

# Hamilton Home Care Service Housing Support Service

Social Work Resources  
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Announced (short notice)

**Completed on:**  
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**Service provided by:**  
South Lanarkshire Council

**Service provider number:**  
SP2003003481

**Service no:**  
CS2004073570

## About the service

The provider for this registered service is South Lanarkshire Health and Social Care Partnership (HSCP).

The service provides care at home and housing support for adults and older people in the Hamilton area of South Lanarkshire. At the time of this inspection 284 people were receiving support.

People receive a service in their own homes on a daily basis. This can be several visits per day and 365 days a year. The aim of the support is to help people stay well, maintain their independence and continue to live at home.

## What people told us

Due to Covid 19 restrictions we were unable to visit people at home to gather their views. As an alternative, we carried out telephone interviews with a number of people using the service, their carers, relatives and representatives.

Comments we received included:

'[the carers] are very good with my [relative] and help [them] get up every morning.'

'I can rely on the carers and I get the right help.'

'I've had care for a long time, they listen to me.'

'I had regular staff but the staff have changed now, and I haven't had regular carers, I don't know who is coming in.'

'I don't like when they change the carers and that's been happening more often.'

'I had more visits when I came home from hospital and I'm just trying to get to the next stage to do things myself.'

'There have been a lot of changes but mostly they come at the right times.'

'It was going well till the new phone system was put in place. Since then its been far from ideal. When we had the regular carers it was fine.'

'The staff are lovely all considerations are observed.'

'Everything is good, really good personal assistance, I couldn't do it myself.'

'I have a good routine and have had the same carers for 4 years.'

## From this inspection we evaluated this service as:

In evaluating quality, we use a six point scale where 1 is unsatisfactory and 6 is excellent

How well do we support people's wellbeing?	3 - Adequate
How good is our care and support during the COVID-19 pandemic?	3 - Adequate

Further details on the particular areas inspected are provided at the end of this report.

### How well do we support people's wellbeing?

**3 - Adequate**

The people we spoke to told us that they had good relationships with staff. Some had received support from the same staff over many years and felt comfortable and well supported by them. People described respectful relationships where they were listened to and supported to keep well.

People told us staff made efforts to get to know them and how they preferred their care to be provided. They told us there was good communication with the service and requests were dealt with promptly. This gave them trust that their opinions were valued and welcomed.

Some people told us that there had been some changes to their visit times and staff recently and they were unhappy about this. We found that a new system had been introduced in an effort to improve consistency, however it was taking time to resolve any issues. We were pleased that the management team were making efforts to accommodate people's preferences.

The people we spoke to told us they had personal plans in their homes. We sampled a number of plans at the office and saw good, personalised information reflecting people's preferences and the outcomes they wanted to achieve. This included goals like improving mobility, getting out and about and seeing friends again.

We found that staff teams were working together to help people stay well and improve their quality of life. People told us they had mobility equipment, use of technology (alarms and sensors) and therapy to improve mobility and regain movement. We were also pleased to see that staff were provided with training for specific conditions to ensure people received the right support.

We had some minor concerns regarding medication practice at the service. A management audit highlighted issues with staff practice and how medication information was collected and analysed. This could mean that errors are not clearly identified and addressed. In order to improve practice, we made this an area for improvement for the service to address (see area for improvement 1).

Whilst we found evidence that changes in people's health and wellbeing were identified and recorded, we found that a small number of reviews were overdue. This meant that changes in some people's circumstances may not have been identified and they would not receive the right support. The management team were taking action to address this but to ensure no one was missed we made this an area for improvement for the service to address (see area for improvement 2).

## Areas for improvement

1. The provider should ensure that people receive their medication in accordance with prescribing instructions.

In order to achieve this the provider should:

- a). ensure staff receive medication training.
- b). have a record of errors available with details of actions taken to address practice issues.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that: Any treatment or intervention that I experience is safe and effective (HSCS 1.24).

2. The provider should ensure that people are receiving the right level of support for their needs.

In order to achieve this the provider should:

Review people's care on request, when needs change and at least once every six months.

This ensures care and support is consistent with the Health and Social Care Standards (HSCS) which state: I am fully involved in developing and reviewing my personal plan, which is always available to me (HSCS 2.17).

## How good is our care and support during the COVID-19 pandemic?

### 3 - Adequate

We found that the service had introduced a range of measures to keep people safe from Covid 19. The service adapted to new ways of working by using video calls, telephone, emails and newsletters to keep people up to date with changes and information about their care.

The service had adequate staffing throughout the pandemic and teams worked in small geographical areas to limit risk of transmission between people's homes. A Covid 19 team was set up to effectively manage suspected or confirmed cases. Staff were being tested weekly and this provided reassurance about safe practice during the pandemic.

When we interviewed staff, they informed us they had been provided with an adequate stock of PPE throughout the pandemic and were able to describe how to put on, remove and dispose of used equipment safely. This contributed to keeping people safe from transmission of the virus when they were receiving care.

Staff told us they received training throughout the pandemic however we found that only a small proportion had completed infection prevention and control training. Whilst this training was planned earlier this year, it was delayed due to Covid 19 restrictions. Infection prevention and control training is key to ensuring safe practice when staff are providing care to people in the community. We made this an area for improvement for the service to address (see area for improvement 1).

To check that staff were wearing PPE correctly and following infection control guidance the management team should have been conducting spot checks and observations of their practice. We found that this had not been happening meaning we could not be sure staff practice was correct when they were supporting people in the community. The service agreed to reinstate these checks and to provide assurance about this we made this an area for improvement (see area for improvement 2).

Staff told us that they had been well supported by the management team throughout the pandemic. This included supervision and team meetings, sending out guidance and making welfare calls. However, not all staff were having supervision meetings. We raised this with the management team who agreed to develop this.

### Areas for improvement

1. The provider should ensure that infection prevention and control practice is safe.

In order to achieve this the provider should ensure that all staff receive infection prevention and control training and development opportunities.

This ensures that care and support is consistent with the Health and Social Care Standards (HSCS) which state that: 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 (HSCS 3.14).

2. The provider should ensure that staff are adhering to infection prevention and control guidelines when working in the community.

In order to achieve this the management team should complete practice observations and address any training needs.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that: 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](http://www.careinspectorate.com).

## Detailed evaluations

How well do we support people's wellbeing?	3 - Adequate
1.1 People experience compassion, dignity and respect	4 - Good
1.2 People get the most out of life	4 - Good
1.3 People's health and wellbeing benefits from their care and support	3 - Adequate

How good is our care and support during the COVID-19 pandemic?	3 - Adequate
7.2 Infection prevention and control practices are safe for people experiencing care and staff	3 - Adequate
7.3 Leadership and staffing arrangements are responsive to the changing needs of people experiencing care	4 - Good

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