

# East Renfrewshire Council (Social Work) Housing Support Unit Housing Support Service

Barrhead Health and Care Centre  
213 Main Street  
Barrhead  
Glasgow  
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Telephone: 0141 800 7182

**Type of inspection:**

Unannounced

**Completed on:**

4 September 2019

**Service provided by:**

East Renfrewshire Council

**Service provider number:**

SP2003003372

**Service no:**

CS2003055335

## About the service

East Renfrewshire Council's Housing Support unit provides home support services to people in their own homes. At the time of this inspection, the service is supporting approximately five hundred individuals, with a further four hundred individuals receiving support from an independent home care provider. The service provides personal care and support to people of all ages and the needs of these people vary greatly, for instance, individuals with a physical or learning disability, people with long-term health conditions, older people experiencing increased frailty and individuals living with dementia.

The service is managed by a homecare team within an integrated health and social care partnership and they are split between the Barrhead Health and Care Centre and the Eastwood Health and Care Centre. At the point of inspection, there is one hundred and ninety support workers.

The vision statement of the Health and Social Care Partnership is 'working together with the people of East Renfrewshire to improve lives'. They hope to achieve this by 1) valuing what matters to people 2) building capacity with individuals and communities and 3) focusing on outcomes, not services.

The Care Inspectorate regulates care services in Scotland. Information about all care services is available on our website at [www.careinspectorate.com](http://www.careinspectorate.com). This service was previously registered with the Care Commission and transferred its registration to the Care Inspectorate on 1 April 2011.

## What people told us

We received one hundred and twenty-two completed questionnaires from service users and their families and during the inspection, we visited forty-five service users. The individual's that we spoke with, reiterated the views of service users, carers and family members that we spoke to earlier this year (February 2019). They continue to value the role of the support workers and testify to the care they receive from these workers however, some people are experiencing poor outcomes as a result of the lack of consistency/continuity of care, inaccurate assessment and care planning, poor medication practices and communication problems between service users/ support workers.

**We received a significant number of questionnaires supporting our findings, a small sample of views from service users are below:**

'Overall happy with my carer's - but feel they can be under pressure at times having a lot of extra work on them - so don't have the quality time to spend with me'

'Carers that come to [name] are great. Cannot fault them. Worth their weight in gold wish they had more time''

'All care staff are pleasant and helpful'

'The carers who come regularly to [name] are excellent. It makes such a difference when the same team comes and the client gets to know them and feels safe and comfortable in their care'

'There are many occasions when carers arrive who are not known to me, don't know what to do'

'Carers time keeping abysmal'

'Greatly appreciate the service and the care it provides, life would be more difficult without it'

'Not happy with irregular times'

'I receive excellent care and support from the staff'

'The service from the regular carers is very good. The service from the office staff needs improvement'

'Without the carers I would be unable to stay in my home and fully appreciate all the care given to me especially from my two main carers. They treat me with respect'

'The staff introduce themselves with their name but we are getting a different carer every week'

'My one constant complaint is with the fact things can change with no warning/notice'  
 'Lots of staff changes so I don't know all their names'  
 'Carer's don't read careplan'  
 'Too many different people daily and time various. Prefer a regular person!!'  
 'One of the problems of the service is that there is a lack of continuity'

## Some comments from carers and family members:

'My mother has dementia therefore consistency in her carers is important but this has not been addressed recently due to apparently staff issues'  
 'The care team have become an important part of keeping my mum well and still able to live independently at home'  
 'The carers at my mums complex are fantastic, very caring and we couldn't manage without them, however when I have a query and phone the office they don't call you back'  
 'The only problem I see is if dad's usual carers are off or moved no one from the office calls to let us know'  
 'Generally, my mother is happy with the care and support of her regular carers and also the carers who provide cover'  
 'Staff providing daily care are excellent. The administration behind this care does not provide an encompassing service, in particular staff are not always regular and visit times can vary without notice'.

## Self assessment

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

## From this inspection we graded this service as:

Quality of care and support	1 - Unsatisfactory
Quality of staffing	2 - Weak
Quality of management and leadership	1 - Unsatisfactory

## Quality of care and support

### Findings from the inspection

The service was inspected in February 2019 and the inspectors found that the service was operating in a manner that was not complying with regulations, or the health and social care standards (see previous report on [www.careinspectorate.com](http://www.careinspectorate.com)). They concluded that the welfare of those using the service was compromised due to the lack of assessment, care planning, reviewing and consultation with service users and their families. Improvements were deemed necessary across all principles of the Health and Care Standards: dignity and respect, compassion, be included, responsive care and support and wellbeing. Since then, the senior management established an improvement team and secured additional resources. The executive team continue to express their commitment to addressing the issues raised in order to deliver an improved service to the residents of East Renfrewshire. Please read *"What the service has done to meet any requirements we made at or since the last inspection"* to read our findings of the progress made since the last inspection.

