

Bellshill Home Support Service Housing Support Service

303 Main Street
Bellshill
ML4 1AW

Telephone: 01698 346666

Type of inspection:

Unannounced

Completed on:

9 August 2019

Service provided by:

North Lanarkshire Council

Service provider number:

SP2003000237

Service no:

CS2004071279

About the service

North Lanarkshire Council provides Bellshill Home Support Service - home support and housing support. The service was previously registered with the Care Commission and transferred its registration to the Care Inspectorate on April 2011.

North Lanarkshire Council recognise that there has been a steady increase of people with complex health and care needs, who are choosing to remain in their own homes. Therefore, a few years ago they introduced a redesign of their care at home support, with the aim of providing flexible person-centred support, which is adapted to the service user's needs thereby, enabling people to remain in their own homes and prevent admission to hospital or to care homes. Home care is delivered by three teams: intensive, reablement and mainstream. The intensive team focus on providing flexible, intensive home support for a limited period of time for instance providing end of life care. The reablement team provide a rehabilitation programme which focusses on maximizing people's independence normally following an illness or stay in hospital. Whilst the mainstream team delivers the vast majority of home support.

The service provider employs one hundred and fifty-four support workers who deliver the care service to four hundred and nine service users in their own homes. The aim of the service is to 'provide a support service to older people and younger adults in their own homes' as stated by the provider.

This service is supported by the Community Alarm Service which operates on a twenty-four hour basis from Merrystone in Coatbridge, alongside North Lanarkshire Council's Social Work Emergency Services Team and Housing.

What people told us

Prior to the inspection, we obtained service users views from questionnaires and from telephone calls. In addition, during the inspection we accompanied support workers during their shifts to observe practice, read documentation and speak with service users and their carers/families. In general, the feedback that we received was very positive in relation the support and care from the support workers. Individuals spoke positively about the manner with which support workers undertook their duties and people expressed gratitude for a range of positive outcomes which they benefitted from. As a result of using the service, such as ability to remain in their own homes, timely discharge from hospital and feeling safer with in their own homes. Others spoke of the lack of communication from the service regarding the times and who was coming. Some spoke of receiving the letter however, not getting updated with changes. Some the comments that we received were:

'Staff treat their patients with the utmost care and respect although, it is preferable to have the same faces, every member of the team provides the highest level of service'.

'I am very happy with the service I receive and it's a great help as I am in real pain as I have a few things wrong with me and I am very grateful for the help I get'.

'The ladies who go into my [relative] are angels... the ladies can always get him to smile and even laugh. I can't thank the ladies enough'.

'Communication between provider/user could be improved'.

'I find the service provided is excellent. All the carers are very kind and respectful to me'.

'Regular carers are all really good but if any changes are happening Don't get told who they are or of time changes'.

'Any carers that has come into my [relative] are very nice and supportive'.

'All staff are friendly, pleasant and very helpful'.

'Since Christmas, the admin side of this service has been a complete shambles. Schedules done weekly get

changed daily or even hourly there is just no stability at all'.
 'I am so privileged to have such great carers look after me'.
 'I do not think office staff realise you get to trust your team of carers as it can take time to get used to somebody doing your hygiene tasks and creaming and dressing you'.
 'Overall service is very good very occasionally girls come in too early or too late'.
 'I have no complaints about my [relatives] regular carers but they have recently started changing carers coming in at a whole range of times which isn't really good'.
 ''[relative] has dementia so she gets upset when things get changed and when she doesn't know the carers'.
 'Sometime my support times are changed and I am not informed - happens often'.
 'I get strangers in'.
 'Overall, I am happy with the support I receive. The regular staff that I get are fantastic and very supportive without their help I would not be able to remain independent and living in my home'.
 'The home support workers are amazing they are so helpful and caring I cannot thank them enough'.
 '[relative] copes okay with her regular carer's but when some of them are off her carers arrive at different times and don't know her needs, rarely read the careplan'.
 'Would be helpful to have a weekly schedule listing the names of the carers attending'.
 'First class except when the girls are moved about'.
 'The carers are not give travelling time to the next client this causes me and my carer to become anxious'.
 'Have found staff respond quickly to my concerns'.
 'Would be nice if contacted with changes to carers and times if different to ones stated on schedules'.
 'My [relative] and I are very pleased with the care our [relative] receives'.

