

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: Elma Davidson

Type of inspection: Unannounced

Inspection completed on: 20 November 2013



HAPPY TO TRANSLATE

Contents

| | Page No |
|----------------------------------|---------|
| Summary | 3 |
| 1 About the service we inspected | 5 |
| 2 How we inspected this service | 7 |
| 3 The inspection | 10 |
| 4 Other information | 18 |
| 5 Summary of grades | 19 |
| 6 Inspection and grading history | 19 |

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:

Elma Davidson

Telephone 01631 572050

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 Health Care provides an excellent person centred service to the people who use the service. Service users and their relatives, the commissioning authority and responses from questionnaires all stated that the service responds quickly to needs and constantly offers a very high quality of person centred service.

What the service could do better

Since the last inspection the service has developed a sound managerial structure. As we discussed with the owner this needs to continue to develop to allow the owner the time and space to plan further expansion of this service.

What the service has done since the last inspection

This service continues to look at ways of improving the provision of care for the service user and is now looking at ways of expanding this service to include day care in the local area.

Conclusion

Premier Health Care continues to provide an excellent care service to the people of Helensburgh and the surrounding areas. The owner should continue to look at further developing the service for the benefit of the service user while ensuring the excellent service continues.

Who did this inspection

Elma Davidson

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 3 July 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.

Grades for this care service may change following other regulatory activity. You can find the most up-to-date grades for this service by visiting our website www.careinspectorate.com or by calling us on 0845 600 9527 or visiting one of our offices.

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

During this inspection we looked at:

- The registration and insurance documentation
- The self assessment and annual return and care service questionnaires returned to the Care Inspectorate
- The services policies and procedures especially the Lone Worker Policy and the developing Winter Lone Worker Policy and the Health and Safety Policy
- The service's accidents and incidents recordings
- 7 service users' files
- 5 staff files
- The staffing rota
- Evidence of unannounced inspections of staff at service users' homes
- Reviews of service
- The disciplinary procedures and any action taken
- Staff meeting minutes
- The Newsletter which is produced quarterly
- The welcome pack which is given to all new service users
- The training plan for the year
- Supervision and personal development plans and recordings
- Questionnaires and the collated returns and the action plans for further development of the service
- The organised out of hours contact and support that could be given if required.

We also spoke with :

- The owner of the service
- The Care Manager and the Assistant Care Manager, a Team Leader and staff
- A Team Leader for Adult Care for the local Social Work Department
- Relatives and service users.

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 self assessment from the service and this proved inclusive and very accurate to our findings during this inspection.

Taking the views of people using the care service into account

"I look forward to my carer visiting. I know that she will get me sorted and I am really looking forward to the Christmas lunch. And (the manager's name) is treating us!"

"I think Premier Health Care are a very good home care provider as they promote all aspects of care to each client to a very high and professional standard and according to the needs of the user"

"I always get someone to answer my call even if I have to leave a message"

Taking carers' views into account

"Since starting this job I feel I have a very good management team who check up on my daily/weekly care of my clients"

"We have a monthly management meeting where we discuss not only the care plans in place for the client but what I feel may benefit the client from my point of view as I am the one who is in daily contact with them"

"Yes I am adequately training to do my job to the best of my ability"

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 was awarded an excellent grade for this Quality Statement. We decided this after we spoke with the owner, staff and service users and looked at files and other pertinent documents.

The service has a clear participation strategy which involves all staff.

Regular staff meetings are held by the Team Leaders and minutes are produced and circulated. Any action plans are shared with the owner for her participation.

Regular questionnaires are issued to all service users and their replies were all very positive. The owner collated those replies and formed an action plan.

Despite the owner offering transport and booking a room at a local hotel there have been difficulties getting relatives to attend regular information sharing meetings. Only one person has attended to date and this is despite invitations being sent to all relatives. The owner has also considered advertising the event in the local paper but the cost has proved exorbitant. The very informative Newsletter which is delivered to all concerned now has more information included to ensure that everyone is aware of developments and how to become involved with the service.

