

Inspection report

Nurseplus - Care at Home Support Service Care at Home

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Inspected by: (Care Commission officer)	Averil Blair
Type of inspection:	Announced
Inspection completed on:	10 March 2010

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Service provided by:

Nurseplus Ltd

Service provider number:

SP2003003636

Care service number:

CS2004079807

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Easy read summary of this inspection report

We grade all the Quality Statements for a service at each inspection. Each grade describes how well we think the service is doing based on what we inspected.

We can choose from six grades:



We gave the service these grades

Quality of Care and Support  **4** Good

Quality of Staffing  **4** Good

Quality of Management and Leadership  **3** Adequate

This inspection report and grades are our assessment of the quality of how the service is performing in the areas we examined during this inspection.

Grades for this care service may change after this inspection due to other regulatory activity; for example, if we have to take enforcement action to improve the service, or if we investigate and agree with a complaint someone makes about the service.

What the service does well

Service users spoken with during the inspection spoke very highly of the care delivered by the staff.

What the service could do better

One of the issues raised by service users was the increase in the number of unallocated shifts, where they did not know which staff member would be providing their care.

What the service has done since the last inspection

The service has recently introduced a new quality monitoring system which includes spot visits to service users by members of the senior management team.

Conclusion

The service provides a range of care at home services which enable service users to maintain their independence for as long as possible.

Who did this inspection

Lead Care Commission Officer

Averil Blair

Other Care Commission Officers

Not applicable.

Lay Assessor

Not applicable.

Please read all of this report so that you can understand the full findings of this inspection.

About the Care Commission

We were set up in April 2002 to regulate and improve care services in Scotland.

Regulation involves:

- registering new services
- inspecting services
- investigating complaints
- taking enforcement action, when necessary, to improve care services.

We regulate around 15,000 services each year. Many are childminders, children's daycare services such as nurseries, and care home services. We regulate many other kinds of services, ranging from nurse agencies to independent healthcare such as hospices and private hospitals.

We regulate services for the very young right through to those for the very old. Our work can, therefore, affect the lives of most people in Scotland.

All our work is about improving the quality of care services.

We produce thousands of inspection reports every year; all are published on our website: www.carecommission.com. Reports include any complaints we investigate and improvements that we ask services to make.

The "Care services" area of our website also:

- allows you to search for information, such as reports, about the services we regulate
- has information for the people and organisations who provide care services
- has guidance on looking for and using care services in Scotland.

You can also get in touch with us if you would like more detailed information.

About the National Care Standards

The National Care Standards (NCS) set out the standards that people who use care services in Scotland should expect. The aim is to make sure that you receive the same high quality of service no matter where you live.

Different types of service have different National Care Standards. When we inspect a care service we take into account the National Care Standards that the service should provide.

The Scottish Government publishes copies of the National Care Standards online at: www.scotland.gov.uk

You can get printed copies free from:

Booksource
50 Cambuslang Road
Cambuslang Investment Park
Glasgow
G32 8NB
Tel: 0845 370 0067
Fax: 0845 370 0068
Email: scottishgovernment@booksource.net

What is inspection?

Our inspectors, known as Care Commission Officers (CCOs), check care services regularly to make sure that they are meeting the needs of the people in their care.

One of the ways we check on services is to carry out inspections. We may turn up without telling the service's staff in advance. This is so we can see how good the care is on a normal day. We inspect some types of services more often than others.

When we inspect a service, typically we:

- talk to people who use the service, their carers and families, staff and managers
- talk to individuals and groups
- have a good look around and check what quality of care is being provided
- look at the activities happening on the day
- examine things like records and files, if we need to
- find out if people get choices, such as food, choosing a key worker and controlling their own spending money.

We also use lay assessors during some inspections. These are volunteers who have used care services or have helped to care for someone who has used care services.

We write out an inspection report after gathering the information. The report describes how things are and whether anything needs to change.

Our work must reflect the following laws and guidelines:

- the Regulation of Care (Scotland) Act 2001
- regulations made under this Act
- the National Care Standards, which set out standards of care that people should be able to expect to receive from a care service.

This means that when we register or inspect a service we make sure it meets the requirements of the 2001 Act. We also take into account the National Care Standards that apply to it.

If we find a service is not meeting these standards, the 2001 Act gives us powers that require the service to improve.

Recommendations, requirements and complaints

If we are concerned about some aspect of a service, or think it could do more to improve its service, we may make a requirement or recommendation.

