

Lochaber Day and Night Owl Service Ltd Support Service

Carn Deag House
North Road
Fort William
PH33 6PP

Telephone: 01397 700656

Type of inspection:

Announced (short notice)

Completed on:

11 December 2019

Service provided by:

Lochaber Day and Night Owl Service Ltd

Service provider number:

SP2007009469

Service no:

CS2007166457

About the service

Lochaber Day and Night Owl Service is registered to provide a support service - care at home, to adults in their own homes. The service registered with the Care Inspectorate in April 2011.

The service is based in Fort William and provides care at home to people living in the wider area of Lochaber.

The aims and objectives of the service included:

- To deliver a fast, first class service to all our clients.
- To provide high vetted care staff who are able to deliver the highest standards of care.
- To ensure that care staff deliver services to the standards laid out by the company and its regulatory bodies.
- To ensure that the service is delivered flexibly, attentively and in a non-discriminatory fashion.

What people told us

We received three completed Care Standards Questionnaires from people who used the service. We also spoke with five people by telephone and visited two people in their home as part of the inspection. There was a high rate of satisfaction in respect to the care and support received. We will include comments from the people we spoke with in the report.

Self assessment

The service had not been asked to complete a self assessment ahead of the inspection.

From this inspection we graded this service as:

Quality of care and support	4 - Good
Quality of staffing	not assessed
Quality of management and leadership	4 - Good

What the service does well

The service was performing to a good level when we considered care and support and leadership and management. There were important strengths with some areas for improvement.

People experienced stability in their care and support from staff who knew their needs, choices and wishes. This was partly due to a small staff team who had lived in the local community for a number of years, thus staff had prior knowledge of some of the people they supported.

Staff took time to talk and listen to people, thus keeping them engaged with the outside community. Our observations confirmed people being supported were relaxed with staff and there were genuine, warm relationships. Staff took the lead from the person they supported, thus were respecting their wishes and

choices. People being supported were highly satisfied with the care and support they received. Some of the comments from the individuals we spoke with included:

"All the staff are very friendly and I know them all".

"The staff are magnificent and always ask if there is anything else I need."

"The staff will do anything you ask, I have no complaints."

"Lovely girls, they are really helpful".

"They know I like a good laugh, they know me well".

There were a number of very good examples of where the provider had been proactive in seeking advice and followed guidance from external health services. This meant people's health needs were met, promoted and responded to appropriately. An external health professional told us:

"The staff provide excellent care, they really focused on building a relationship with my client and were instrumental to improving his housing situation, this has made life much better for him".

In general the service was well led and managed. Staff were committed to providing a good quality service. It was apparent a human rights, value based approach was central to the provider in the way they supported people. People and staff felt they were listened to and if they had any complaints these would be resolved.

What the service could do better

The provider had partly met the three recommendations at the previous inspection. Support plans had been further developed, staff had received supervision and the provider had begun their improvement plan. There were still areas of improvement required in respect to support plans, staff appraisals and the on-going evaluation of the service. See recommendation 1, 2 and 3 in regard to this.

A small number of people required the use of bed rails. The provider assured us they would complete "bed rail risk assessments" as a matter of urgency for all who required them. This will reduce the potential risk of injury through the use of bed rails and enhance the safety and well-being of people.

The provider was using two systems for recording daily information about the people they supported. We discussed this with the provider, as one of the systems was electronic and people being supported did not have knowledge or access to this. We would expect people to have knowledge and access to all written information about them.

We expect services to benefit from a culture of continuous improvement. The provider had quality assurance systems in place but we could not always see that actions for improvement had been progressed. The service's improvement plan needed reviewed and updated. We discussed the importance of a systematic approach to following up areas of improvement, as this way of working will improve the quality of service to people being supported.

Requirements

Number of requirements: 0

Recommendations

Number of recommendations: 3

1. Staff should be competent and professional at their job. The provider should complete their programme of appraisals for each staff member.

This is to ensure that staff competence is in line with the Health and Social Care Standards which state that: "I am confident in people because they are trained, competent and skilled, are able to reflect on their practice and follow their professional and organisational codes". (HSCS 3.14)

2. It is important that people should experience care in a planned and agreed way that meets their needs, wishes and preferences. The provider should continue developing their support plans so that they are proportionate and relevant to the individual care and support being provided.