We once again received a large proportion of feedback from service users and their families (please see 'What People Told Us'). People reiterated that they value the support provided from the support workers and for some this support enabled them to remain in their homes and meet personal care needs. During the inspection, we observed the support workers to be caring and compassionate and often operating within tight time constraints. However, people continue to express concerns regarding the lack of communication and lack of consistency in terms of carers and scheduled visits and the impact this has on their sense of wellbeing and safety.

## Requirements

**Number of requirements:** 0

## Recommendations

**Number of recommendations:** 0

**Grade:** 1 – unsatisfactory

## Quality of staffing

### Findings from the inspection

Please read "*What the service has done to meet any requirements we made at or since the last inspection*" to read our findings.

We sampled a number of recruitment files and it was our conclusion that the recruitment, which is managed by the HR Department, was following 'safer recruitment guidance'. The service has developed a method to manage the registration of the workforce with the Scottish Social Services Council.

During the inspection, process and from service user feedback, it is clear that the support workers are valued within the community. We observed workers demonstrating good levels of skill and providing care and support in a manner that upholds dignity and respect. However, it remains our concern that support workers are not being offered the support that they require in the community. They need to be observed in practice for competency to be assessed and support and development offered.

We remain concerned regarding the role of home care organisers and managers. Assessment, care planning and reviewing whilst managing teams of support workers are key functions of home care organisers. However, much of their time is spent crisis managing scheduling, covering staff absences and other office based duties. This does need to be fully understood and measured in order to bring about the necessary changes, that are required for meaningful and sustainable changes in service delivery.

## Requirements

**Number of requirements:** 0

## Recommendations

Number of recommendations: 0

Grade: 2 - weak

## Quality of management and leadership

### Findings from the inspection

At the last inspection, we express real concerns around the systemic failures within the organisation and the organisations capacity to improve. Since then we have had monthly updates and meetings with the senior management. The executive team have expressed their commitment to improving the service and to this end secured additional resources. We recognise the extent of the challenges that the partnership face and that there are no quick solutions.

Since the last inspection, there have been further changes in the homecare management structure and senior management have been providing regular updates to the Care Inspectorate. The review team has also been developed and this has resulted in some of the progress that we observed during the inspection. However, we remain concerned at the lack of cohesion between the review team and the home care team. Meaningful and sustainable changes can only be nurtured when the organisers are able to fulfil their roles and responsibilities as intended.

Please read *"What the service has done to meet any requirements we made at or since the last inspection"* to read our findings of the progress made since the last inspection. Whilst we found some progress had been made in some of these requirements, none have been fully met.

## Requirements

Number of requirements: 0

## Recommendations

Number of recommendations: 0

Grade: 1 - unsatisfactory

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

### Previous requirements

#### Requirement 1

The service provider must ensure that service users' personal plans set out how the health, welfare and safety needs of individuals are to be met, in order to do this the service must ensure that the personal plans:

- Accurately reflect the current health and care needs of the service user
- Include person-centred information outlining needs, abilities and preferences
- Demonstrate consultation with the service user/relative
- Include the use of appropriate risk assessment documentation which provides the outcomes of these and are used to inform support planning
- Evidence that consideration has been given to Adults With Incapacity (Scotland) Act 2000.

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(1) Personal plans.

Timescale: To commence upon receipt of this report and be completed within six months and remain ongoing thereafter.

**This requirement was made on 23 April 2018.**

#### Action taken on previous requirement

The service has made some significant progress in collating and providing essential information to service users. The majority of service users have a folder which contains a service agreement, careplan, review, the complaints procedure as well as other helpful information.

The service has introduced a new care plan which is design to capture the individuals health, welfare and safety needs. We found a number of care plans which offered some good and accurate information however, we also found inconsistencies, omissions and errors. There continues to be an absence of risk assessments to support the findings of the careplan. Careplans need to be developed to be more personalised and accurately reflect the persons current circumstances and needs whilst demonstrating that the assessment has been carried out in collaboration with the service user and their representative/s.

Staff require further training and support to enable them to deliver the standard that is required. There needs to be a system to monitor and evaluate careplans to correct misunderstandings, challenge practices and develop the skills necessary to produce accurate and personalised care plans.

It also became apparent that support workers are not reading careplans. This in part is due to the difficulty in being able to access the documents as it is not always feasible during a routine home visit, particularly when the time allocated is already tight. Support workers need to be supported to understand their role in highlighting changes in circumstances, to ensure that reviews are carried out and careplans updated.