Self assessment

A self-assessment was not requested prior to this inspection.

From this inspection we graded this service as:

Quality of care and support	3 - Adequate
Quality of staffing	4 - Good
Quality of management and leadership	3 - Adequate

Quality of care and support

Findings from the inspection

At this inspection, we found that the service was performing at an adequate level for this theme.

The service offers personal care support and housing support to service users in the Bellshill Locality, enabling people to remain as independent within their own homes. Service users receive support with a range of personal care tasks, shopping and some domestic duties. The service provides home support in the form of a reablement team, intensive team and mainstream support with support times varying depending on the individual's needs. The reablement team provide a rehabilitation programme which focusses on maximizing people's independence, following an illness or stay in hospital, whilst the intensive team offer short interventions, which include palliative care. It was clear that these supports are improving outcomes for service users, such as independence and increased levels of confidence. Individuals and their families testified to this and some examples of positive

outcomes were receiving the support needed to enable individuals, to return home promptly following a hospital admission, supporting individuals wishes to return home for end of life care and not remain in a hospital, being supported to remain as independent as possible in their own homes and feeling safe and cared for.

The service has very good links with other social care and health resources and they will refer on as appropriate and work in partnership with these other agencies, to improve the health and wellbeing outcomes for the individuals involved. The service is supported by the Community Alarm Service which operates on a twenty-four hour basis, from Merrystone in Coatbridge alongside North Lanarkshire Council's Social Work Emergency Services Team and Housing.

During the inspection, we shadowed a number of support workers in the community. They demonstrated a strong value base aimed at upholding dignity and respect in service user homes. We observed support workers applying good practice in terms of infection control, moving and handling safely and showed good knowledge of the individuals needs and preferences. The workers presented as highly motivated to improve the lives of the individuals that they were supporting.

We found the care planning documentation to be up-to-date and offered some good information about people's needs and support required, to enable them to remain as independent as possible. However, we did find contradictory information in relation to medication needs and the support that is required by the service (see outstanding requirement 4). Since the last inspection, there has been a deterioration in the frequency of care plan reviews. (see outstanding requirement 1)

The service has developed a number of methods to liaise with service users and their families and involve them in assessing the quality of the overall service. The feedback from the annual survey highlights good levels of satisfaction and this is consistent with the information received from the Care Inspectorate questionnaires and discussions during the inspection. Service users and carers/family offered positive feedback for the home support workers role in improving their quality of life. A key criticism of the service is the lack of information in advance of the planned provision.

Service users and their families continue to express concerns regarding the lack of information of who is providing the support on a daily basis and of not receiving information when there are changes. This causes anxiety for service users and impacts on their experience of safety within their own home. This practice is not upholding the individual's dignity in their own homes. This continues to need improvement. (see outstanding requirement 3)

Requirements

Number of requirements: 0

Recommendations

Number of recommendations: 0

Grade: 3 - adequate

Quality of staffing

Findings from the inspection

At this inspection, we found that the service was performing at a good level for this theme.

During the inspection, we shadowed a number of support workers in the community and at their team meetings. They demonstrated a strong value base, aim to maintain or improve the health and wellbeing of service users in their own homes. From the feedback in questionnaires and interviews we were able to conclude that staff are motivated to deliver a quality service, that seeks to uphold individuals human rights. Staff indicated that they felt supported by management.

We were encouraged to find that the service had organised for Alzheimer's Scotland to facilitate dementia training at skilled level for the entire workforce. Workers are identifying training needs however, the service is not providing sufficient training opportunities. Staff continue to express the wish for more regular supervision and opportunities to meet as a team. The provider and management need to develop the strategy and procedures to ensure that they are able to demonstrate that staff are competent to carry out their duties, which will result in improved outcomes for service users and their carers/relatives.

Requirements

Number of requirements: 0

Recommendations

Number of recommendations: 0

Grade: 4 - good

Quality of management and leadership

Findings from the inspection

At this inspection, we found that the service was performing at an adequate level for this theme.

