

Allied Health-Services Fraserburgh Support Service

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Type of inspection:
Unannounced

Completed on:
27 August 2021

Service provided by:
Allied Health-Services Ltd

Service provider number:
SP2018013250

Service no:
CS2018371955

About the service

Allied Health-Services Fraserburgh is operated by a new provider, Allied Health Services Limited, who took over the service in 2018. The new provider took over the existing commitments of the previous provider including local authority contracts, the care and support of service users, the management and leadership of the service, and the staff team in order to minimise the impact of the change on service users.

Allied Health-Services Fraserburgh is based in Fraserburgh and provides a housing support and care at home service for adults in the North East of Scotland. The service provides care and support for people with a range of needs, including people living with dementia, frail and elderly, physical disabilities, and learning disabilities. The service was providing care and support for 184 people during the inspection.

The provider's mission aims "to be the choice for care that gives people the freedom to stay in their own homes".

This service registered with the Care Inspectorate on 21 December 2018.

This was a follow up inspection to assess the progress the service was making in meeting the requirements made at our inspection on 17 June 2021. We evaluated the service based on key areas that are vital to the support and wellbeing of people experiencing care during the pandemic.

This inspection was carried out by one inspector from the Care Inspectorate.

What people told us

As we could not visit people in their homes due to Covid-19, we made telephone contact with people who use the service and their relatives. Overall people told us they were very happy or happy with the care and support they received.

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 good is our care and support during the COVID-19 pandemic?	3 - Adequate
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Further details on the particular areas inspected are provided at the end of this report.

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

3 - Adequate

The service had implemented an action plan following our previous inspection. This meant there was a focus on making the improvements that were necessary to improving outcomes for people. We found there was some progress made in meeting the requirements and areas for improvement from our previous inspection.

7.1 People's health and wellbeing are supported and safeguarded during the COVID-19 pandemic.

Progress had been made towards improving the safety of medication administration procedures to ensure people receive the correct medication, at the right time. Further improvement is required to ensure that people assessed as needing a verbal or physical prompt with their medication are continuously reviewed. This is because people's needs change over time and people previously able to manage their medication with only a verbal prompt, may need additional support as their health and care needs change. Some recent medication errors evidenced the need for all people receiving medication support (whether that be via a verbal or physical prompt, or fully administered) are regularly reviewed to ensure the level of support is right for them **(please see requirement 1)**.

We have re-evaluated the service to be performing at an adequate level. (See 'What the service has done to meet any requirements and areas for improvement 1 and 2.)

7.3 Staffing arrangements are responsive to the changing needs of people experiencing care.

Significant progress had been made in relation to preventing the spread of infection and keeping people safe. Staff had received additional training and support in relation to their use of personal protective equipment (PPE). The service had clear guidelines as to how PPE should be stored, ensuring it remained clean, dry and free from contamination.

(See 'What the service has done to meet any requirements and areas for improvement 1 and 2.)

Requirements

1. By 7 September 2021 the provider must ensure that people are supported with their medication safely and in accordance with the prescribing health professionals' guidelines. The provider must:

a) Put a system in place to regularly review people who receive help with their medication, to check the level of support they receive is right for them.

This is in order to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that:

'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 choices.' (HSCS 1.15);

'I experience high quality care and support based on relevant evidence, guidance and best practice.' (HSCS 4.11); and

In order to comply with The Social Care and Social Work Improvement Scotland (Requirements for Care services) Regulations 2011, (SSI 2011/210) Regulation 4(1)(a) - Welfare of Service Users.

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

Requirements

Requirement 1

By 7 July 2021 the provider must ensure that people are supported with their medication safely and in accordance with the prescribing health professionals' guidelines. The provider must:

- a) Ensure people receiving support with their medication are regularly reviewed to check the level of support they receive is right for them.
- b) Ensure personal plans detail when and under what circumstances medication should be given, when the prescribing health professional has labelled the medication to be given as and when required.
- c) Ensure personal plans detail where topical medication should be applied.
- d) Conduct regular checks to ensure medication is given in accordance with the prescribing health professionals' guidelines.

This is in order to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that:

'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 choices.' (HSCS 1.15);

'I experience high quality care and support based on relevant evidence, guidance and best practice.' (HSCS 4.11); and

In order to comply with The Social Care and Social Work Improvement Scotland (Requirements for Care services) Regulations 2011, (SSI 2011/210) Regulation 4(1)(a) - Welfare of Service Users.

