of the Officers attended a service user Focus group which had been organised by the service and a Forum to which service users of all the organisation's Edinburgh based services were invited.

One of the Officers also attended a Carr-Gomm Scotland board meeting in March 2009.

The inspection also took account of the Regulation of Care (Requirements as to Care Services)(Scotland) Regulations 2002 (SSI 2002/114)

Details of the inspection focus and associated Quality Themes to be used in inspecting each type of care service in 2008/09 and supporting inspection guidance, can be found at: http://www.carecommission.com/

The focus area for a combined Housing Support and Care at Home service for this inspection year is Notifications.
Action taken on requirements since last Inspection
No requirements were made following the last inspection.

Comments on Self Assessment
The self assessment gave a very thorough account of the service's strengths and areas for improvement in relation to the Quality Themes and Statements. It included a number of examples to give weight to the evidence provided.

View of Service Users
One of the Officers had the opportunity to spend some time with two adults who received a service. They spoke positively about the support that they received and gave examples of how they had been involved in contributing to the development of the service, for instance in taking part in discussions at focus groups and by choosing new furniture and the decor for the communal areas within their home.

In total 26 questionnaires were completed by adults who were receiving a service. These indicated a high level of satisfaction with the service. However, some service users stated that they did not have a support plan or that they were not aware of the organisation's complaints procedure.

Comments from service users included:

'I feel I should be allowed to do what I want more often.'

'My support is very good and they understand me, they take me out for lunch.'

'I am happy with Carr-Gomm service. I want to continue my support with Carr-Gomm.'

'Excellent service, no complaint.'

View of Carers
One of the Officers had the opportunity to speak with two family members, both of whom spoke positively about the support their relative received. A further seven family members completed a questionnaire giving their views on the support that their relative received.

Family members confirmed that they were satisfied or very satisfied with the service and that they felt comfortable about making a complaint or raising a concern if they needed to.

One family member commented that:

'Carr-Gomm's input has enhanced my daughter's life, giving her care, companionship and confidence....Their input has enabled me, as an aged parent to be able to continue to look after her and enabled her to remain at home with me....They have also given me encouragement and good advice re, her future care.'
Quality Theme 1: Quality of Care and Support

Overall CCO Theme Grading: 5 - Very Good

Statement 1: We ensure that service users and carers participate in assessing and improving the quality of the care and support provided by the service.

Service Strengths

The organisation had a service user involvement strategy which outlined it's commitment to working in partnership service users and the potential for service users to be involved in the organisation. More recently the organisation had employed two service user involvement officers to take the strategy forward throughout the organisation's services. Their plan was to roll out a half day work shop with all staff to discuss how they could be involved in the strategy and to produce an information leaflet for adults using the service and their relatives.

Each adult receiving a service had recently completed a personal development plan. This gave an indication of how they could be involved in their individual support or other aspects of the service they received according to their abilities and interests.

Service users across the organisation had been involved in the recruitment of staff. Some adults across the organisation took part in the delivery of the induction programme for new staff and training events on mental health awareness. Staff stated that they found this helpful.

The service had organised a number of focus groups and forums during the last year which were facilitated by independent facilitators. These had given service users and family members the opportunity to discuss their views on the service. The information from both focus groups and the forum were collated and an action plan was presented to all service users and their carers in the form of a newsletter. At one of the focus groups service users had, for instance, requested that their mail be delivered to them in a more confidential manner; this was being acted on.

With the support of staff, a group of individuals had initiated a drop in centre for those in receipt of the service. The drop in centre was open one day per week and service users were instrumental in continuing to develop it to meet the needs and wishes of those who attended.

The organisation had a Compliments and Suggestions policy as well as a Complaints policy. Although some service users and their relatives stated that they were not aware of the organisation's complaints policy, they confirmed that they felt confident that any concerns that they might raise would be dealt with appropriately. The organisation had also introduced Suggestion and Compliments free postcards. Support workers distributed these to service users to encourage feedback.

The organisation was managed by a management board which included service users, individuals who had received a service from the organisation in the past and family members of service users. During the board meeting that one of the Officers attended, members were observed to be knowledgeable about the developments within the organisation. There was open discussion about the role of the Care Commission and members stated that they felt listened to.
All service users were involved in formulating their support plans and in reviewing them. There was evidence that family members and other health professionals were also involved in reviews where appropriate.

The organisation had a strong ethos and value base in relation to person centred planning and involvement. The Officers were advised that this was introduced to staff during their induction training.

**Areas for Development**

The organisation showed a strong commitment to continually creating new opportunities for service users and their relatives to participate in assessing and improving the quality of care and support provided by the service.

