

Crossroads Caring Scotland - Stewartry/Mid and Upper Nithsdale Support Service

Townhead
Sanquhar
DG4 6DA

Telephone: 01659 50005

Type of inspection:

Unannounced

Completed on:

6 February 2020

Service provided by:

Crossroads Caring Scotland

Service provider number:

SP2007008963

Service no:

CS2014332238

About the service

The service Crossroads Caring Scotland - Stewartry/Mid and Upper Nithsdale is registered to provide a service to the following groups of people living in their own homes and in the community; frail elderly and people with physical/mental disability, people with mental health problems and in addition support may be offered to children who have additional needs, which are not age related, and their parents.

The service provider is Crossroads Caring Scotland.

The support is offered to people living within Stewartry and mid and Upper Nithsdale and is provided by two staff teams operating within Sanquhar and Dalbeattie.

Their aims are 'to relieve stress on the persons or families caring for the elderly or people with physical, mental or sensory impairment; and to care in appropriate circumstances for the elderly or people with physical, mental or sensory impairment who are living alone'.

Their core values are to 'commit to treating carers and people with care needs with respect and sensitivity, recognising the dignity and values of each person for whom a service is provided. Continuity will be maintained at all times'.

During the inspection, there were 136 service users using the service with a minimum age of 13 years old and a maximum age of 98 years old. Support packages ranged from 15 minutes to 12-hour overnight sleepovers.

What people told us

During the inspection we received the views of 34 service users and 17 relatives who were all very happy with the quality of care and support they received from the service.

Service users and relatives were extremely complimentary about the staff team who they found to have lovely values and were: friendly, approachable hardworking, caring and fun. Working in partnership with everyone involved in the individuals care to ensure their needs were met to a good standard. Everyone felt involved in their care planning and enjoyed flexibility within support times to meet their changing needs.

Although service users received their allocated support they told us they were not always informed when carers were running late. Some people told us that the organisational aspects could do with some attention, and there needed to be more authority at the top. They told us communication from office to clients and carers was not as good as previously and staff seemed to be rushing a lot in between care (see management and leadership, what the service could do better).

We received the following comments:

"Excellent service. I like all the carers because we enjoy a joke".

"Individual carers are excellent".

"They are a lifeline. I don't know what I'd do without them".

"High praise to the carers, they are excellent".

"Carers and office staff are an absolute credit to the company".

"Crossroads give my relative quality of life as he decides whether he feels like getting up or not".

"The staff are great, They are friendly and helpful. The majority of carers go out of their way to help in any way they can".

"I am very appreciative of everything that is done to help me. I realise just how lucky we are when our independence has been taken away from us".

"The Crossroads team of carers do care and do work hard. They are clean and friendly, respecting privacy both of myself and my house".

"I feel sorry for the carers, they are constantly clock watching...they are constantly rushing then have to clock in and out when they leave".

"Any mistakes that have been made seem to be made by the office and not the actual carers".

"The system seems to breakdown with their scheduling and office communication does not always get through to them ie if someone is in hospital, if someone has cancelled a visit and house alarm is on".

Self assessment

The service had not been asked to complete a self-assessment in advance of the inspection. We looked at their own improvement plan and quality assurance paperwork. These demonstrated their priorities for development and how they were monitoring of the quality of the provision within the service.

From this inspection we graded this service as:

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

Quality of care and support

Findings from the inspection

Service users and relatives continued to be very happy with the quality of care and support they received from this service. They were accepted as individuals and treated with dignity and respect.

Service users experienced a good level of care and support from staff, who believed in their potential and recognised they were experts in their own experiences needs and wishes. Ensuring their needs were met to a good standard.

People were getting the most out of life because the staff supporting them had a caring, fun and enabling attitude. People felt at ease, safe and comfortable in their own homes.

Service users told us carers knew their needs and how they liked things to be done and were flexible in their approach to their changing needs on a daily basis.

Individuals had control over their health and wellbeing and were encouraged to remain independent using various specialist equipment. This allowed them to remain in home for as long as possible.

Service users health and wellbeing was reviewed and monitored with input from service users and relatives and other members of the multi-disciplinary team such as GP, social workers and community nurses. Any mental and physical health concerns were timeously addressed and monitored by the staff team.

As discussed in previous area for improvement care plans were varied in their content and although they were being reviewed they had not been updated or completed for all service users. They lacked some information regarding legal guardians and wishes regarding anticipatory care planning and resuscitation. (See area for improvement 1).