This requirement was made on 17 June 2021.

Action taken on previous requirement

Improvements were made in medication administration procedures.

Support plans included details of when medication should be given when the prescribing health practitioner labelled the medication to be given, 'as and when required'. This ensured, for example, that people received pain medication only when they needed it.

Support plans included topical charts, showing staff where topical medication (i.e. creams and lotions) should be applied on the person's body. This ensured that topical medication was administered correctly and helped to promote people's health and wellbeing.

Regular checks were taking place to ensure that medication was given correctly and any mistakes identified and prompt action taken to rectify errors. For example, we saw documentation that provided re-training for

staff where gaps in knowledge were found. This helped to increase staff knowledge and understanding of medication administration.

Further progress is required to ensure all people receiving support with their medication (whether that be a verbal or physical prompt or full administration) are regularly reviewed. We found evidence that medication errors were happening when people's health had deteriorated and they were no longer suitable to receive a verbal prompt and instead needed full administrative support with their medication. However, the medication reviews were too late in these instances and were only happening after a mistake had been made. This put people's health and wellbeing at risk. To ensure this matter is followed up we have made a new requirement (**please see requirement 1 in, 'How good is our care and support during the COVID-19 pandemic?'**).

Met - outwith timescales

Requirement 2

By 7 July 2021 the provider must ensure that all staff follow best practice guidelines in relation to infection, prevention and control. The provider must:

- a) Ensure all staff receive refresher training in relation to when they should put their personal protective equipment (PPE) on and take it off, in accordance with the guidelines below.
- b) Ensure all staff receive refresher training in relation to when and where they should dispose of their PPE.
- c) Conduct regular checks to ensure staff are following the guidelines.

Please see the guidelines <https://www.nipcm.hps.scot.nhs.uk/scottish-covid-19-community-health-and-care-settings-infection-prevention-and-control-addendum/>

This is in order to ensure 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);

'I experience high quality care and support based on relevant evidence, guidance and best practice.' (HSCS 4.11); and

In order to comply with The Social Care and Social Work Improvement Scotland (Requirements for Care services) Regulations 2011, (SSI 2011/210) Regulation 4(1)(d) - procedures for the prevention and control of infection.

This requirement was made on 17 June 2021.

Action taken on previous requirement

Progress was made in relation to this requirement. Staff had commenced additional training and support in when they should put their PPE on, when they should take it off and how they should dispose of it. Documentation confirmed regular spot checks were taking place of staff practice and support and training was provided when practice required improvement. Our conversations with staff and the people they support confirmed that PPE was being used correctly. This will help to prevent the spread of infection between staff and clients.

Met - outwith timescales

What the service has done to meet any areas for improvement we made at or since the last inspection

Areas for improvement

Previous area for improvement 1

So that people receive the correct treatment in a medical emergency, the service should consult with the relevant medical professionals, to ensure support plans contain up-to-date information about do not attempt cardiopulmonary resuscitation (DNACPR) decisions. This will ensure emergency care is provided according to people's wishes and in their best interests.

This is in order to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that:

'I am supported and cared for sensitively by people who anticipate issues and are aware of and plan for any known vulnerability or frailty.' (HSCS 3.18)

This area for improvement was made on 17 June 2021.

Action taken since then

Following consultation with social work and relevant medical professionals, the service had reviewed and updated people's support plans, so that it was clear to staff when people had a DNACPR (Do Not Attempt Cardiopulmonary Resuscitation) decision in place. This will ensure people's care is provided in accordance with their wishes and best interests.

The service has met this area for improvement.

Previous area for improvement 2

To ensure people are kept safe from the spread of infection, the provider should produce guidelines for staff to follow, detailing how PPE should be stored in their homes or cars, so that it remains clean, dry and free from contamination.

This is in order 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 because people have the necessary information and resources.' (HSCS 4.27)

This area for improvement was made on 17 June 2021.

Action taken since then

Staff were aware of the recently developed guidelines detailing how they should store their PPE, so that it remained clean, dry and free from contamination. This will help to prevent the spread of infection and keep people safe.

Complaints

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

Detailed evaluations

How good is our care and support during the COVID-19 pandemic?	3 - Adequate
7.1 People's health and well being are supported and safeguarded during the COVID-19 pandemic	3 - Adequate
7.3 Leadership and staffing arrangements are responsive to the changing needs of people experiencing care	3 - Adequate

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