

# Care service inspection report

Full inspection

## Premier Healthcare Support Service

13 West King Street  
(1 up right)  
Helensburgh



HAPPY TO TRANSLATE

Service provided by: Dorothy MacLeod trading as Premier Healthcare

Service provider number: SP2008009687

Care service number: CS2008173018

Inspection Visit Type: Unannounced

Care services in Scotland cannot operate unless they are registered with the Care Inspectorate. We inspect, award grades and set out improvements that must be made. We also investigate complaints about care services and take action when things aren't good enough.

Please get in touch with us if you would like more information or have any concerns about a care service.

## Contact Us

Care Inspectorate  
Compass House  
11 Riverside Drive  
Dundee  
DD1 4NY

[enquiries@careinspectorate.com](mailto:enquiries@careinspectorate.com)

0345 600 9527

[www.careinspectorate.com](http://www.careinspectorate.com)

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## 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	5	Very Good
Quality of staffing	4	Good
Quality of management and leadership	4	Good

### What the service does well

Premier Healthcare provides a valued service to service users and relatives. Feedback about the quality of the service and staff is very positive and the management and staff are motivated to provide the best service possible.

### What the service could do better

The manager needs to ensure staff are recruited in a safe and robust manner. Medication administration training and assessing staffs' ongoing competency to administer medication needs to be further developed and systems to quality assure all aspects of the service requires further work.

### What the service has done since the last inspection

The service is piloting a reablement project with local health and social work colleagues.

### Conclusion

The service continues to provide a very much valued service and must take action on the areas for improvement identified within this inspection report.

# 1 About the service we inspected

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.

## Recommendations

A recommendation is a statement that sets out actions that a care service provider should take to improve or develop the quality of the service, but where failure to do so would not directly result in enforcement.

Recommendations are based on the National Care Standards, SSSC codes of practice and recognised good practice. These must also be outcomes-based and if the provider meets the recommendation this would improve outcomes for people receiving the service.

## Requirements

A requirement is a statement which sets out what a care service must do to improve outcomes for people who use services and must be linked to a breach in the Public Services Reform (Scotland) Act 2010 (the "Act"), its regulations, or orders made under the Act, or a condition of registration. Requirements are enforceable in law.

We make requirements where (a) there is evidence of poor outcomes for people using the service or (b) there is the potential for poor outcomes which would affect people's health, safety or welfare.

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

**Quality of care and support - Grade 5 - Very Good**

**Quality of staffing - Grade 4 - Good**

**Quality of management and leadership - Grade 4 - Good**

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](http://www.careinspectorate.com) or by calling us on 0345 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

We wrote this report following an unannounced inspection that took place over two days. The inspection was carried out by one Inspector. The inspection took place on 3 and 11 November 2015.

As part of the inspection, we took account of the completed annual return and self assessment forms that we asked the provider to complete and submit to us.

We sent 35 care standards questionnaires to the manager to distribute to service users and their relatives/carers. Service users and relatives sent us 26 completed questionnaires. We also sent 20 staff questionnaires to the manager to distribute to staff and we received 10 completed questionnaires.

During this inspection process, we gathered evidence from various sources including the following:

We spoke to:

- two service users
- four relatives
- five support staff
- the provider/manager
- a care co-ordinator
- a local authority procurement officer.

We looked at:

- service user and relative satisfaction and quality questionnaires
- the quarterly newsletter
- minutes of a stakeholder meeting
- staff questionnaires
- minutes of a staff meeting
- minutes of review meetings
- service user support plans
- daily logs
- staff visit rotas
- complaint records
- medication administration records
- staff training records
- staff supervision records
- records of accidents and incidents
- staff induction hand book
- the quality assurance file.

## 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.firescotland.gov.uk](http://www.firescotland.gov.uk)



## 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 provider. We were satisfied with the way the service provider had completed this and with the relevant information they had given us for each of the headings that we grade them under. The service provider identified what they thought they did well, some areas for development and any changes they planned.

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

The views of people using the service are contained within the main body of the report.

## Taking carers' views into account

The views of relatives and carers are contained within the main body of the report.

## 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: 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 service was very good at ensuring service users, carers and stakeholders participate in assessing and improving the quality of care and support. We spoke to service users, relatives and staff and looked at service users' support plans, minutes of care reviews, the participation strategy, newsletters and questionnaires.

The quarterly newsletter gave useful information on local services and contact numbers and topics such as power of attorney and dementia awareness training. Service users and relatives were invited to participate in training with staff.

The service user and relative survey had been undertaken in September 2015 and the responses and feedback was very positive about the quality of the service and staff.