Although there was a very good system in place to collect and monitor and return service users medications and they were administered following best practice guidance this was not always followed to: appropriately record 'As and when' medications and prescribed topical creams. Signatures and dates were missing from some records within the Medication Administration Recording Sheets making it difficult to ascertain who had made the changes and why. Staff did not always have a good basic knowledge and understanding of service users medications and why they had been prescribed. (See area for improvement 2).

Requirements

Number of requirements: 0

Recommendations

Number of recommendations: 2

1. Care plans should be written in a personalised and outcome focused way. A one page profile about who the person is would be meaningful to the reader and offer staff a brief description of the individual in their own right. Furthermore, the service should review the personal plan:

- when requested to do so by the service user or any representative;
- when there is a significant change in a service user's health, welfare or safety needs;

and

- at least once in every six month period whilst the service user is in receipt of the service.

The Social Care and Social Work Improvement Scotland (Regulations For Care) 5(b).

Health and Care Standards which state: 'My personal plan (sometimes referred to as a care plan) is right for me because it sets out how my needs will be met, as well as my wishes and choice'. (HSCS 1.13)

and

'My future care and support needs are anticipated as part of my assessment'. (HSCS 1.14).

We signposted the service manager to the following guidance: <https://ihub.scot/project-toolkits/anticipatory-care-planning-toolkit/anticipatory-care-planning-toolkit/documents/>

2. The service manager should ensure that staff follow best practice when administering and recording of all prescribed medications.

Health and Social Care Standards, My support my life;

1 I experience high quality care and support that is right for me.

1.24 Any treatment or intervention that I experience is safe and effective.

2 I am fully involved in all decisions about my care and support.

2.23 If I need help with my medication I am able to have as much control as possible.

3 I have confidence in the people who support and care for me.

3.14 I have confidence in people because they are trained, competent and skilled, are able to reflect on their own practice and follow their professional and organisational codes.

Grade: 4 – good

Quality of staffing

Findings from the inspection

Service users and relatives had confidence in the people who were supporting them. Staff worked from a good solid value base of kindness and caring, where they recognised and valued everyone as a unique individual. They worked together with service users and their relatives in a way which was sensitive to their needs whilst assisting them to use their skills and abilities to maintain their independence.

As a result of this, trusting relationships were being built-in a way that service users and relatives were comfortable with.

Staff worked to a good standard to ensure service users needs were met following best practice and legislation when attending to their various needs such as: personal care, food hygiene, moving and handling, attending to any accidents and emergencies and concerns regarding individuals safety.

Service users needs were met overall by the right number of people who had time to speak with them and respond promptly when they needed extra help. However, there had been some occasions when staff had appeared busy and rushed due to staffing issues in some areas which the service manager agreed to review as part of her quality assurance processes.

(See areas for improvement, quality of staffing and quality of management and leadership).

Staff were given opportunities to access internal promotions following safer recruitment. We encouraged the management team to record information in recruitment records where judgements have been made regarding references and previous work history.

Staff continued to attend and complete various online and classroom based training which was being updated to ensure they maintained their skills in areas such as: first aid, food hygiene, moving and handling, administering of medication and adult support and protection.

However, staff had not been supported to keep up-to-date with various training such as: Epilepsy, Buccal Midazolam, catheter care, how to support service users experiencing a 'fit' and child support and protection.

Care staff continued to undergo various stages of dementia training, however it was not clear which staff had completed which level of training appropriate to their role in accordance with the Promoting Excellence framework.

(See area for improvement 1).

Supervisions were taking place for staff. Information discussed and recorded was basic and summarised and did not consider reflection and evaluation of work carried out in relation to the Health and Social Care Standards, Scottish Social Services Council, Codes of Conduct and service aims and objectives. Learning and development plans needed completed for all staff to include their individual development needs as well as training events to attend.

(See area for improvement 2).

Although care staff were supporting service users to attend private events using their own cars, policies and procedures for routinely checking car insurance and maintenance had not been followed and updated.

(See area for improvement 3).

Requirements

Number of requirements: 0

Recommendations

Number of recommendations: 3

1. The service manager should ensure that all staff undergo all training needed to enable them to support service users with various care needs as mentioned within this report, including epilepsy, child support and protection and various levels of dementia training appropriate to their role in accordance with the Promoting Excellence framework.

