

Hamilton Home Care Service Housing Support Service

Social Work Resources Brandon Gate 1 Leechlee Road Hamilton ML3 OXB

Telephone: 0303 123 1008

Type of inspection: Unannounced

Completed on: 17 February 2020

Service provided by: South Lanarkshire Council

Service no: CS2004073570 Service provider number: SP2003003481



About the service we inspected

This service registered with the Care Inspectorate on 27 August 2004.

The service is provided by South Lanarkshire Council and is registered to provide people with additional support needs in their own homes and in the community. The service operates 7 days per week, 365 days of the year to those living in the Hamilton area of South Lanarkshire.

The providers statement of aims and objectives is:

"The aim of our service is to provide care and support in a way that promotes the wellbeing, dignity, privacy, respect and personal choices of service users which enables them to remain as independent as possible in their own home with our support and the support of our partners".

The service also supports the out of hours community alarm service, which operates 24 hours a day 365 days per year.

An improvement notice was issued to the service on 17 December following the Care Inspectorate's inspection in December 2019. At this inspection we identified concerns for the health, welfare and safety of service users and the operation of the service by the provider. The purpose of this inspection was to follow up on the requirements made within the improvement notice.

How we inspected the service

To carry out the inspection we spoke to people who receive care and their families in their own homes. We spoke to staff working in the service and met with the new management team. We looked at a wide range of evidence and measured the progress the service had made to meeting the requirements in the improvement notice.

Taking the views of people using the service into account

The people we met spoke positively about the care they receive from their regular carers. They shared that the communication from those based in the office still requires to be improved.

People were not aware that they should be involved in their assessments and that care plans should be developed with them that detail the support they require from staff and that this should be regularly reviewed.

Taking carers' views into account

Family members spoke positively about the regular carers who look after their loved ones. Some carers raised specific areas of practice they were concerned about and we ensured this feedback was given to the management team. Carers were not aware that they or their loved ones should be involved in assessment and care planning to ensure needs are met by staff.

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

Previous requirements

Requirement 1

By 31 January 2020, in order to improve the leadership and management of the service you must:

a) ensure that those who are responsible for managing and leading this service have the skills, knowledge and experience necessary to do so, and for Hamilton Home Care Service

b) introduce additional leadership and management resources into the service until the managers responsible for undertaking management roles are fit to do so.

This is in order to comply with Regulations 7(2)(c) and 9(2)(b) of The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/210)

This requirement was made on 17 December 2019.

Action taken on previous requirement

In January 2020 additional management support was provided to the service in the form of experienced managers from other service areas within South Lanarkshire Council to support improvement in the service.

A new experienced manager has been put in place to lead the service who has the appropriate skills and knowledge. The support of the other external experienced managers has continued, and we have been assured that this will remain in place for as long as is needed to improve outcomes for people who receive care from the service.

Met - within timescales

Requirement 2

By 31 January 2020, in order to protect the health, welfare and safety of those who use the service you must:

a) ensure that all staff are able to identify when a person who uses the service may be at risk from actual or potential harm or abuse,

b) ensure that all staff are aware of when and how to report and escalate such concerns including to appropriate authorities,

c) ensure that appropriate action is taken in response to the concerns raised to keep the person involved safe, and

d) ensure that all staff are fully aware of and compliant with your Adult Support and Protection policy and procedures.

This is in order to comply with Regulations 3, 4(1)(a) and 9(2)(b) of The Social Care and Social Work Improvement Scotland (Requirement for Care Services) Regulations 2011 (SSI 2011/210)

This requirement was made on 17 December 2019.

Action taken on previous requirement

The provider had informed us that a robust action plan was in place to address this requirement. However, we found the action plan not to address fully the requirement set above or to have clear details of action to taken, by whom, when and how the provider would know the action had been met.

Adult Support and Protection training had been organised however the timeline for completing this ran into April 2020 which was beyond the timescale for meeting this requirement. It also did not evidence that the provider had taken account of the timescales in the improvement notice and the urgent need to improve staff practice. The volume of staff who had undertaken this training since December 2019 was very low and there was a lack of management oversight. We were concerned about the lack of urgency evident in the planning of these sessions.

In order to improve practice, it is essential that staff are given the opportunity to meet and discuss practice, have reflective professional discussions and good role modelling from management. We found that there had been very few opportunities for this with low attendance at meetings, contradictory messages from management to staff about attending training and a lack of role modelling from front line supervisors/managers.