- A recommendation is a statement that sets out actions the care service provider should take to improve or develop the quality of the service but where failure to do so will not directly result in enforcement.
- A requirement is a statement which sets out what is required of a care service to comply with the Act and Regulations or Orders made under the Act, or a condition of registration. Where there are breaches of the Regulations, Orders or conditions, a requirement must be made. Requirements are legally enforceable at the discretion of the Care Commission.

Complaints: We have a complaints procedure for dealing with any complaint about a registered care service (or about us). Anyone can raise a concern with us - people using the service, their family and friends, carers and staff.

We investigate all complaints. Depending on how complex it is, a complaint may be:

- upheld - where we agree there is a problem to be resolved
- not upheld - where we don't find a problem
- partially upheld - where we agree with some elements of the complaint but not all of them.

How we decided what to inspect

Why we have different levels of inspection

We target our inspections. This means we spend less time with services we are satisfied are working hard to provide consistently high standards of care. We call these low-intensity inspections. Services where there is more concern receive more intense inspections. We call these medium or high intensity inspections.

How we decide the level of inspection

When planning an inspection, our inspectors, or Care Commission Officers (CCOs) carefully assess how intensively each service needs to be inspected. They do this by considering issues such as:

- complaints
- changes to how the service provides care
- any notifications the service has given us, such as the absence of a manager
- what action the service has taken in response to requirements we have made.

The CCO will also consider how the service responded to situations and issues: for example how it deals with complaints, or notifies us about incidents such as the death of someone using the service.

Our inspections take account of:

- areas of care that we are particularly interested in (these are called Inspection Focus Areas)
- the National Care Standards that the service should be providing
- recommendations and requirements that we made in earlier inspections
- any complaints and other regulatory activity, such as enforcement actions we have taken to improve the service.

What is grading?

We grade each service under Quality Themes which for most services are:

- **Quality of Care and support:** how the service meets the needs of each individual in its care
- **Quality of environment:** the environment within the service (for example, is the service clean, is it set out well, is it easy to access by people who use wheelchairs?);
- **Quality of staffing:** the quality of the care staff, including their qualifications and training
- **Quality of management and leadership:** how the service is managed and how it develops to meet the needs of the people it cares for
- **Quality of information:** this is how the service looks after information and manages record keeping safely.

Each of the Quality Themes has a number of Quality Statements in it, which we grade.

We grade each heading as follows:

6	5	4	3	2	1
excellent	very good	good	adequate	weak	unsatisfactory

We do not give one overall grade.

How grading works.

Services assess themselves using guidance that we given them. Our inspectors take this into account when they inspect and grade the service. We have the final say on grading.

The Quality Themes for this service type are explained in section 2 The Inspection.

About the service we inspected

Nurseplus Care at Home Agency was registered by the Care Commission in October 2004, and changed ownership to the current owners in 2008.

Its aim is to provide individualised packages of personal care to enable service users to stay safely and comfortably in their own homes, promoting independence, privacy, dignity and choice.

The headquarters of Nurseplus is located in Auchterarder in rural Perthshire, and the service currently operates throughout Perth and Kinross and Fife.

Based on the findings of this inspection this service has been awarded the following grades:

Quality of Care and Support	4 - Good
Quality of Staffing	4 - Good
Quality of Management and Leadership	3 - Adequate

This inspection report and grades are our assessment of the quality of how the service is performing in the areas we examined during this inspection.

Grades for this care service may change after this inspection due to other regulatory activity; for example, if we have to take enforcement action to improve the service, or if we investigate and agree with a complaint someone makes about the service.

You can use the "Care services" area of our website (www.carecommission.com) to find the most up-to-date grades for this service.

How we inspected this service

What level of inspection did we make this service

In this service we carried out a low intensity inspection. We carry out these inspections when we are satisfied that services are working hard to provide consistently high standards of care.

What activities did we undertake during the inspection

The report was compiled following an announced inspection carried out on the 22nd February 2010 by Care Commission Officer Averil Blair.

As requested by the Care Commission the service sent an annual return and completed self assessment document.

During the inspection process evidence was gathered from a number of sources, including the service's relevant policy and procedure documentation, records and other documentation such as

- the self assessment
- personal plans of people who use the service
- staff files
- accident and incident records
- health and safety records
- auditing documentation

Discussions took place with various people including

- Operations Director.
- The Manager
- 5 service users and relatives.