Since the last inspection, there have been a number of changes within the home support team including a new senior home support manager and more recently a new team leader who had only been in post for two weeks at the point of inspection. In summary, the changes have resulted in the service being unable to demonstrate an adequate oversight of the service, particularly in relation to managing complaints, accidents/incidents and making notifications to the Care Inspectorate in line with guidance. Where action is needed or a training need is identified, there should be a clear action plan showing the person responsible, agreed timescale, review of competency and sanctions of failure to rectify, to ensure that areas for improvement are progressed. The management team expressed their resolve to prioritise and address these failings and to address the outstanding requirements/recommendations, that were made at previous inspections or following complaint investigations.

Requirements

Number of requirements: 0

Recommendations

Number of recommendations: 0

Grade: 3 - adequate

What the service has done to meet any requirements we made at or since the last inspection

Previous requirements

Requirement 1

The provider must ensure that at least once in every six month period, personal plans are reviewed, in order to ensure that the service is able to meet individual care and support needs. The support plans must be updated to reflect any changes and inform current planning of care and support.

This is in order to comply with The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/210) Regulation 5 (2)(b)(iii) Personal Plans.

Timescale for implementation: to commence upon receipt of this report and be completed within six months and remain on going every six months thereafter.

This requirement was made on 5 November 2014.

Action taken on previous requirement

At the last inspection, we noted that the service had introduced systems, to enable management to monitor, manage and prioritise reviews. However, due to a number of external and internal challenges, the team have failed to meet this requirement therefore this will be repeated.

Not met

Requirement 2

The provider must review the way in which staff training is managed within this service, as part of this they must:

- Carry out a training needs analysis which enables them to identify what training staff need.
- Develop an action plan with timescales indicating when training will take place.
- Through supervision, evidence that the outcome of training is being considered as part of assessment of staff competence and that ongoing learning is being addressed.

This is to comply with The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI2011/210), regulation 15 (a).

Timescale: Within six months of receipt of this report.

This requirement was made on 10 November 2015.

Action taken on previous requirement

The service has managed to deliver mandatory training needs and also dementia training at the skilled level, in line with the national dementia framework. However, we did find some exceptions and the management assured us, that this would be rectified without delay. The supervision, competency assessments and team meeting opportunities are patchy and not in line with North Lanarkshire Council policy or Scottish Social Services good practice. Therefore, we are finding staff requesting to undertake training in areas such as epilepsy, addiction and palliative care however, they are unable to access an internal course.

We would encourage the provider to support the locality in delivering the required training, to ensure that staff have the necessary knowledge and skills to undertake their duties.

Not met

Requirement 3

The Provider must ensure that the service provides accurate information of planned support to service users, in a manner which respects the privacy and dignity of service users.

This is in order to comply with: The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/210) Regulation 4 Welfare of Users and Regulation 5 Personal Plans.

Timescale within six months upon receipt of this report and on going thereafter.

This requirement was made on 27 September 2016.

Action taken on previous requirement

Individuals who use the service continue to express levels of frustration at the lack of prior knowledge of who and when carers will be providing support. This lack of information significantly reduces an individuals sense of safety and wellbeing in their own homes.

Not met

Requirement 4

This requirement was made following a complaint to the Care Inspectorate:

- a) Record details of risk assessments and risk enablement plans in the care and support plan including detailed risk assessments.
- b) Make referrals to the appropriate agencies when risks are identified.

This is in order to comply they with Health and Social Care Standards, "My care and support is provided in a planned and safe way, including if there is an emergency or unexpected event". (4.14)

This is also in order to comply with SS1 2011/210 5 (2) (b) (c) In order to ensure that people experiencing care can be confident in the people who care and support them by 22 March 2019.

This requirement was made on 1 April 2019.

Action taken on previous requirement

During the inspection, we visited a number of homes and examined assessment and recording documentation. Where necessary, we found risk assessment had been carried and were up-to-date and referrals had been made as were needed.

Met - outwith timescales

Requirement 5

This requirement was made following a complaint to the Care Inspectorate:

- a) All staff receive up to date training and on-going competency assessments in the administration of medication.
- b) Staff are given clear direction, within care and support plans, which level of medication support they are providing.

This is in order to comply with Health and Social Care Standard, "I have confidence in people because they are trained, competent and skilled, are able to reflect on their practices and follow their professional and organisational codes." (3.14)

This is also in order to comply with SS1 2011/210 4 (1) (a) 5 (2) (b) (c) 15 (b). In order to ensure that people experiencing care can be confident in the people who care and support them by 22 March 2019.