The provider had not used examples of practice to support staff learning which was a missed opportunity for staff to reflect and understand what was being asked of them. This resulted in staff still unclear on adult support and protection guidance, practice and what to report about people who use the service which left people at risk.

We saw evidence of home care support workers reporting concerns and that frontline supervisors and managers had not always responded appropriately or effectively. This had resulted in service users who were known to be at risk being left in vulnerable situations without appropriate supports being put into place to keep them safe.

We raised adult support and protection concerns following the inspection completed in December 2019. We raised further concerns during this inspection.

The provider provided a copy of an Adult Support and Protection Protocol written by senior management following the last inspection. This required to be developed further as it did not evidence an understanding by management of adult protection nor of the needs of the home care staff. It did not give good examples of what to report as adult protection and when we read this, we could see why care staff were not clear about when to report adult protection concerns. It is important that the provider has a clear policy that is relevant to the service provision and the work that care staff undertake in home care. This will ensure that people are clear on adult protection reporting and protect people who use the service.

We saw two short guides containing simple but useful information that had been posted to all home care support workers in January 2020. This provided good information to staff. However, we would have liked to have seen this discussed with staff to support their understanding of adult protection.

The new management team informed us that professional development discussions had started during the week of the inspection with all office-based staff. The purpose of these was to identify individual and team

learning needs, including Adult Support and Protection. We were confident that they understood how best to undertake the development work required.

We concluded that in the short time the new management team has been in place the practices being undertaken by them have been competent, safe and effective. We expect to see that these practices are shared and embedded within the role of the care service coordinator.

The timescale for this requirement has been extended to 31 May 2020.

Not met

Requirement 3

By 31 January 2020, in order to protect the health, welfare and safety of those who have complex needs and may therefore be more vulnerable and/or at risk, you must:

a) complete an exercise to identify who those people are,

b) carry out a comprehensive care review that includes a full assessment of care needs in order to devise a detailed support plan and relevant risk assessments. This should involve consultation with the person using the service and/or their representative,

c) involve other professionals if necessary,

d) ensure that the support plans and risk assessments are read and used by staff to provide safe and effective care, and

e) ensure that those staff allocated to undertake the above assessments and reviews have the skills, knowledge and experience necessary to do so.

This is in order to comply with Regulations 3, 4(1)(a), 5(1), 5(2)(a), 5(2)(b) and 9(2)(b) of The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/210)

This requirement was made on 17 December 2019.

Action taken on previous requirement

During the inspection we reviewed the activity that had been undertaken to identify the service users who would be considered to have complex care needs. The provider had informed us that they had a list of people at risk and action taken but when we asked for this at inspection it was not available. The provider had not recorded who was deemed at risk, action taken, by whom and assured themselves that people were safe. The approach taken appeared chaotic and disorganised. This has left service users at risk of receiving care that does not meet their needs.

We saw evidence of good reviews being carried out by those with named social workers and this information was of a good quality. However, this updated information had not been used by the service to ensure that needs were being met.

The management team were in the process of gathering information into a detailed report. It was agreed that the service did not have a clear insight, overview or knowledge of the needs of all the service users they

were supporting. This had led to home care support workers continuing to be poorly informed about service users' needs, wishes and risks.

During the home visits we found further evidence of the service's failure to identify, prioritise and effectively assess the needs of those who had complex needs. We found that some continued to have no care plans or risk assessments and others had insufficient information recorded. For others we visited we found that the service did not have a full knowledge of their care needs or associated risks. In some of these cases home visits had been completed by home care staff however they failed to carry out competent assessments and/ or risk assessments. We reported concerns and/or protection issues for 11 of the 12 people we visited during the inspection. We provided detailed feedback to the provider and management of the service and asked them to take a range of actions to ensure people were safe. We have been assured this has been done.

Training focussed on assessment, care planning and risk assessment had been provided and we heard from some of those who had completed these sessions that they were beneficial. We remain concerned about the competency of the staff team responsible for undertaking care assessments, plans, reviews and risk assessments. It was agreed that more training and mentoring is required before those who should be undertaking these activities could be allocated the responsibility to do so.

We were pleased to see that the provider had identified experienced staff from other service areas to support the service to undertake reviews, assessment and risk assessments. We viewed this as a positive support. We were concerned about some of the resistance to their involvement from the current staff team which was evident during the inspection. It was reassuring that the management team were actively planning how to bring the whole team together to achieve the developments required. It was agreed that this joint working between the permanent and external supporting staff is imperative to improve practices in a way which will achieve sustainable long-term improvements.