Inspection Focus Areas (IFAs)

Each year we identify an area, or areas, we want to focus on during our inspections. We still inspect all the normal areas of a care service; these are extra checks we make for a specific reason.

For 2009/10 we will focus on:

- Meaningful activity for all adult services
- How care services assess the health of people with learning disabilities
- Involving parents for children's services
- Medication for looked after children for residential accommodation for children
- How care services make sure they have safe recruitment procedures for staff for all services except childminders.

You can find out more about these from our website www.carecommission.com.

Fire safety issues

The Care Commission no longer reports on matters of fire safety as part of its regulatory function. Where significant fire safety issues become apparent, we will alert the relevant Fire and Rescue service to their existence in order that it may act as it considers appropriate. Care service providers can find more information about their legal responsibilities in this area at: www.infoscotland.com/firelaw

The annual return

We use annual returns (ARs) to:

- make sure we have up-to-date, accurate information about care services; and
- decide how we will inspect services.

By law every registered care service must send us an annual return and provide us with the information we have requested. The relevant law is the Regulation of Care (Scotland) Act 2001, Section 25(1). These forms must be returned to us between 6 January and 28 February 2009.

Annual Return Received

Yes - Electronic

Comments on Self Assessment

The service submitted an electronic self assessment which identified some of the strengths of the service and some areas for development and which was used in the compilation of this report.

Taking the views of people using the care service into account

All service users spoken with during the inspection spoke very highly of the regular carers they received. They commented that they had high standards of work, and were very respectful and helpful. All were also concerned with the number of unallocated shifts which were identified on their weekly rota, and they perceived this to be as a result of staff changes following the change of ownership.

Taking carers' views into account

No carers were spoken with during this inspection.

Quality Theme 1: Quality of Care and Support

Grade awarded for this theme: 4 - 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 service's Participation Strategy - 'to listen to the needs, wishes and choices of our customers' - gave examples of how service users could be involved in their care, such as 'supporting service users to take part in the selection of staff'. The Manager stated that in situations where service users identified a difficulty with individual members of staff providing their service, every effort would be made to resolve the difficulty or provide alternative staff members, and this was confirmed by a service user spoken with during the inspection.

The Participation Strategy also stated that the service would encourage 'service users and carers to participate in forums where they can have their say about the services ILS offer'. This primarily related to service users with a learning disability, although the Manager confirmed that this was under consideration for other groups of service users.

Person Centred Plans allowed for service user participation, these were written in the first person, identifying how a service user wanted their care package carried out. There was evidence of initial joint planning and assessment meetings which included clarification with service users on the details of their care package.

All staff go through a period of induction training, this includes customer care, Person Centred Planning, and care planning, reminding staff of the necessity to involve service users in their care.

The service carried out a review process of care packages with all service users; this was evidenced in personal files. A complaints policy and procedure was also in place. There were no outstanding complaints at the time of inspection.

A service user survey had been carried out, and although these had been returned to the service full analysis had not been carried out at the time of inspection. The Manager was able to provide basic analysis which showed that 47% of questionnaires had been returned, the majority of which were positive responses.

The service had recently introduced a system of quality audits, which included spot visits, where members of the senior management team visited service users to discuss the service they received.

Areas for Improvement

The service had only recently introduced the quality auditing system of spot checks and audits, and some service users were not fully aware of their ability to comment formally on the quality of service they received.

Grade awarded for this statement

4 - Good

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 had a system in place to ensure safe recruitment practices. This included the checking of professional qualifications which were flagged up on spreadsheet.

The service had a range of underpinning policies and procedures in place to support good practice, and service users commented that they felt staff were more than competent in their work. All service users spoken with spoke highly of the staff who provided their care, making comments such as 'they are fantastic', and 'they treat me with a great deal of respect and dignity, as though I was part of their family'.

Individual service user files sampled evidenced access to training from the multidisciplinary team or external trainers as required and also on an ad hoc basis. Service user files sampled included all relevant paperwork such as risk assessments, support agreements, and support plans. This included risk assessments relating to the management of medication. Where necessary support plans stored at the homes of service users showed evidence of updating as required following changes to care supplied.

A supervision and appraisal policy and procedure was in place, and records evidenced that staff were guided to the use of good practice documentation where appropriate.