**CCO Grading**

6 - Excellent

**Number of Requirements**

0

**Number of Recommendations**

0

**Statement 3: We ensure that service user’s health and wellbeing needs are met.**

**Service Strengths**

The service followed a person centred approach to their work and this was strongly evident from discussions with staff, attending staff team meetings and from comments that service users made.

Staff made good use of team meetings to discuss the wellbeing of service users and issues in relation to risk, joint working, reflective practice and the sharing of ideas. This was done in a supportive manner and staff were highly motivated and engaged in the discussions. One situation that was discussed showed staff awareness of the need for dignity and respect in relation to the provision of personal care.

From speaking with staff individually and by attending staff team meetings it was evident to the Officers that they were aware of issues of risk management and the protection of adults. They were proactive in joint working with other professionals to ensure that service users' needs were being met.

Support plans were detailed and covered various aspects of service users’ lives. They also included information on all professionals involved in the service user’s care and support. The Officers were informed that all service users who received support with medication had associated guidelines and risk assessments in place. Support plans were reviewed six monthly to ensure that they reflected current support needs.

Staff advised the Officers of the importance and use of supervision to reflect on their
practice. They stated that they also found the informal support which was given and received on a daily basis amongst their peers and from senior staff of great benefit. All staff felt that the senior support workers and manager were approachable and supportive.

Carr-Gomm Scotland had an extensive calendar of training events which ran throughout the year. This included Food Hygiene, First Aid, Manual Handling and the Protection of Vulnerable Adults, which were all relevant to the health and wellbeing of the people receiving a service. Staff were expected to attend five events per year and they informed the Officers that their training needs and choice of training events were discussed at supervision and during their annual appraisal. In addition to this the organisation had developed a personal development portfolio which consisted of a workbook which staff were expected to work through.

The organisation had a number of policies and procedures in place to safe guard the wellbeing of adults using the service such as Child Protection, Whistle Blowing, Adult Protection and Restraint.

Areas for Development

On inspection of the service’s policy relating to the protection of vulnerable adults the Officers noted that the document did not give staff clear guidance on the action to be taken should they have concerns about a service user (see recommendation 1).

When examining a selection of service user files the Officers noted that it was difficult to establish when support plans and risk assessments had been produced and by whom (see recommendation 2).

Following a recommendation that was made during the last inspection the Officers were informed that support plans now contained details of the level of support that individuals received and when this was provided. This will be monitored at the next inspection.

CCO Grading

5 - Very Good

Number of Requirements

0

Number of Recommendations

2
Quality Theme 2: Quality of Environment

Overall CCO Theme Grading:
Quality Theme 3: Quality of Staffing

Overall CCO Theme Grading: 5 - Very Good

Statement 1: We ensure that service users and carers participate in assessing and improving the quality of staffing in the service.

Service Strengths

The service and the organisation had developed a number of ways in which service users and their families could participate in assessing and improving the quality of the service as outlined in Quality Statement 1.1.

In relation to the recruitment of staff, services users from across the organisation were involved in the interviewing process of new staff, the induction process and other training events.

The Officers were informed that when discussing the gender balance in one of the staff teams with the service user group, the service users suggested that they would benefit from having more male staff. The service was able to accommodate this request.

Areas for Development

The Officers were informed that there was a plan to run a pilot project to involve service users in staff appraisals and probationary reviews.

CCO Grading

5 - Very Good

Number of Requirements

0

Number of Recommendations

0

Statement 4: We ensure that everyone working in the service has an ethos of respect towards service users and each other.

Service Strengths

All staff spoken with had a copy of the Scottish Social Services Council - Codes of Practice.

Through out the work of the organisation the Officers found that there was a strong commitment to person centred values and to the need for respect amongst staff and service users. One staff member stated that a firm value base and the involvement of service users were felt to be at the heart of the organisation.

The organisation's chief executive gave an input at the induction training on values and person centred working. Staff reported that this provided them with a good role model.
Staff spoken with said that they were aware of the organisation's policy relating to whistle blowing and would have no hesitation in putting it into practice. Staff felt that they would be supported should they have to use the policy. The Officers were given examples when this had happened.

When speaking about service users, staff did this in a respectful manner. This was echoed in support plans and other written documentation. Staff were observed to have a gentle rapport with service users when they interacted with them.

The questionnaires that staff completed showed that they felt well supported by their line managers and by the organisation. They stated that they felt well supported in their work; this was especially evident when staff had to deal with difficult situations.