The manager had arranged a stakeholder meeting to be held in November 2015 and letters had gone to all stakeholders with a copy of the participation strategy and an agenda with a request to add to the agenda. A stakeholder meeting held in August 2015 at a local hotel where lunch was provided had been successful and comments regarding the service were very positive.

Comments from service users and relatives included:

"Excellent service, couldn't be better".

"I am very grateful for the help I receive".

"My family and I are completely satisfied with my care".

"Retaining when possible the same carer who regularly calls is a big help to both client and carer as both involved are aware of the need and familiar with client's requirements and preferences".

### Areas for improvement

The service should continue to develop ways in which service users, relatives and stakeholders can participate in assessing and improving the quality of care and support.

### Grade

5 - Very Good

**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 performing to an excellent standard in this quality statement. We spoke to service users, relatives, staff and external stakeholders. We looked at service users' support plans, health care and risk assessments and minutes of reviews.

We found the staff and management had a good rapport with health care professionals and social work staff and collaborated effectively to support people with complex needs in their own homes. The manager told us that an extra effort is made to ensure that the proper match is made with the service users and support worker and this was confirmed by service users, relatives and stakeholders spoken with.

Personal support plans contained detailed information on health and risk assessments including food preferences, lifestyle choices and hobbies. The support plans identified service users who required special diets and ways to support them to maintain a healthy diet.

Care reviews were taking place on a six monthly basis and people who used the service confirmed that their views were sought on how they wished their care to be given and any suggestions to improve the quality of care.

Service users and relatives told us:

"The staff are very caring for all my needs and diet".

"My relative is looked after by Premier Healthcare who do a really excellent job. My relative has dementia but is able to continue in their house because of the high quality of service provided. Thank you Premier Healthcare!"

"I am very pleased with the service, they are excellent".

"The service is excellent, they increased the care when it was needed, the staff are very willing and the manager acts on any issues and works well with us and social work".

### Areas for improvement

We noted that some risk assessments required to be updated to reflect changes in service users' personal circumstances or health.

The medication policy required to be updated to include when to notify the Care Inspectorate of medication administration errors.

### Grade

6 - Excellent

**Number of requirements - 0**

**Number of recommendations - 0**

## Quality Theme 3: Quality of Staffing

Grade awarded for this theme: 4 - Good

### 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

The service was performing to a good standard in this quality statement. We spoke to people who used the service, the manager and staff and looked at staff recruitment files.

We looked at four files of recently recruited staff.

Staff spoken with confirmed that they had undergone an induction programme which included shadowing more experienced staff and mandatory training for example moving and handling.

### Areas for improvement

We found that some staff had been recruited with one reference only and that some of the references were not from the most recent employer. The interview notes within staff files lacked detail or were missing and we were unsure who and how many people had been present at the interview.

Identification checks did not take place consistently and staff registered with the Nursing and Midwifery Council (NMC) or the Scottish Social Services Council (SSSC) did not routinely have a record of their registration number and registration status recorded.

We advised the manager of Disclosure Scotland's current guidance on the holding of Disclosure certificates and extracts from the Vulnerable Groups register.

See Requirement 1.

## Grade

4 - Good

## Requirements

### Number of requirements - 1

1. The provider must ensure that they follow safe recruitment practice at all times to ensure that staff are suitably qualified and competent to provide a care service which meets the health, welfare and safety of service users.

This is in order to comply with: SSI 2011/210 regulation 15 (a).

Timescale: four weeks from receipt of this report.

### 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 performing to a good standard in this quality statement. We decided this after we spoke to service users, relatives, staff and management. We looked at staff training files and records and the training and development plan for 2015/2016.

Some staff had attended training in adult support and protection and dementia facilitated by Argyll and Bute Council. The service was involved with a pilot reablement project with the local reablement occupational therapist where staff would receive training to enable service users who had been discharged from hospital or required some rehabilitation to become more independent and prevent further deterioration in health or admissions to hospital.

We noted that some staff supervisions were taking place and they had been scheduled on a three monthly basis. The manager told us that she had recruited two new team leaders and was in the process of developing team meetings and the team leader role.

Staff spoken with were knowledgeable about their role and spoke warmly of the people they supported. They were aware of their responsibilities under Adult Protection legislation and the SSSC Codes of Practice.

Comments from service users and relatives included:

"The girls are kind, compassionate and caring. The service Premier Healthcare and staff give is excellent. My relative appreciates it very much".

"They are great, happy with everything, they are all very nice and helpful. The staff are nearly always on time and it is usually the same staff. I am very contented".



"Care and support are first rate. I am impressed by the high quality of the carers and their competence".

### Areas for improvement

We found that some training records were out of date. We had difficulty evidencing what training staff had recently undertaken because there was no training matrix in place which gave an overview of training undertaken by all the staff.