Areas for Improvement

Due to a recent change in ownership, a range of headed paperwork was in place, and some service users spoken with during the inspection were uncertain which part of the organisation they received their care from.

Grade awarded for this statement

4 - Good

Number of Requirements

0

Number of Recommendations

0

Quality Theme 3: Quality of Staffing

Grade awarded for this theme: 4 - Good

Statement 1

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

Service Strengths

Personal plans sampled during the inspection confirmed that regular reviews were carried out and that service users had the opportunity to discuss staffing issues at that point. Service users spoken with during the inspection confirmed that all felt comfortable in raising any concerns should their care staff not carry out tasks appropriately.

Further evidence in support of this statement can be found in Quality Theme 1 Quality Statement 1.

Areas for Improvement

The service identified in their self assessment that they hoped to develop further service user forums for those receiving care at home services following the appointment of a Senior Support Worker.

See also Quality Theme 1 Quality Statement 1.

Grade awarded for this statement

4 - Good

Number of Requirements

0

Number of Recommendations

0

Statement 2

We are confident that our staff have been recruited, and inducted, in a safe and robust manner to protect service users and staff.

Service Strengths

A Recruitment and Selection policy and procedure was in place. The service had ensured that safe recruitment had been carried out and had taken steps to obtain two references and a Disclosure Scotland check for each employee. Records sampled during the inspection showed that staff had had a period of induction training recorded, and training attended had been recorded in their files. The organisation had developed a corporate induction programme which identified issues to be covered during the induction period. The Manager was able to produce a training programme for the current year, which identified staff training.

A system of staff supervision and appraisal was in place, and records were kept in staff files. Training records evidenced that training supported staff in their work, such as Moving and Handling training.

Records were kept of the registration of staff with the Scottish Social Services Council or any other appropriate regulatory bodies.

Areas for Improvement

Although the database system the service used prevented the appointment of staff without appropriate references, references sampled during the inspection were not always clear as to the position of the provider of the references for example this was not always provided on headed notepaper.

Grade awarded for this statement

5 - Very Good

Number of Requirements

0

Number of Recommendations

0

Quality Theme 4: Quality of Management and Leadership

Grade awarded for this theme: 3 - Adequate

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

A service user survey had been carried out, and although these had been returned to the service full analysis had not been carried out at the time of inspection. The Manager was able to provide basic analysis which showed that 47% of questionnaires had been returned, the majority of which were positive responses. Questions asked included issues relating to the management of the service such as 'if you ask for changes in your service are they made?', and 'how much say do you have in how your service is run'.

The service had recently introduced a system of quality audits, which included spot visits, where members of the senior management team visited service users to discuss the service they received.

Further evidence in support of this statement can be found in Quality Theme 1 Quality Statement 1.

Areas for Improvement

Service users spoken with during the inspection were concerned with the number of unallocated shifts identified on their weekly rotas, where they did not know which staff member would be providing their care service. For some service users this caused a great deal of anxiety, as they stated that they frequently did not know until the last minute who to expect, and that sometimes it was unfamiliar staff. The service stated that this was due to a number of staff resignations, and that they hoped to appoint replacement staff in the near future. (see requirement 1)

Grade awarded for this statement

3 - Adequate

Number of Requirements

1

Number of Recommendations

0

Requirements

1.

The service should ensure that sufficient numbers of suitably qualified and experienced staff are available to meet the needs of the service users. This is in order to comply with The Regulation of Care (Requirements as to Care Services) (Scotland) Regulations 2002 (SSI 2002/114) 13 - A provider shall, having regard to the size and nature of the service, the statement of aims and objectives and the number and needs of service users-

(a) ensure that at all times suitably qualified and competent persons are working in the care service in such numbers as are appropriate for the health and welfare of service users.

Timescale for implementation : within 4 weeks of receipt of this report.

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

The service had recently put a quality monitoring and auditing system in place which included spot checks from senior members of staff. Further information in support of this statement can be found in Quality Theme 1 Quality Statement 1.

Areas for Improvement

Some service users spoken with during the inspection appeared unsure how the service monitored and assessed the quality of service, although all were able to confirm that they had completed questionnaires and had received a spot visit from a senior member of the Quality team.

Grade awarded for this statement

4 - Good

Number of Requirements

0

Number of Recommendations

0

Other Information

Complaints

There have been no complaints made about the service since the last inspection.

Enforcements

There has been no enforcement action taken on the service since the last inspection.