**Areas for Development**

The service showed a strong commitment to continuing to operate at an excellent standard in relation to this Quality Statement.

**CCO Grading**

6 - Excellent

**Number of Requirements**

0

**Number of Recommendations**

0
Quality Theme 4: Quality of Management and Leadership

Overall CCO Theme Grading: 5 - Very Good

Statement 1: We ensure that service users and carers participate in assessing and improving the quality of the management and leadership of the service.

Service Strengths

The service and the organisation had developed a number of ways in which service users and their families could participate in assessing and improving the quality of the service as outlined in Quality Statement 1.1.

In relation to the management and leadership of the service the organisation had developed systems whereby the work of the individually registered services fed into the organisation's business plan. This included the group discussions and comments that were made at the local focus groups and forum meetings which were attended by individuals using the service, their relatives and staff.

The organisation's board of management was made up of lay people including current service users, individuals who had been in receipt of a service in the past and family members of service users. As board members they all had an input into the leadership and the management of the service and the organisation as a whole. One family member commented that in their experience everyone's views were listened to during the Board meetings.

The chief executive attended forum meetings so that he was directly involved in the discussions that service users, their family and staff had about the service.

Areas for Development

The organisation showed a commitment to creating new opportunities for service users and their relatives to participate in assessing and improving the quality of management and leadership of the service.

CCO Grading

5 - Very Good

Number of Requirements

0

Number of Recommendations

0

Statement 4: We use quality assurance systems and processes which involve service users, carers, staff and stakeholders to assess the quality of service we provide.

Service Strengths
There was a high level of accountability between staff and their line managers in the form of supervision, discussions during staff team meetings, day to day notes in service users' case files and support plan reviews. Although some staff worked alone, others worked along side colleagues.

Staff were aware of their role in terms of ensuring best practice and the organisation's whistle blowing policy.

Staff consistently stated that their line managers were approachable and supportive of their work.

The Officers were informed that the operations manager received monthly monitors from local managers in relation to their part of the service and that internal audits for each service were carried out annually, these included an examination of financial transactions, support plans and supervision.

The organisation had achieved the Investors in People award which focused on professional development and staff motivation.

Senior staff received support from their peers in mentoring groups so that they could share experiences of staffing issues and provide consistency across the organisation.

In discussion the manager showed her awareness of her responsibility to notify the Scottish Social Services Council and the Care Commission of any incidents of staff misconduct. She was also aware of her responsibility to provide the Scottish Social Services Council with information about staff relevant to its regulatory functions.

**Areas for Development**

Although the organisation had developed a number of ways in which it assessed the quality of the service provided, in particular by obtaining feedback from service users, it would benefit from using a more formal quality assurance model. This would ensure that the organisation is comparing its performance against a chosen benchmark such as the National Care Standards (see recommendation 3).

**CCO Grading**

5 - Very Good

**Number of Requirements**

0

**Number of Recommendations**

1
Regulations / Principles

National Care Standards
Enforcement
There has been no enforcement action against this service since the last inspection.

Other Information
Three recommendations were made following the previous inspection:

1. It is recommended that the provider develops a child protection policy to ensure that service users and staff have guidance on the organisation's roles and responsibility in connection with child protection issues.
   National Care Standards - Care at Home, Standard 4 - Management and Staffing.

2. It is recommended that the use of dossette boxes for the administration of medication to service users who require assistance who take their medication is ceased. Alternative procedures to ensure that staff are accountable only for the medication that they themselves have administered from the original labelled container should be implemented.
   National Care Standards - Care at Home, Standard 4 - Management and Staffing.

3. It is recommended that all service user's support plans give details for the level of support that they will receive and when this will be provided.
   National Care Standards - Housing Support, Standard 7 - Exercising Your Rights.

Details of how the above recommendations have been progressed are contained under the relevant Quality Statement.

Requirements
No requirements were made during this inspection.

Recommendations
1. It is recommended that the service reviews its policy relating to the protection of vulnerable adults. The policy should include the necessary information to give staff clear guidance on the action to be taken should they have concerns in relation to the protection of vulnerable adults.
   National Care Standards for Housing Support services, Standard 3 - Management and Staffing Arrangements.

2. It is recommended that the service reviews all service user files to ensure that all documentation is dated and signed so that it is clear when support plans and risk assessments have been produced and by whom.
   National Care Standards for Housing Support services, Standard 3 - Management and Staffing Arrangements.

3. It is recommended that the organisation considers using a formal quality assurance model.
   National Care Standards for Housing Support services, Standard 3 - Management and Staffing Arrangements.

Saartje Drijver
Care Commission Officer