**Not met**

## Requirement 2

Medication must be managed in a manner that protects the health and wellbeing of service users. In order to achieve this, you must ensure that a care plan is in place, which clearly states the details of the medicine to be given and that all staff involved in supporting service users to take medicines, have been trained and assessed as competent to do so.

This is 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

Timescale: To commence upon receipt of this report and be completed within six months and remain ongoing thereafter.

**This requirement was made on 23 April 2018.**

### Action taken on previous requirement

The medication practices within the service continue to be a cause for concern for peoples health and wellbeing. As a matter of priority, the medication policy needs to be implemented in order for there to be clarity across the workforce on levels of needs, storage/disposal of medication, staff practices and appropriate medication recording. We continue to find a wide range of discrepancies' in medication management.

It is essential that the service makes progress with improvements in medication management, in order to support individuals with their medication needs in a manner that complies with prescription guidelines that will lead to better health outcomes. As previously highlighted, medication needs to be properly assessed and reviewed and workers need to be trained to improve competency levels on safe medication practices and recording. The service has identified dedicated staff to support the delivery of training to the workforce.

**Not met**

## Requirement 3

The provider must ensure that personal plans are reviewed in line with legislation:

- When requested to do so by the service user or any representative
- When there is significant change in the service users health, welfare or safety needs
- At least once every six month period whilst the service user is in receipt of the service.

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 - Personal Plans.

Timescale: to commence upon receipt of this report and be completed within six months and remain ongoing thereafter.

**This requirement was made on 23 April 2018.**

### Action taken on previous requirement

Since the last inspection, the service has developed a quality review team who have been tasked with carrying out reviews and creating or updating careplans. Given the previous lack of regular reviewing activity this has

been a significant challenge for the team. We found a large number of reviews had been carried out however, there is still a great deal of work required to meet the legal requirement of reviewing:-

- When requested to do so by the service user or any representative
- When there is significant change in the service users health, welfare or safety needs
- At least once every six month period whilst the service user is in receipt of the service.

Also, we suggested to the management that reviewers should shadow runs in real time in order to accurately capture some of the presenting issues, particularly in relation to medication needs.

**Not met**

## Requirement 4

The provider must ensure that persons employed in the provision of the care service receive training, appropriate to the work they are to perform.

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 15 (a) Staffing.

Timescale for implementation: To commence upon receipt of this report and be completed within six months and remain ongoing thereafter.

**This requirement was made on 23 April 2018.**

### Action taken on previous requirement

The service has introduced a 10 day induction programme for all new employees and we heard some positive feedback regarding this training. The figures for completed training would suggest that the majority have not undertaken training in key elements of their roles for instance, medication management and personal care and support and protection awareness. There is some dementia awareness training however, this is not in line with the Dementia Framework which recommends support workers being trained at minimum to the 'skilled level'.

**Not met**

## Requirement 5

Management must provide staff supervision and appraisals in-line with the provider's policies and procedures. This is to ensure that staff employed in the service are skilful, knowledgeable and clear about their roles.

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

Timescale for implementation: To commence upon receipt of this report and be completed within six months and remain ongoing thereafter.

**This requirement was made on 23 April 2018.**

### Action taken on previous requirement

The service has introduced a new method for facilitating supervision meetings and appraisals and we spoke to some support workers who were grateful for the opportunity to meet with their home care organiser. These meetings are essential elements to address practice problems/issues, provide necessary supports and identify



and escalate issues which require further consideration. However, there is still much work to be done in terms of frequency and quality for both support workers and the organisers. The management have a responsibility to provide appropriate supervision with the organisers, offering a role model of how this can be delivered to the wider workforce.

**Not met**

## Requirement 6

The provider must ensure the service follows the guidance on notification reporting to the Care Inspectorate.

This is to comply with SSI 2002/114 Regulation 21 - Notification of death, illness and other events. Timescale for implementation: to commence upon receipt of this report.  
Improvements are necessary across all principles of the National Care Standards: dignity/respect, compassion, be included, responsive care and support and wellbeing.

**This requirement was made on 23 April 2018.**

### Action taken on previous requirement

During the inspection, we found that efforts have been made to alert everyone involved in the provision of homecare, of the importance of notifying the Care Inspectorate of certain events as outlined in the 'Records that all registered care services must keep and guidance'. We have seen an improvement in the notifications made however, during the inspection we became aware of some incidents/accidents/allegations that were not recorded appropriately internally and therefore were not then forwarded to the Care Inspectorate. In order for this requirement to be met, the service must improve their own internal procedures for recording and progressing any incidents, accidents and allegations of harm.

