

# Care service inspection report

## Premier Healthcare

Support Service Care at Home

13 West King Street (1 up right) Helensburgh G84 8UN

Telephone: 01436674477

Inspected by: Kevin Dale

Type of inspection: Unannounced

Inspection completed on: 8 March 2013



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## Service provided by:

Dorothy MacLeod trading as Premier Healthcare

## Service provider number:

SP2008009687

#### Care service number:

CS2008173018

## Contact details for the inspector who inspected this service:

Kevin Dale Telephone Email enquiries@careinspectorate.com

## Summary

This report and grades represent our assessment of the quality of the areas of performance which were examined during this inspection.

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

## We gave the service these grades

Quality of Care and Support 6 Excellent

Quality of Staffing 6 Excellent

Quality of Management and Leadership 6 Excellent

#### What the service does well

Premier Healthcare provides an excellent service to people who use the service and their relatives. Discussions with service users and staff and responses from questionnaires evidenced that there was a very high degree of satisfaction with the service and that it was responsive to changes in circumstances and comments from service users and relatives.

#### What the service could do better

We identified that the service should be more explicit when recording service users medication and staff should have their competency to administer medication reviewed.

## What the service has done since the last inspection

The service continues to improve in all areas of care practice and service development. Management are continually seeking ways to further improve ways to encourage participation with service users and their families.

#### Conclusion

Premier Healthcare is currently performing to an excellent standard and should continue with their service improvement plan to ensure that they sustain their grades.

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Kevin Dale

## 1 About the service we inspected

The Care Inspectorate regulates care services in Scotland. Prior to 1 April 2011, this function was carried out by the Care Commission. Information in relation to all care services is available on our website at www.careinspectorate.com.

The Care Inspectorate will award grades for services based on findings of inspections. Grades for this service may change after this inspection if we have to take enforcement action to make the service improve, or if we uphold or partially uphold a complaint that we investigate.

The history of grades which services have been awarded is available on our website. You can find the most up-to-date grades for this service by visiting our website, by calling us on 0845 600 9527 or visiting one of our offices.

Requirements and recommendations

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

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 Public Services Reforms (Scotland) Act 2010 and Regulations or Orders made under the Act, or a condition of registration.

Premier Health Care was registered on 03/07/2008 to provide a Support Service - Care at Home. The service provides support including personal care to people in their own homes living in the Helensburgh area. The service operates 24 hours 7 days per week.

The aims and objectives state that they promote independent living, deliver care in a non-discriminatory manner and provide a flexible, responsive and non-intrusive service.

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

Quality of Care and Support - Grade 6 - Excellent Quality of Staffing - Grade 6 - Excellent Quality of Management and Leadership - Grade 6 - Excellent

This report and grades represent our assessment of the quality of the areas of performance which were examined during this inspection.

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## 2 How we inspected this service

## The level of inspection we carried out

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 we did during the inspection

This report was written following an unannounced inspection which took place on the 6 November 2012 and was carried out by inspector Kevin Dale.

During the course of the inspection evidence was gathered from a number of sources including:

Evidence from the service's Self Assessment and Annual return Discussions with the service provider and staff
Telephone conversations with service users and relatives
Service user and relative questionnaires
Staff questionnaires
Policies and procedures
Service user support plans
Accident and incident records
Staff files
Training records
Complaint records
Quality assurance tools and systems

## Grading the service against quality themes and statements

We inspect and grade elements of care that we call 'quality themes'. For example, one of the quality themes we might look at is 'Quality of care and support'. Under each quality theme are 'quality statements' which describe what a service should be doing well for that theme. We grade how the service performs against the quality themes and statements.

Details of what we found are in Section 3: The inspection

## Inspection Focus Areas (IFAs)

In any year we may decide on specific aspects of care to focus on during our inspections. These are extra checks we make on top of all the normal ones we make during inspection. We do this to gather information about the quality of these aspects

of care on a national basis. Where we have examined an inspection focus area we will clearly identify it under the relevant quality statement.

## Fire safety issues

We do not regulate fire safety. Local fire and rescue services are responsible for checking services. However, where significant fire safety issues become apparent, we will alert the relevant fire and rescue services so they may consider what action to take. You can find out more about care services' responsibilities for fire safety at www.firelawscotland.org

#### The annual return

Every year all care services must complete an 'annual return' form to make sure the information we hold is up to date. We also use annual returns to decide how we will inspect the service.

Annual Return Received: Yes - Electronic

#### Comments on Self Assessment

Every year all care services must complete a 'self assessment' form telling us how their service is performing. We check to make sure this assessment is accurate.

We received a fully completed self assessment document from the service manager. We were satisfied with the way the service manager had completed this and with relevant information they had given us for each of the headings that we grade them under.

The manager identified what they thought they did well, some areas for development and any changes they planned. The self assessment gave some indication how the people who use the service had taken part in the self assessment.