Additional Information

None noted.

Action Plan

Failure to submit an appropriate action plan within the required timescale, including any agreed extension, where requirements and recommendations have been made, will result in the Care Commission re-grading the Quality Statement within the Management and Leadership Theme as unsatisfactory (1). This will result in the Quality Theme for Management and Leadership being re-graded as Unsatisfactory (1).

Summary of Grades

Quality of Care and Support - 4 - Good	
Statement 1	4 - Good
Statement 3	4 - Good
Quality of Staffing - 4 - Good	
Statement 1	4 - Good
Statement 2	5 - Very Good
Quality of Management and Leadership - 3 - Adequate	
Statement 1	3 - Adequate
Statement 4	4 - Good

Inspection and Grading History

Date	Type	Gradings
6 Mar 2009	Announced	<div>Care and support</div> <div>Staffing</div> <div>Management and Leadership</div> <div>4 - Good</div> <div>4 - Good</div> <div>4 - Good</div>

Terms we use in our report and what they mean

Action Plan - When we inspect a service, or investigate a complaint and the inspection report highlights an area for improvement; either through recommendations or requirements, the action plan sets out the actions the service will take in response.

Best practice statements/guidelines - This describes practices that have been shown to work best and to be achievable in specific areas of care. They are intended to guide practice and promote a consistent and cohesive approach to care.

Care Service - A service that provides care and is registered with us.

Complaints - We have a complaints procedure for dealing with any complaint about a registered care service or about us. Anyone can raise a concern with us - people using the service, their family and friends, carers and staff.

We investigate all complaints which can have more than one outcome. Depending on how complex the complaint is, the outcomes can be:

- upheld - where we agree there is a problem to be resolved
- not upheld - where we don't find a problem
- partially upheld - where we agree with some elements of the complaint but not all of them.

Enforcement - To protect people who use care services, the Regulation of Care (Scotland) Act 2001 gives the Care Commission powers to enforce the law. This means we can vary or impose new conditions of registration, which may restrict how a service operates. We can also serve an improvement notice on a service provider to make them improve their service within a set timescale. If they do not make these improvements we could issue a cancellation notice and cancel their registration.

Disclosure Scotland- Disclosure Scotland provides an accurate and responsive disclosure service to enhance security, public safety and protect the vulnerable in society. There are three types or levels of disclosure (i.e. criminal record check) available from Disclosure Scotland; basic, standard and enhanced. An enhanced check is required for people whose work regularly involves caring for, training, supervising or being in sole charge of children or adults at risk; or to register for child minding, day care and to act as foster parents or carers.

Participation - This describes processes that allow individuals and groups to develop and agree programmes, policy and procedures.

Personal Plan - This is a plan of how support and care will be provided. The plan is agreed between the person using the service (or their representative, or both of them) and the service provider. It is sometimes called a care plan mostly by local authorities or health boards when they commission care for people.

How you can use this report

Our inspection reports give care services detailed information about what they are doing well and not so well. We want them to use our reports to improve the services they provide if they need to.

Care services should share our inspection reports with the people who use their service, their families and carers. They can do this in many ways, for example by discussing with them what they plan to do next or by making sure our report is easily available.

People who use care services, their relatives and carers

We encourage you to read this report and hope that you find the information helpful when making a decision on whether or not to use the care service we have inspected. If you, or a family member or friend, are already using a care service, it is important that you know we have inspected that service and what we found. You may find it helpful to read previous inspection reports about his service.

The Care Commission

We use the information we gather from all our inspections to report to Scottish Ministers on how well Scotland's care services are performing. This information helps us to influence important changes they may make about how care services are provided.

Reader Information

This inspection report is published by the Care Commission. It is for use by the general public. You can get more copies of this report and others by downloading it from our website www.carecommission.com or by telephoning 0845 603 0890.

Translations and alternative formats

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

Tha am foillseachadh seo ri fhaighinn ann an cruthannan is cànan eile ma nithear iartras.

অনুরোধসাপেক্ষে এই প্রকাশনাটি অন্য ফরম্যাট এবং অন্যান্য ভাষায় পাওয়া যায়।

-هه بایتسد یم وونابز رگید روا دولکش رگید رپ شرازگ تعاشا هی

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

ی.رخأ تاغل بو تاقي سينتب بلطلا دن ع رفاوتم روشنملا اذه.

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.

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Improving care in Scotland