Health and Social Care Standards, My support My life;

4: I have confidence in the organisation providing my care and support wellbeing.

4.27 I experience high quality care and support because people have the necessary information and resources.

We signposted the service manager to the following guidance: www.ssks.org.uk

Social Services Knowledge Scotland/Dementia Promoting Excellence.

2. The service manager should ensure that all staff have the skills and competences to carry out all tasks required in line with best practice.

This should include:

- Structured and detailed staff supervision and appraisal, including review and evaluation of issues discussed and action plans.
- Detailed learning and development plans, including training evaluations to assess individual staff competencies in all areas and how the training will inform staff practice.
- Completion of training evaluations to show reflective learning and how the training has informed and changed staff practice.

Health and Social Care Standards, My support My life;

4: I have confidence in the organisation providing my care and support wellbeing.

4.27 I experience high quality care and support because people have the necessary information and resources.

3. In order to ensure service users care and support is planned in a safe way the service manager should ensure routine checks of car safety are carried out for those staff supporting service users in their own cars.

Health and Social Care Standards, my support my life;

3.14 I have confidence in people because they are trained, competent and skilled, are able to reflect on their practice and follow their professional and organisational codes.

4: I have confidence in the organisation providing my care and support.

Grade: 4 - good

Quality of management and leadership

Findings from the inspection

Since the last inspection a new service manager had been appointed to the service which had also become part of Crossroads Caring Scotland. This had meant changes within the management team which included staff working from the organisations Glasgow office following their policies and procedures and adopting their processes and ways of working.

Although overall service delivery was good and individuals care and support was provided and planned in a safe way, including any emergencies and unplanned events, some service users and relatives felt there had been some disruption to their care and support times as a result of this.

Although the majority of service users and relatives were aware of the new management team and found the staff in the Dalbeattie and Sanquhar offices approachable, helpful and accessible, and praised them for their hard work and caring approach, a small number of people expressed their concerns around how the service was being managed with lack of communication between office and care staff.

The service manager had received good support from the management team who together had introduced a quality assistance system to help her monitor and evaluate service delivery and ensure individuals needs were met.

The management team were carrying out a review of recent changes within the staff team. We encouraged them to include service users and relatives in this review for feedback and evaluation as part of their quality assurance processes.

Some people did not know how to and had not been helped to make a complaint when they had expressed some concerns regarding staffing levels and timings of support. Issues had not been fully discussed and satisfactorily addressed as a result of this.

(See area for improvement 1).

Although there was a good quality assurance system in place, this needed fully completed to include all aspects of service delivery which will need routinely reviewed and evaluated:

The service action plan needed extended to include all aspects of service delivery with detailed actions and time scales for completion.

Routine audits had yet to take place for all aspects of service delivery including medication, care plan, accidents and incidents, notifications, complaints and finance audits.

Office systems and support times needed reviewed and evaluated to consider feedback gained from service users regarding their concerns mentioned at the start of this report, and consider how they can receive feedback from their views expressed from annual questionnaires, spot checks and reviews.
(See area for improvement 2).

As discussed in previous areas for improvement although notifications in general were being satisfactorily submitted, there were some outstanding notifications due for completion, update and submission.
(See area for improvement 3).

Requirements

Number of requirements: 0

Recommendations

Number of recommendations: 3

1. The service manager should ensure that all service users, relatives and staff are aware of the service complaints procedure and are encouraged and supported to access this whenever they have any concerns and complaints regarding service delivery.

Health and Social Care Standards, my support my life;

4: I have confidence in the organisation providing my care and support.

4.1 My human rights are central to the organisations that support and care for me.

4.20 I know how and can be helped to make a complaint or raise a concern about my care and support.

2. In order to ensure that service users continue to experience good quality care and support and benefit from a culture of continuous improvement the service manager should ensure that they have robust and transparent quality assurances processes and a detailed action plan which are routinely reviewed and evaluated making sure service users are protected from harm and neglect. The service manager should prioritise the areas mentioned within this report.

Health and Social Care Standards, My support my life;

3: I have confidence in the people who support and care for me.

3.20 I am protected from harm, neglect, abuse, bullying and exploitation by people who have a clear understanding of their responsibilities.

4: I have confidence in the organisation providing my care and support.

4.19 I benefit from a culture of continuous improvement, with the organisation having robust and transparent quality assurance processes.