## Taking the views of people using the care service into account

We sent 20 Care Standard questionnaires to service users and relatives and 8 were returned from service users. We spoke with 2 people who use the service, comments included,

- "The service is absolutely excellent, I can't fault it in any way. They watch out for you and give advice when needed, the manager is very hands on. I feel consulted on the quality of the service and consulted about any changes in my routine"
- "Premier is wonderful, gold star, I have a high regard for the work they do. The girls are all good, they will offer any help needed. I an informed about any changes and have had a review. I would grade them 6 they couldn't improve it. I feel well supported by everyone of the team"
- "I'm very pleased with this service, My carer is a very fine person and has been with me for years before being engaged in this firm. She is pleasant, completely trustworthy and very capable"

" My late Husband was my carer for many years and I cannot stress enough how splendidly Premier Healthcare have managed to cope with the gap left in my life. They are indeed a Premier Health team"

8 returned questionnaires from service users told us that overall they were very satisfied with the quality of the service they received.

## Taking carers' views into account

- "The staff are very attentive of my relatives needs. They are thoughtful and considerate, giving my relative both respect and control where possible. They are friendly and approachable and generally caring individuals that not only support my relative well but also do their best to keep her happy. I feel that my relatives wellbeing matters a lot to the carers at Premier Care and I personally feel I can relax and trust their judgement in looking after my relative"
- "We have had an excellent service from Premier Healthcare. Both myself and my mother in law are extremely satisfied with the care provided. The provider and her team go beyond the call of duty"
- "Premier Healthcare are providing excellent care on every level for my relative. Each carer my relative has met has been well trained. My relative has got to count on her carers from the service as friends and she looks forward to seeing them each day. The service provided by Premier Health care has enabled my relative to stay in their own home"
- "The service provided by Premier Healthcare on behalf of Argyll and Bute Council is really very good indeed. I believe this is due to very good staff selection. Staff are kind and helpful and this coupled with with their flexibility, has made it possible for my relative to continue in her own home. By flexibility, I mean that staff willingly keep the house running by putting on washing in the machine, hanging the clothes onto the cloths horse and putting it away. My relative receives 4 visits a day paid by the council. I pay for a further visit.
- "Without this service my own life would be impossible. Either that or my relative would not have been able to remain in their own home where they are content to be"
- "All of the staff employed by Premier Healthcare are a credit to the company. All of the carers carry out their duties in a caring and pleasant manner and always find the time for little extra chats to my relative. This is a company that I would recommend to others"

5 returned questionnaires from relatives told us that overall they were very satisfied and 2 were satisfied with the quality of the service their relative received.

## 3 The inspection

We looked at how the service performs against the following quality themes and statements. Here are the details of what we found.

## Quality Theme 1: Quality of Care and Support

Grade awarded for this theme: 6 - Excellent

#### 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 has held 2 stakeholder meetings over recent months. The manager told us that these were not well attended and was seeking ways to maximise the attendance by providing transport to services users and carers.

The welcome pack and Service user guide contained detailed information on what the service offers, their polices and procedures, Adult protection procedures and advocacy services. The manager had introduced a comments and complaints form in the welcome pack to encourage feedback from service users and relatives.

The quarterly newsletter is now printed and delivered to service users' houses. The news letter contains good information on staff training, participation and useful guidance on nutrition for people with dementia. The newsletter invites contributions from service users and carers and has a section on the history of Helensburgh with old photographs.

Service users and carers are invited to participate in staff training and we found some evidence that a carer had recently been involved in a training event.

Responses from Care Standard questionnaires and service users spoken with evidenced that there was a very high degree of satisfaction with the quality of the service, the staff and the level of consultation that takes place.

Service users told us that there care was regularly reviewed and that they are encouraged to make comment about the quality of the service and any changes that they would wish to be made with their support.

#### Areas for improvement

The service is currently performing to an excellent standard and should continue to identify and make improvements to their participation strategy.

Grade awarded for this statement: 6 - Excellent

Number of requirements: 0

Number of recommendations: 0

#### Statement 3

We ensure that service users' health and wellbeing needs are met.

#### Service strengths

We looked at service users support plans and risk assessments. We found that they were regularly updated and reviewed. Service users and or relatives had signed the support plans and risk assessments. We noted that service users and relatives had detailed input in care planning and risk assessments and their views and wishes had been recorded.

Care plans gave good descriptions of services users care needs and tasks to be undertaken. The care plans were outcome focused and there was a lot of evidence of communication with service users and relatives.

Care plans contained detailed information on pressure ulcer prevention and skin care. Service users nutritional needs were assessed and care plans for a healthy diet and oral hygiene were in place.

Support needs for service users with dementia identified areas of risk and limits to freedom and interventions to help reduce risk and maximise personal choice. Family members were fully involved in developing and reviewing risks and limits to freedom.

We found that the service has regular contact with local health care professionals, GPs and social work staff. Care plans contained contact numbers for all health professionals involved in their care. Service users told us that they often rely on staff to seek medical advice or make appointments for them.