**Not met**

## Requirement 7

The provider must ensure that its handling of complaints is applied in accordance to the provider's procedure and good practice guidelines.

This is to meet Health and Social Care Standard 4.20 I know how and can be helped to make a complaint or raise a concern about my care and support.

This is in order to comply with SSI 2011/110 Regulation 18 Complaints  
Timescale: to commence immediately

**This requirement was made on 3 April 2019.**

## Action taken on previous requirement

An essential element for any service development is the feedback from service users and their families, when things go well and when things go wrong. We previously expressed real concerns around the culture within the service that seemed to dismiss or ignore concerns or complaints when raised by individuals. We were pleased to see that the service has taken steps to improve this such as staff training and informing individuals on the process for raising a concern or complaint. We found that service users are now being provided with the complaints procedure. We also found a number of complaints that had been logged for investigation. However, the service was unable to offer an overview of the process and timescales taken in response. We spent some time clarifying this and would expect that this is rectified without any further delay.

**Not met**

## Requirement 8

The service must ensure that planned and actual service delivery times are agreed with those receiving the service and appropriate to meet the assessed care needs.

This is to meet Health and Social Care Standard 4.14. My care and support is provided in a planned and safe way, including if there is an emergency or unexpected event.

This is to comply with SSI 2011/210 4 Welfare of Users  
Timescale: to be achieved by 31 July 2019

**This requirement was made on 3 April 2019.**

## Action taken on previous requirement

Whilst we saw some improvement in some of the allocated time provisions and travel allowances, we continue to find that some people continue to experience unreasonable time differences. This is a key area to be considered by the review team at reviews. This information should be captured by people's views and also documentation and issues highlighted to the allocated organiser to resolve.

**Not met**

## Requirement 9

The provider should ensure that they employ and deploy support staff in sufficient numbers to adequately meet the needs of service users.

Health and Social Care Standard 4.14 My care and support is provided in a planned and safe way, including if there is an emergency or unexpected event.

This is in order to comply with SSI 2011/110 Staffing.  
Timescales: To be achieved by 28th September 2019.

**This requirement was made on 3 April 2019.**

**Action taken on previous requirement**

Since the last inspection, the service has recruited a number of carers and whilst we appreciate the local and national challenges that services face in recruiting care staff, the lack of consistency is a key concern raised by service users and their families as it has a detrimental effect on their sense of dignity, safety and wellbeing in their own homes.

**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 should review the results of training in dementia awareness for staff and ensure, that proposals are in place, to increase the access of this training for staff.

National Care Standards, Care at Home, Standard 3: Your Personal Plan, Standard 7: Keeping Well Healthcare.

**This recommendation was made on 23 March 2016.**

**Action taken on previous recommendation**

There has been no progress with this recommendation.

**Complaints**

There have been no complaints upheld since the last inspection. Details of any older upheld complaints are published at [www.careinspectorate.com](http://www.careinspectorate.com).

**Enforcement**

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

## Inspection and grading history

Date	Type	Gradings
19 Mar 2019	Unannounced	Care and support Environment Staffing Management and leadership 1 - Unsatisfactory Not assessed 2 - Weak 1 - Unsatisfactory
16 Mar 2018	Unannounced	Care and support Environment Staffing Management and leadership 3 - Adequate Not assessed 3 - Adequate 3 - Adequate
27 Feb 2017	Unannounced	Care and support Environment Staffing Management and leadership 5 - Very good Not assessed Not assessed 5 - Very good
5 Feb 2016	Unannounced	Care and support Environment Staffing Management and leadership 5 - Very good Not assessed 5 - Very good 5 - Very good
9 Dec 2014	Unannounced	Care and support Environment Staffing Management and leadership 5 - Very good Not assessed 5 - Very good 5 - Very good
5 Dec 2013	Announced (short notice)	Care and support Environment Staffing Management and leadership 5 - Very good Not assessed 5 - Very good 5 - Very good
12 Dec 2012	Unannounced	Care and support Environment Staffing Management and leadership 4 - Good Not assessed 4 - Good 4 - Good
15 Dec 2010	Announced	Care and support Environment Staffing 4 - Good Not assessed Not assessed

Date	Type	Gradings	
		Management and leadership	4 - Good
18 Feb 2010	Announced	Care and support	3 - Adequate
		Environment	Not assessed
		Staffing	4 - Good
		Management and leadership	4 - Good
18 Dec 2008	Announced	Care and support	2 - Weak
		Environment	Not assessed
		Staffing	3 - Adequate
		Management and leadership	4 - Good

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