We sampled some of the newly written support plans and found that these were of a better quality than what was previously being produced. A system of auditing had been implemented to ensure that this was the case. The time to complete audits had been extensive, in some cases between six and ten weeks. We have advised that this is too long for a completed support plan and risk assessments to be shared with the service user, families and front-line staff. This was agreed by the management team. We discussed their plan to reduce the time this is taking to ensure front line staff have the up to date information required to care for people safely and effectively.

We have discussed with the provider and senior management team the need to have sufficient levels of resource and skill in the team to enable the level of work required to be achieved. Assurances were given that the support required would be made available and would be in place until the required improvements were both achieved and sustainable.

The timescale for this requirement has been extended to 31 March 2020.

Not met

Requirement 4

By 28 February 2020, in order to protect the health, welfare and safety of those who use the service you must ensure that reviews, risk assessments and support plans:

(a) accurately reflect the current health and care needs of the service user,

(b) include person-centred information outlining needs, abilities and preferences,

(c) demonstrate meaningful consultation with the person who uses the service and/or their representative,

(d) accurately reflect risks that have been identified, the assessment of these and steps to be taken to reduce and/or mitigate the risks,

(e) accurately reflect the level of support required to manage medications and medication recordings (which must comply with your medicine management policy), and

(f) ensure that those staff allocated to undertake the above assessments and reviews have the skills, knowledge and experience necessary to do so.

This is in order to comply with Regulations 3, 4(1)(a), 5(1), 5(2)(a), 5(2)(b) and 9(2)(b) of The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/210)

This requirement was made on 17 December 2019.

Action taken on previous requirement

The decision has been taken to extend the timescale for this requirement as a result of the findings recorded under requirement 3 detailed above. The priority must be the care of people receiving the service and that they are receiving care and support that meets their needs.

The timescale for this requirement has been extended to 31 May 2020.

Not met

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

Previous recommendations

There are no outstanding recommendations.

Complaints

The Care Inspectorate has upheld one complaint since the last inspection, this was about the continuity of care staff, the management of medication and the support needs of service users not being met.

Enforcement

The service is currently subject to an Improvement Notice.

Inspection and grading history

Date	Туре	Gradings	
4 Dec 2019	Unannounced	Care and support Environment Staffing Management and leadership	1 - Unsatisfactory Not assessed 1 - Unsatisfactory 1 - Unsatisfactory
18 Mar 2019	Unannounced	Care and support Environment Staffing Management and leadership	1 - Unsatisfactory Not assessed 2 - Weak 1 - Unsatisfactory
21 May 2018	Unannounced	Care and support Environment Staffing Management and leadership	2 - Weak Not assessed 3 - Adequate 2 - Weak
11 Aug 2017	Unannounced	Care and support Environment Staffing Management and leadership	2 - Weak Not assessed 3 - Adequate 2 - Weak
29 Jul 2016	Unannounced	Care and support Environment Staffing Management and leadership	4 - Good Not assessed 4 - Good 4 - Good
24 Aug 2015	Unannounced	Care and support Environment Staffing Management and leadership	2 - Weak Not assessed 4 - Good 3 - Adequate
9 Feb 2015	Unannounced	Care and support Environment	2 - Weak Not assessed

Inspection report

Date	Туре	Gradings	
		Staffing Management and leadership	3 - Adequate 3 - Adequate
28 Mar 2014	Unannounced	Care and support Environment Staffing Management and leadership	3 - Adequate Not assessed 5 - Very good 3 - Adequate
29 Mar 2013	Announced (short notice)	Care and support Environment Staffing Management and leadership	4 - Good Not assessed 5 - Very good 5 - Very good
23 Feb 2012	Unannounced	Care and support Environment Staffing Management and leadership	4 - Good Not assessed 5 - Very good 5 - Very good
17 Dec 2010	Announced	Care and support Environment Staffing Management and leadership	5 - Very good Not assessed Not assessed 5 - Very good
11 Nov 2009	Announced	Care and support Environment Staffing Management and leadership	4 - Good Not assessed 4 - Good 4 - Good
4 Feb 2009	Announced	Care and support Environment Staffing Management and leadership	5 - Very good Not assessed 5 - Very good 4 - Good

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Care Inspectorate Compass House 11 Riverside Drive Dundee DD1 4NY

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