

Carewatch (Ayrshires) Support Service

Elliot House
Redburn Industrial Estate
Kilwinning Road
Irvine
KA12 8TG

Telephone: 01294 608 222

Type of inspection:
Unannounced

Completed on:
24 November 2021

Service provided by:
CSN Care Group Limited

Service provider number:
SP2019013299

Service no:
CS2020378853

About the service

Carewatch (Ayrshires) is registered to provide a care and support service to older people, adults with learning disabilities and/mental health support needs living at home and in the wider community.

The service has five staff teams based in the Garnock Valley, The 3 Towns (Ardrossan, Saltcoats and Stevenston), Largs, Skelmorlie, Irvine and Kilwinning. The service is managed by an office based in Irvine.

The service's aims and objectives state: "Our aim is to help you live life to the full."

This was an unannounced inspection to evaluate how well people were being supported during the Covid-19 pandemic. We evaluated the service based on key areas that are vital to the support and wellbeing of people experiencing care during the pandemic.

The inspection was carried out by three inspectors from the Care Inspectorate.

What people told us

During the inspection, we spoke with nine people experiencing care and their relatives. Comments about the service were generally very positive. Some people commented that they had seen a change in their regular home care staff. At the time of the inspection, the service was actively trying to recruit new staff to fill vacant posts. Comments included:

"The care is brilliant, different carers at different times but no complaints."

"I have had three different carers this week, but they are very good and helpful. I am very happy with the service."

"The staff are a bit of a mixture, men and women but it is a stable staff group. They are responsive to requests and I would be able to complain if I wished. I have seen my care plan."

"I had a review two or three weeks ago, the staff are normally quite good."

"It is normally the same staff, I have seen my care plan, they are good carers and the office staff are excellent."

"The staff can vary, they are short staffed. I am not sure the staff read the care plan and their skills can vary. Generally my relative is happy."

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?	4 - Good
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?

4 - Good

The service was currently performing to a good standard and continued to develop ways to improve the service to promote good outcomes for people who experience it.

Discussions with people who experience care and their relatives was mostly very positive. Some people said they have regular home care workers, although in recent months they were being supported by staff that were unfamiliar to them. People said that generally the staff were excellent and that they were helpful and friendly. People told us that they felt respected and their views were valued.

Support staff ensured that people's health and wellbeing was monitored and actions were taken when there was a change or deterioration in their health. The service had good relationships with local health and social work services which ensured people's health and wellbeing was protected.

People said that they had seen and been involved in developing and reviewing their personal plan. However, in recent months we saw that care reviews were not routinely taking place and some personal plans had not been reviewed for over one year. (See area for improvement 1.)

We found that the plans contained detailed information on people's abilities and needs. Clear information on how to support individuals' needs formed part of their personal plan which promoted consistency of care and good outcomes for people. Risk assessments were detailed and updated when there was a change in circumstances which meant people were kept safe. We were unsure if home care staff who were unfamiliar with people's needs would have sufficient time to read the detailed personal plans. The management team recognised this issue and ensured people's core care and support needs were sent with the support visit rota to individual staff. This ensured staff were aware of and able to support people's needs appropriately.

The way people receive their medication from staff should be safe and they can be reassured that there is an effective system to make sure that they were offered their correct medication at the right time. We looked at medication records and systems in personal plans. We found that generally they followed best practice and staff had undertaken medication administration training. We noted that a medication record held with personal plans was not dated and there was little evidence of this record being reviewed to check for changes in prescribed medication. We brought this to the management's attention and they said that they would include medication reviews in the quality visits and reviews. (See area for improvement 2.)

Training records evidenced that staff had access to training which informed their practice and continuous professional development. The induction programme for new staff had a varied range of topics including medication management, adult protection and moving and handling. Staff had opportunities to shadow experienced staff. Staff told us that they enjoyed the induction training and it made them feel equipped to do their job. All staff had registered, or were in the process of becoming registered, with the Scottish Social Services Council. This meant people were supported by knowledgeable, professional and skilled staff.

Areas for improvement

1. The service should review and evaluate individual personal plans on a six monthly basis to ensure they are meeting people's health and support needs.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state: "My needs, as agreed in my personal plan, are fully met and my wishes and choices are respected." (HSCS 1.23)

2. The service should ensure that medication records held within personal plans are dated and regularly reviewed to ensure they are accurate and record any changes to prescribed medication.

This is to ensure care and support is consistent with the Health and Social Care Standards (HSCS) which state: "My care and support meets my needs and is right for me" (HSCS 1.19) and "I experience high quality care and support based on relevant evidence, guidance and best practice." (HSCS 4.11)

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.