Service users' files are well documented and show evidence of initial assessments involving all interested parties, a review after four weeks of service is held as well as regular reviews of service with the minutes being shared with everyone involved with that person's care. The reporting is person centred and the files are well organised and securely stored.

The welcome pack is in plain English and informative and included the service's policies and procedures, the limits of the service, adult protection procedures and information about the local advocacy service. There is also a separate sheet which encourages service users to make any comments and/or concerns about the service as well as feedback from service users and their relatives.

The quarterly Newsletter is delivered to service users and relatives' homes. This is informative and includes training taking place in the near future with invites to all interested parties to attend, invites to all to attend the service's Christmas Lunch in a local hotel, information about forthcoming events, any changes to the service, information about the local advocacy service and suggestions about eating well for people with dementia. There is also clear evidence of encouragement being given to both service users and their relatives for feedback on the service.

The responses to care standards questionnaires and to service users spoken with, evidenced that the service offered was of a very high standard.

There is evidence in individual files of the involvement of relatives and named persons.

Areas for improvement

The service is currently operating at an excellent level and the owner should continue to develop the service and continue to involve service users and their relatives in the development.

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

The service was awarded an excellent grade for this Quality Statement. We decided this after we spoke with the Owner and staff, service users, a Team Leader in the local Social Work Department and looked at case files. We also observed the staff respond to a medical emergency in a professional, caring and competent manner.

Staff were very clear about whether medication should be prompted or administered and this was evidenced in individual care files.

Medication records were detailed and staff have been trained in the administration or prompting of medication.

Staff supervision included health and safety and the medication needs of the service user.

The management actively enquire into any medical concern declared by staff during interview. This is to avoid lack of continuity of care in the service offered to the service user.

We looked at service users' support plans and risk assessments which were regularly reviewed and updated. There was evidence that service users and their relatives had been involved in any decisions made as plans were signed and dated by them and their wishes had been included.

There was evidence in the care files that the service users had regular contact with a variety of health care professionals, social work and GP's. The information recorded included telephone numbers and when the health personnel was available.

Care plans were outcome focused and contained detailed descriptions of care to be provided including prevention of pressure sores and skin care. There was also evidence in care plans for a healthy diet and oral hygiene.

Care and support plans for people with dementia included evidence of their relatives being fully involved especially if there was consideration given to areas concerning risks and limits to freedom.

Areas for improvement

The owner and management should ensure that this level of information sharing and relative involvement continue and continue to inform and support all staff in the provision of care.

Grade awarded for this statement: 6 - Excellent

Number of requirements: 0

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

The service was awarded an excellent grade for this Quality Statement. We decided this after we spoke with staff, service users, relatives and looked at individual files and records of participation.

Please see Quality Statement 1.1.

Staff files are well organised and documented. They include interview notes and PVG (Protection of Vulnerable Groups) results are appropriately recorded.

Questionnaires include encouraging service users and relatives to comment on the quality of the staff and regular supervision and support meetings take place as do personal development meetings. All of those are well documented and planned.

Any concerns regarding staff conduct had been dealt with effectively and professionally ensuring that all rights were safeguarded. This included reporting to SSSC.

Areas for improvement

The owner should continue to develop methods of supporting and ensuring staff supply the excellent service recorded above.

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

The service was awarded an excellent grade for this Quality Statement. We decided this after we spoke with the owner and staff and looked at training plans, induction records and individual staff files.

The owner has a yearly training matrix which includes statutory training requirements. There is evidence of this training being undertaken in individual staff files.

An induction period takes place before staff are allocated any service users. There is evidence of this in individual staff files and the training includes treating service users with dignity and respect, undertaking personal care, moving and assisting, medication administration, Codes of Practice, National Care Standards and first aid.

Regular supervision and personal professional development takes place and is documented in individual files. Any identified needs are taken forward for action.