This requirement was made on 1 April 2019.

Action taken on previous requirement

We found that the service had delivered up to date training based on the Medication Policy and some competency assessments had been carried out. The administration team along with management had introduced some tools to monitor medication assessments and capacity assessment however, this tool is not being used to its full capacity and actioned taken where necessary. Also, during the inspection we did find some contradictory information in support plans and medication recording sheets therefore, we have encouraged the service to continue in their efforts to meet this requirement.

Not met

What the service has done to meet any recommendations we made at or since the last inspection

Previous recommendations

Recommendation 1

The service must provide staff with a complete and up-to-date Medication Policy and Procedure to offer clear, practical and up-to-date guidance in this area.

National Care Standards Care at Home standard 8.3 Keeping Well - Medication.

This recommendation was made on 16 February 2017.

Action taken on previous recommendation

The new medication policy and procedure in line current good practice guidance has been implemented and work is ongoing, to ensure that competency assessments are carried out to support staff in their learning and confidence and identify further training needs.

MET

Complaints

Please see Care Inspectorate website (www.careinspectorate.com) for details of complaints about the service which have been upheld.

Enforcement

No enforcement action has been taken against this care service since the last inspection.

Inspection and grading history

Date	Type	Gradings								
16 Aug 2018	Unannounced	<table border="0"> <tr> <td>Care and support</td> <td>4 - Good</td> </tr> <tr> <td>Environment</td> <td>Not assessed</td> </tr> <tr> <td>Staffing</td> <td>4 - Good</td> </tr> <tr> <td>Management and leadership</td> <td>3 - Adequate</td> </tr> </table>	Care and support	4 - Good	Environment	Not assessed	Staffing	4 - Good	Management and leadership	3 - Adequate
Care and support	4 - Good									
Environment	Not assessed									
Staffing	4 - Good									
Management and leadership	3 - Adequate									
1 Jun 2017	Unannounced	<table border="0"> <tr> <td>Care and support</td> <td>4 - Good</td> </tr> <tr> <td>Environment</td> <td>Not assessed</td> </tr> <tr> <td>Staffing</td> <td>4 - Good</td> </tr> <tr> <td>Management and leadership</td> <td>4 - Good</td> </tr> </table>	Care and support	4 - Good	Environment	Not assessed	Staffing	4 - Good	Management and leadership	4 - Good
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Management and leadership	4 - Good									
18 Aug 2016	Unannounced	<table border="0"> <tr> <td>Care and support</td> <td>3 - Adequate</td> </tr> <tr> <td>Environment</td> <td>Not assessed</td> </tr> <tr> <td>Staffing</td> <td>4 - Good</td> </tr> <tr> <td>Management and leadership</td> <td>4 - Good</td> </tr> </table>	Care and support	3 - Adequate	Environment	Not assessed	Staffing	4 - Good	Management and leadership	4 - Good
Care and support	3 - Adequate									
Environment	Not assessed									
Staffing	4 - Good									
Management and leadership	4 - Good									
10 Sep 2015	Unannounced	<table border="0"> <tr> <td>Care and support</td> <td>3 - Adequate</td> </tr> </table>	Care and support	3 - Adequate						
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Date	Type	Gradings
		Environment Not assessed Staffing 3 - Adequate Management and leadership 3 - Adequate
5 Nov 2014	Unannounced	Care and support 4 - Good Environment Not assessed Staffing 4 - Good Management and leadership 4 - Good
5 Jul 2013	Unannounced	Care and support 3 - Adequate Environment Not assessed Staffing 3 - Adequate Management and leadership 3 - Adequate
27 Jul 2012	Unannounced	Care and support 4 - Good Environment Not assessed Staffing 4 - Good Management and leadership 4 - Good
19 Nov 2010	Announced	Care and support 4 - Good Environment Not assessed Staffing Not assessed Management and leadership Not assessed
16 Dec 2009	Announced	Care and support 4 - Good Environment Not assessed Staffing 4 - Good Management and leadership 4 - Good
3 Feb 2009	Announced	Care and support 3 - Adequate Environment Not assessed Staffing 3 - Adequate Management and leadership 3 - Adequate

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