We found the service was performing to a good standard in this quality indicator. At the time of the inspection, there was not an active outbreak of Covid-19 among people who experience care and staff.

The management team and staff were practised and confident in supporting and managing any confirmed or suspected outbreak with people who experience care. This included informing and seeking advice from Public Health Scotland and colleagues in the health and social care partnership.

People told us that staff always wore appropriate personal protective equipment (PPE) when they visited to provide support. We saw that there was a plentiful supply of PPE held in the Irvine office. The PPE was distributed to the five teams in their local areas which meant that it was accessible to staff. This ensured that people and staff were protected from the risk of infection.

A review of records and discussions with staff confirmed that there was high compliance with Covid-19 testing and vaccination. The service and management actively promoted testing and vaccination within the service which ensured people were better protected from infection.

People's personal plans included how they would be supported in the event of an outbreak and details of contacts for family members and friends. This ensured that people were able to keep in touch with each other during isolation.

7.3 Leadership and staffing arrangements are responsive to the changing needs of people experiencing care.

The service was currently performing to an adequate standard in this quality indicator. The service had a clear contingency plan in the event of a mass outbreak and a reduction in staffing including the need to reprioritise service in line with dependency needs. This meant those people in most need would continue to receive a service. However, decisions to reduce a person's service were not always communicated to partner agencies which increased the risk to people. The service has now reviewed how changes in the service are communicated to partner agencies.

All staff had received training on infection prevention and control and the use of PPE. Updated training on infection prevention and control and the use of PPE was available as eLearning and we noted the majority of staff had completed this refresher training. This meant staff kept their knowledge and skills up to date which ensured their practice was safe.

The reduced number of quality officers and the absence of a registered manager meant that key management tasks such as observations of practice, reviews, team meetings, supervisions, communication with people, staff and other bodies had declined. The area manager was currently acting as the manager of the service and the service was actively recruiting for a permanent manager. We recognised the attempts by the office staff and senior manager to minimise risk and provide alternative supports, for example phone calls to staff and people experiencing the service. (See area for improvement 1.)

Areas for improvement

1. The provider should recommence staff supervision, appraisals and observation of practice in line with the provider's policies and procedures.

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

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

We made this area for improvement following a complaint investigation.

To ensure that people experiencing care can have confidence in the staff supporting them, the provider should ensure systems are in place to assess the competence and confidence of staff to work unsupervised on completion of their induction.

This is to ensure care and support is consistent with Health and Social Care Standards, 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."

This area for improvement was made on 5 October 2021.

Action taken since then

The service had reviewed the staff induction process to make it more robust to ensure staff had the required skills and abilities to undertake their role. The training officer detailed the training and observation of staff practice. Staff spoken with said that they felt the induction training was good and gave them confidence and skills to undertake the duties of the post.

This area for improvement has been met.

Complaints

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

You can also see our website for details of complaints about the service which have been upheld. www.careinspectorate.com

Detailed evaluations

How well do we support people's wellbeing?	4 - Good
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	4 - Good

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	4 - Good
7.3 Leadership and staffing arrangements are responsive to the changing needs of people experiencing care	3 - Adequate

To find out more

This inspection report is published by the Care Inspectorate. You can download this report and others from our website.

Care services in Scotland cannot operate unless they are registered with the Care Inspectorate. We inspect, award grades and help services to improve. We also investigate complaints about care services and can take action when things aren't good enough.

Please get in touch with us if you would like more information or have any concerns about a care service.

You can also read more about our work online at www.careinspectorate.com

Contact us

Care Inspectorate
Compass House
11 Riverside Drive
Dundee
DD1 4NY

enquiries@careinspectorate.com

0345 600 9527

Find us on Facebook

Twitter: @careinspect

Other languages and formats

This report is available in other languages and formats on request.

Tha am foillseachadh seo ri fhaighinn ann an cruthannan is cànan eile ma nithear iartras.

অনুরোধসাপেক্ষে এই প্রকাশনাটি অন্য ফরম্যাট এবং অন্যান্য ভাষায় পাওয়া যায়।

یہ اشاعت درخواست کرنے پر دیگر شکلوں اور دیگر زبانوں میں فراہم کی جاسکتی ہے۔

ਬੇਨਤੀ 'ਤੇ ਇਹ ਪ੍ਰਕਾਸ਼ਨ ਹੋਰ ਰੂਪਾਂ ਅਤੇ ਹੋਰਨਾਂ ਭਾਸ਼ਾਵਾਂ ਵਿਚ ਉਪਲਬਧ ਹੈ।

هذه الوثيقة متوفرة بلغات ونماذج أخرى عند الطلب

本出版品有其他格式和其他語言備索。

Na życzenie niniejsza publikacja dostępna jest także w innych formatach oraz językach.