There is also in house training undertaken on a monthly basis. The topics are identified by staff and service users and the requirements of the service. Service users and relatives are invited to attend those training days. We found the quality of the training to be good and included best practice.

Each service user has a named worker and they could tell us who they were.

During this inspection staff told us that they felt supported and valued by the management. They also stated that they felt part of the service as they were always included and consulted on any developments. Some staff had undertaken vocational qualifications and further funding has been identified for other workers.

Service users and relatives are encouraged to assist in staff selection.

Exit questionnaires are completed when staff leave the company and any improvements looked at to enable the service to develop further.

Areas for improvement

The service should continue to value and train staff to the present high standard using the National Care Standards.

Staff should be reminded that while dealing with Adult Protection the setting of the incident could be a scene of crime and they should recognise and respect 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

The service was awarded an excellent grade for this Quality Theme. We decided this after we spoke with the staff, service users and their relatives and looked at meeting documents and questionnaires.

Please see Quality Theme 1.1.

Questionnaires included asking staff and service users to comment about the management of the service. The results have been very positive and complimentary, some mentioned her very professional approach to work, her approachability and her prompt action to any required concern or suggestion for the improvement of service.

Areas for improvement

The owner should continue to involve staff, service users and stakeholders in her development both personally and of the service.

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 service was awarded an excellent grade for this Quality Statement. We decided this after we spoke with the owner and staff and looked at various ways that the service ensured the excellent quality of service offered continues and develops.

There are various tools used to ensure that the quality of the service is assured. Those include various meetings and the distribution of the those minutes. Feedback forms

in which all involved are encouraged to complete, reviews of service and minutes from those meetings being given to all concerned, home visits and unannounced drop- in visits to assess the quality of service being offered.

The owner and care managers operate an open door policy and staff and service users all state they would not hesitate to contact any of them.

The policies and procedures are reviewed on a regular basis and signed and dated.

Staff meetings are well attended and staff felt that they could add agenda items for discussion.

The owner has an operational development plan which is regularly updated and any action identified undertaken.

The owner and management have good contact with outside agencies and the service is respected by them("this service is held in high esteme in the community as an example of excellent care").

Areas for improvement

The owner and her staff should continue to develop the service in the person centred way described above and continue to use and develop the tools above involving all concerned.

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 the Care Inspectorate re-grading a Quality Statement within the Quality of Management and Leadership Theme (or for childminders, Quality of Staffing Theme) as unsatisfactory (1). This will result in the Quality Theme 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 | Type | Gradings |
|-------------|-------------|---|
| 8 Mar 2013 | Unannounced | Care and support 6 - Excellent Staffing 6 - Excellent Management and Leadership 6 - Excellent |
| 27 Apr 2010 | Announced | Care and support 5 - Very Good Staffing Not Assessed Management and Leadership 5 - Very Good |
| 7 Apr 2009 | Announced | Care and support 4 - Good Staffing 4 - Good Management and Leadership 4 - Good |

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

To find out more about our inspections and inspection reports

Read our leaflet 'How we inspect'. You can download it from our website or ask us to send you a copy by telephoning us on 0845 600 9527.

This inspection report is published by the Care Inspectorate. You can get more copies of this report and others by downloading it from our website: www.careinspectorate.com or by telephoning 0845 600 9527.

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 cànan eile ma nithear iarrrtas.

অনুরোধসাপেক্ষে এই প্রকাশনাটি অন্য ফরম্যাট এবং অন্যান্য ভাষায় পাওয়া যায়।

ہے بایتسرد می م وونابز رگی دی روا ولکش رگی دی رپ شرازگ تعاشا ہی

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

ی.رخأ تاغل بو تا قیسن تب بل طلا دن ع رفاو تم روشنم الا 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.

Telephone: 0845 600 9527

Email: enquiries@careinspectorate.com

Web: www.careinspectorate.com