We found that training in medication administration was not robust and there was no system in place to check staffs' ongoing competency to administer medication. We asked the manager to look for possible training available to staff and develop systems to evidence ongoing competency to administer medication.

The training plan should be more specific to staffs' individual training needs and linked to staff supervision. This would enable staff to begin to prepare for registration with the SSSC. Staff would benefit from some further training to meet individual service user specialist needs.

Systems of staff supervision could be further developed which would include a formal agenda linked to professional and personal development.

The training materials and some of the best practice guidance held in the training manual was out of date and required to be updated.

### Grade

4 - Good

**Number of requirements - 0**

**Number of recommendations - 0**

## Quality Theme 4: Quality of Management and Leadership

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 management and leadership of the service."

### Service Strengths

The service was performing to a very good standard in this quality statement. We spoke to service users, relatives, staff and stakeholders. We looked at service users' support plans and minutes of reviews, responses from questionnaires and minutes of service user and staff meetings.

Service users, relatives, staff and stakeholders told us that the management and staff regularly sought their views on the quality of the service and ways to improve it. The manager was very visible in the service and personally communicated with service users and relatives on a regular basis.

Service users and relatives commented:

"I could not manage without the help, care and kindness shown by all the carers to me. I really appreciate it very much also the manager visits and makes sure everything is alright".

## Areas for improvement

The service should further develop the participation strategy with particular focus on identifying outcomes for people who use the service via support plans and care reviews.

## Grade

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

The service was performing to a good standard in this quality statement. We decided this after we spoke with service users, relatives and staff. The service uses a range of quality assurance tools to monitor and audit the quality of the service, including spot check forms, questionnaires and care reviews.

We found that accidents and incidents were appropriately recorded and detailed actions taken and the outcomes of those actions.

The staff questionnaires we sent to staff indicated that they had confidence in the management and leadership of the service and the staff we spoke with stated they found the manager approachable and listened to their views.

Service users, relatives and stakeholders spoken with and responses from questionnaires all confirmed that they found the service very well managed, responsive to requests to change or alter the service provided and regularly seek their views on the quality of the service and staff performance.

Relatives and service users commented:

"Premier have provided an excellent level of support with many of the staff going above and beyond what could reasonably be expected. This was very apparent during the last few months caring for and supporting my relatives. Many of the staff are outstanding and they are very well managed by the manager and care coordinator. They communicate effectively with social work and health care professionals".

## Areas for improvement

We looked at the strategic plan for the service and noted that it mostly related to expanding and developing the business. Plans and targets for future service delivery should be specific and measurable so that people are able to tell whether these areas have been achieved. The focus of plans needs to be on improving outcomes for people.

The manager told us that she had yet to fully develop their systems of quality assurance that would demonstrate and measure ongoing improvements to the quality of the service. We advised the manager that developing an operational improvement plan that takes account of all aspects of the service would help in this process.

We found that there was not systematic procedures in place to monitor spot checks or audit medication administration records. These audits should routinely take place as part of the quality assurance process to ensure the positive outcomes for service users.

## Grade

4 - Good

**Number of requirements - 0**

**Number of recommendations - 0**

## 4 What the service has done to meet any requirements we made at our last inspection

### Previous requirements

There are no outstanding requirements.

## 5 What the service has done to meet any recommendations we made at our last inspection

### Previous recommendations

There are no outstanding recommendations.

## 6 Complaints

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

## 7 Enforcements

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

## 8 Additional Information

There is no additional information.

## 9 Inspection and grading history

Date	Type	Gradings	
7 Nov 2014	Unannounced	Care and support	6 - Excellent
		Environment	Not Assessed
		Staffing	6 - Excellent
		Management and Leadership	6 - Excellent
20 Nov 2013	Unannounced	Care and support	6 - Excellent
		Environment	Not Assessed
		Staffing	6 - Excellent
		Management and Leadership	6 - Excellent
8 Mar 2013	Unannounced	Care and support	6 - Excellent
		Environment	Not Assessed
		Staffing	6 - Excellent
		Management and Leadership	6 - Excellent
27 Apr 2010	Announced	Care and support	5 - Very Good
		Environment	Not Assessed
		Staffing	Not Assessed
		Management and Leadership	5 - Very Good
7 Apr 2009	Announced	Care and support	4 - Good
		Environment	Not Assessed
		Staffing	4 - Good
		Management and Leadership	4 - Good

## To find out more

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### Contact Us

Care Inspectorate  
Compass House  
11 Riverside Drive  
Dundee  
DD1 4NY

[enquiries@careinspectorate.com](mailto:enquiries@careinspectorate.com)

0345 600 9527

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