## Areas for improvement

We found that service users medication records were not sufficiently detailed to identify the prescribed medication. Instructions in the care plan to 'prompt' medication should to be reviewed as we found that staff were required to administer medication. We spoke to the manager regarding these issues and she stated that she would make to necessary changes to care plans.

**Grade awarded for this statement:** 6 - Excellent

Number of requirements:  $\boldsymbol{\theta}$ 

Number of recommendations: 0

## Quality Theme 3: Quality of Staffing

Grade awarded for this theme: 6 - Excellent

#### Statement 1

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

#### Service strengths

See Quality Statement 1.1 in Quality Theme 1.

#### Areas for improvement

See Quality Statement 1.1 in Quality Theme 1.

Grade awarded for this statement: 6 - Excellent

Number of requirements: 0

Number of recommendations: 0

#### Statement 3

We have a professional, trained and motivated workforce which operates to National Care Standards, legislation and best practice.

## Service strengths

We looked at staff personnel and training files, we found evidence of staff receiving regular supervision and appraisals with senior management. Minutes of these meetings recorded any care practice issues, training and development needs and invited comments from staff on how to improve the quality of the service.

The service has a training matrix which identified the training staff had undertaken, training that required updated and future training events. We found that staff had undertaken a range of training as part of their induction which included dignity in home care, undertaking personnel care, moving and assisting, medication administration, first aid.

Staff had recently undertaken training in dementia and person centred care, neurological disorders, palliative care and oral hygiene. The manager had plans to provide training in the National Care Standards and the service holds training events on a monthly basis where service users and relatives are invited to attend. We found

the content of training materials to be of good quality and referred to current best practice.

The manager has introduced a named worker for each service users and service users could tell us who that worker was.

The manager was encouraging service users and relatives to become involved in staff recruitment.

Staff told us that they generally feel supported in their job and are consulted in ways how to improve the service. We found that some staff had undertaken vocational qualifications and had copies of Scottish Social Services Council Codes of Practice.

### Areas for improvement

We spoke to the assistant manager who told us that currently there was not a system in place to routinely check staff competencies with medication administration, however she told us that she would develop a system to do this.

Grade awarded for this statement: 6 - Excellent

Number of requirements: 0

Number of recommendations: 0

## Quality Theme 4: Quality of Management and Leadership

Grade awarded for this theme: 6 - Excellent

#### 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

See Quality Statement 1.1 in Quality Theme 1.

#### Areas for improvement

See Quality Statement 1.1 in Quality Theme 1.

Grade awarded for this statement: 6 - Excellent

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

The manager uses a range of tools to quality assure the service which involves service users, relatives, staff and external stakeholders. Service users and relatives are encouraged to comment on staff performance at reviews and on feedback forms. The service regularly sends out quality questionnaires and has an action plan with outcomes from issues arising from the questionnaires.

Accidents and incidents are appropriately recorded and analysed. We found good information in service users care plans daily notes of actions taken to reduce falls and the recurrence of incidents.

The manager and assistant manager has reviewed the polices and procedures to reflect Scottish legislation and best practice guidance.

Minutes of staff meetings indicated that they were well attended and that staff were able to add to the agendas of meetings and voice any concerns.

The manager has an operational development plan which is updated regularly. We found that the manager has regular contact with social work and health staff and seeks feedback on the quality of the service.

Relatives, service users and staff told us that they have great confidence in the manager and that it is a very well managed and responsive service.

### Areas for improvement

The service is currently performing to an excellent standard and should continue to implement the operational development plan.

Grade awarded for this statement: 6 - Excellent

Number of requirements: 0

Number of recommendations: 0

## 4 Other information

## Complaints

No complaints have been upheld, or partially upheld, since the last inspection.

#### **Enforcements**

We have taken no enforcement action against this care service since the last inspection.

#### Additional Information

#### **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 SCSWIS 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).

# 5 Summary of grades

Quality of Care and Support - 6 - Excellent				
Statement 1	6 - Excellent			
Statement 3	6 - Excellent			
Quality of Staffing - 6 - Excellent				
Statement 1	6 - Excellent			
Statement 3	6 - Excellent			
Quality of Management and Leadership - 6 - Excellent				
Statement 1	6 - Excellent			
Statement 4	6 - Excellent			

# 6 Inspection and grading history

Date	Туре	Gradings	
27 Apr 2010	Announced	Care and support Staffing Management and Leadership	5 - Very Good Not Assessed 5 - Very Good
7 Apr 2009	Announced	Care and support Staffing Management and Leadership	4 - Good 4 - Good 4 - Good

All inspections and grades before 1 April 2011 are those reported by the former regulator of care services, the Care Commission.

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#### Translations and alternative formats

This inspection 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।

- که بایت سد ریم رونابز رگید روا رولکش رگید رپ شرازگ تعاشا هی

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

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