4.23 I use a service and organisation which are well led and managed.

3. In order to ensure that service users continue to experience good quality care and support and benefit from a culture of continuous improvement the service manager should ensure that they have robust and transparent

quality assurance processes and a detailed action plan which are routinely reviewed and evaluated making sure service users are protected from harm and neglect. The service manager should prioritise the areas mentioned within this report.

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4: I have confidence in the organisation providing my care and support.

4.19 I benefit from a culture of continuous improvement, with the organisation having robust and transparent quality assurance processes.

4.23 I use a service and organisation which are well led and managed.

Grade: 4 - good

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

Previous requirements

Requirement 1

By 31 March 2019, the manager must ensure that quality assurance systems in place are used and completed to ensure the health, safety and welfare of people experiencing care are maintained and protected.

These should include:

- care plan audits
- supervision audits
- medication records
- people's finance records
- staff engagement with people experiencing care and respite.

The Social Care and Social Work Improvement Scotland (Regulations for Care) 4-(1) (a)
'A provider must make proper provision for the health, welfare and safety of service users'.

This requirement was made on 10 December 2018.

Action taken on previous requirement

The management team had worked together to compile a good quality assurance system which was being used to review and update various aspects of service delivery. This included the use of an electronic system to record and report on things such as: personal plans, six monthly reviews, staff training and supervision and appraisals and spot checks.

They now had a basic improvement plan to record outstanding actions to complete.

The service manager was meeting regularly with the director of operations to discuss and review her role and responsibilities as new manager. There had been changes made within the office staff team and electronic systems including working within the local authority CM2000 system, recording and reporting on staff whereabouts and allotted time spent during visits.

Although we were confident that this requirement had been met and there was a good quality assurance system in place, this needed fully completed to include all aspects of service delivery which will need routinely reviewed and evaluated.

(See areas for improvement management and leadership).

This requirement is: met.

Met - outwith timescales

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

Previous recommendations

Recommendation 1

Care plans should be written in a personalised and outcome focussed way. A one page profile about who the person is would be meaningful to the reader and offer staff a brief description of the individual in their own right. Furthermore, the service should review the personal plan:

- when requested to do so by the service user or any representative
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and

- at least once in every six month period whilst the service user is in receipt of the service.

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and

'My future care and support needs are anticipated as part of my assessment'. (HSCS 1.14)

This recommendation was made on 10 December 2018.

Action taken on previous recommendation

Personal plans continued to be under review with changes made to their standardised format asking for more personalised information. They were in various stages of completion.

Care plans did not always record up-to-date information regarding individuals risk assessments and current care needs or best practice.

Although there was now a matrix in place to record when six monthly reviews were due and had taken place, these had not been started or completed for many service users.

The service manager agreed to prioritise this area for improvement and complete all care plans and six monthly reviews by 6th August 2020

This area for improvement is: not met and will be re-stated.

Recommendation 2

We advised the service about their duty to notify as required in the guidance paper 'Records that all registered care services (except childminding) must keep and guidance on notification'.

Health and Social Care Standards which state: 'I benefit from different organisations working together and sharing information about me promptly, where appropriate, and I understand how my privacy and confidentiality are respected'. (HSCS 4.18)

This recommendation was made on 10 December 2018.

Action taken on previous recommendation

Since the last inspection we have received notifications from the service manager regarding various incidents as expected. However, information received has not always been fully completed and updated.

We discussed the importance of these notifiable events with the service manager at great length during the inspection, and although we were confident that she had a better understanding of her accountability within this process we were aware there remained some outstanding notifications found during inspection.

The service manager agreed to have these completed and submitted by Wednesday 12th February 2020.

We will continue to monitor outstanding updates.

This area for improvement is: not met.

See re-stated area for improvement, quality of management and leadership.

Complaints

There have been no complaints upheld since the last inspection. Details of any older upheld complaints are published at 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	
10 Dec 2018	Unannounced	Care and support Environment Staffing Management and leadership	4 - Good Not assessed Not assessed 3 - Adequate
28 Mar 2018	Announced (short notice)	Care and support Environment Staffing Management and leadership	5 - Very good Not assessed 5 - Very good 5 - Very good
14 Mar 2017	Announced (short notice)	Care and support Environment Staffing Management and leadership	4 - Good Not assessed Not assessed 3 - Adequate
31 Mar 2016	Unannounced	Care and support Environment Staffing Management and leadership	4 - Good Not assessed 4 - Good 4 - Good

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