This is to ensure the care and support planning is consistent with the Health and Social Care Standards which state that: "I am fully involved in assessing my emotional, psychological, social and physical needs at an early stage, regularly and when my needs change" (HSCS 1.12) and "My needs, as agreed in my personal plan, are fully met, and my wishes and choices are respected". (HSCS 1.23)

3. To ensure people are benefiting from a service that has a culture of improvement, the provider should continue developing and reviewing their service improvement plan.

This way of working would be consistent with the Health and Social Care Standards which states: "I benefit from a culture of continuous improvement, with the organisation having robust and transparent quality assurance processes" (HSCS 4.19) and "I experience high quality care and support based on relevant evidence, guidance and best practice". (HSCS 4.11)

Complaints

There have been no complaints upheld since the last inspection. Details of any older upheld complaints are published at www.careinspectorate.com.

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

Previous requirements

There are no outstanding requirements.

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

Previous recommendations

Recommendation 1

The provider/manager should ensure that the programme of supervision and appraisal is fully implemented/formalised.

Work should continue with this until the programme of supervision and appraisal covers all levels of staff and becomes established practice. The systems for supervision and appraisal should be linked to the training plan and supervised practice.

National Care Standards, Care at Home: Standard 4 - Management and staffing.

This recommendation was made on 28 March 2018.

Action taken on previous recommendation

There had been some progress made, we will change the recommendation to reflect this.

Recommendation 2

The manager and senior team should continue to revise and develop each service user's personal care plan. In order to do this, the manager and staff should:

- Ensure that each individual care plan details each person's needs and preferences and sets out how these will be met using a person-centred approach.
- Revisit the risk assessment tools to ensure there is a plan of care in place to help staff to manage and/or to reduce the risks identified in relation to the person and/or the environment.
- Ensure that the care plan is signed appropriately by staff and people using the service where necessary.
- Review the care plan at least at six monthly intervals, or when requested or there has been a significant change in circumstances.
- Ensure that the written plan is being effectively monitored and audited. Audits should highlight areas of poor practice and demonstrate how these have been improved.

This recommendation was made on 7 January 2019.

Action taken on previous recommendation

There had been some progress made, we will change the recommendation to reflect this.

Recommendation 3

It is recommended that management formalise their arrangements that they use to improve the service:

- Develop an improvement plan that indicates actions to be taken, by whom and when.
- Develop an audit system that looks at all aspects of the service. Audits should include any actions identified as outstanding and signed off when completed.

This recommendation was made on 7 January 2019.

Action taken on previous recommendation

There had been some improvements made, we will change our recommendation to reflect this.

Inspection and grading history

Date	Type	Gradings
29 Nov 2018	Announced (short notice)	Care and support 4 - Good Environment Not assessed Staffing 4 - Good Management and leadership Not assessed
28 Mar 2018	Announced (short notice)	Care and support 4 - Good Environment Not assessed Staffing Not assessed Management and leadership 4 - Good
16 Mar 2017	Announced (short notice)	Care and support 4 - Good Environment Not assessed Staffing 4 - Good Management and leadership Not assessed
30 Mar 2016	Unannounced	Care and support 4 - Good Environment Not assessed Staffing 4 - Good Management and leadership 4 - Good
31 Mar 2015	Unannounced	Care and support 4 - Good Environment Not assessed Staffing 4 - Good Management and leadership 4 - Good

Date	Type	Gradings	
20 Mar 2014	Announced (short notice)	Care and support Environment Staffing Management and leadership	3 - Adequate Not assessed 3 - Adequate 3 - Adequate
6 Mar 2013	Announced (short notice)	Care and support Environment Staffing Management and leadership	4 - Good Not assessed 4 - Good 3 - Adequate
12 Mar 2012	Re-grade	Care and support Environment Staffing Management and leadership	Not assessed Not assessed Not assessed 3 - Adequate
27 Feb 2012	Re-grade	Care and support Environment Staffing Management and leadership	Not assessed Not assessed Not assessed 1 - Unsatisfactory
26 Aug 2011	Announced (short notice)	Care and support Environment Staffing Management and leadership	4 - Good Not assessed 4 - Good 3 - Adequate

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