

Tayside Home Care Support Service

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Type of inspection:
Announced (short notice)

Completed on:
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Service provided by:
Tayside Home Care Limited

Service provider number:
SP2019013418

Service no:
CS2019377980

About the service

Tayside Home Care is based in Crieff and provides a care at home service to adults in their own homes and in the wider community. The service covers the Crieff, Comrie and Auchterarder areas.

It states it aims to provide the care and support that everyone deserves in later life.

It has been registered since 2020.

What people told us

During our inspection we spoke with people who used the service and some of their relatives. There were many favourable comments. Both the staff and the manager were praised. People liked staff's respectful and friendly manner.

Some comments were:

- 'I think it's excellent.'
- 'The service..makes a...difference to me.'
- 'They're wonderful. Very caring.'

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 leadership?	4 - Good
How good is our care and support during the COVID-19 pandemic?	4 - Good

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

Overall, people received adequate care and support. There were important strengths but there were some key areas that needed to improve.

People were respected. Their wishes were listened to and staff got to know each person well. People had consistent staff who were able to put them at their ease. Very good relationships had been formed and people looked forward to their home care visit. Staff had a relaxed manner and were aware of each person's preferences and routines.

People's independence and abilities were respected and promoted. The service had some good information about a person, what they liked to do for themselves and the matters they needed support with.

The service had good contact and communication with health or social care agencies when appropriate to ensure a person got suitable support and attention. People can be confident the service was responsive to health and wellbeing concerns.

People's health and wellbeing needs had been assessed by the service. Important information for providing care and support had been obtained by the service. However, we found that level of information gathered about each person varied. Sometimes, within a person's support folder, there was a good level of detail about their background and how their care and support needed to be provided, but for other people it was more of a basic level of information that was recorded. The manager explained that she had begun a process of improving the information in each person's support folder and this will make sure that all the right, useful information is in the folder. This will help make sure people can be confident that staff have all the necessary information about their needs and wishes. We have made an area for improvement for this. **(See area for improvement 1)**

Whilst communication at this service was mostly good, with people or relatives saying the manager and staff had good knowledge of a person's care and support needs and any changes, there had not been any recent review meetings for any person. The service should organise individual review meetings as it will provide an opportunity to discuss what is going well with the person's support, how they are and their wishes. It will mean they, or their representative, are fully involved in decisions about their support and care. Review meetings help make sure people are satisfied with the support provided and it is meeting their needs and wishes. We have made this an area for improvement. **(See area for improvement 2)**

The support people's receive for their medication requires to improve. The medication administration records (MARs) the service staff completed occasionally had gaps or were not completed to a good standard. This can lead to mistakes being made with a person's medication. We discussed this with the manager and it was agreed she will carefully consider all the actions needed to improve the service's provision in this area. This included ensuring staff have robust procedures for supporting people's medication, including observing and confirming someone has taken their medication. The manager must introduce regular quality audits of the completed MARs, ensuring they contain all the necessary information. This will allow any issues arising to be identified and addressed promptly. This will help make sure people stay safe and well. We have made a requirement **(See requirement 1)**

Requirements

1. By 6 May 2022, the service provider must ensure people have their medication administered in a safe way so as to maintain their health and wellbeing.

To do this, the service provider must, at a minimum:

- a) ensure staff have the appropriate knowledge, guidance and training for administering medication and for completing medication administration records
- b) implement a system for management to audit and review medication administration practice and records.

This is to comply with Regulation 4(1)(a) (Welfare of users) of The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/210).

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that: 'My care and support meets my needs and is right for me' (HSCS 1.19) and 'I benefit from a culture of continuous improvement, with the organisation having robust and transparent quality assurance processes.' (HSCS 4.19)

Areas for improvement

1. The service provider should ensure that people's care and support needs and wishes are recorded with sufficient detail within their personal plans. Regular and effective quality assurance checks of this information should be undertaken.

This is 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) and 'I benefit from a culture of continuous improvement, with the organisation having robust and transparent quality assurance processes.' (HSCS 4.19)

2. The service provider should ensure that people, or their representatives, have regular opportunities to discuss their care and support and have changes made when required.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that: 'I am fully involved in assessing my emotional, psychological, social and physical needs at an early stage, regularly and when my needs change' (HSCS 1.12) and 'I am fully involved in developing and reviewing my personal plan, which is always available to me.' (HSCS 2.17)

How good is our leadership?

4 - Good

People can be confident that staff are well led at this service.

The manager had an active presence within the service. Staff were given good support and advice. The manager was in regular communication with staff. This meant they had a good overview of people's care and support. People can have confidence in how the staff are led.

Staff undertook a good range of training. Key areas of social care support were covered. Staff understood their responsibilities and had good knowledge of health and wellbeing needs. People can trust staff are supported in their roles.

There were good arrangements for recruiting staff. Appropriate checks were made to ensure a new staff were suitable for the role. This helped to keep people safe and to have staff that were caring and kind.

People can be confident that new staff members are given a good introduction to their role. When starting, new staff are given a good introduction to each person's care and supports needs and wishes. They shadow a more experienced staff member, get to know each person supported and will have some days when it is checked that they know their responsibilities and feel able to provide care and support on their own. This helps make sure people are supported by staff who have the right knowledge and skills.

Most areas for staff support were good. However, there had been very little supervision meetings for staff or other opportunities for staff to come together as a team to communicate and share information. We

discussed this with the manager. It was agreed that these aspects of staff support will be addressed. (See **area for improvement 1**)

Staff approach to care and support can be further supported. We thought the manager should consider how to promote the Health and Social Care Standards so that staff can make suggestions and ideas for improvement.

Areas for improvement

1. The service provider should ensure that staff members have opportunities to reflect on the care and support they provide and to share information together.

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)

The Scottish Social Services Council Code of Practice also states employers should: 'Provide effective, regular supervision to social service workers to support them to develop and improve through reflective practice.' (SSSC 3.5)

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

4 - Good

7.2 Infection prevention and control practices are safe for people experiencing care and staff

The service had good infection prevention and control practices. This meant there were many strengths but some small improvements that would enhance people's health and wellbeing could still be made.

Generally, the office areas were clean. There was daily cleaning and this reduced the opportunities for infection to spread. There was sanitising wipes and staff carried their own hand sanitisers. We advised the manager to make sure that cleaning was always suitably recorded. We also discussed that in some places the office had clutter and this should be addressed.

Staff had specific training on Covid-19, the correct use of Personal Protective Equipment (PPE) and infection prevention and control. Staff we spoke with were knowledgeable about the actions they should take in order to keep themselves and people safe. They were able to describe different measures they took to minimise infection spread when visiting people in their homes. People can have confidence in staff's knowledge and practice.

There were good supplies of PPE. Staff reported good hand hygiene practice, donning and doffing of PPE and the disposal of PPE. Senior staff had opportunities to accompany staff on some care at home visits and this meant they could offer advice to a staff member. However, in discussion with the manager it was agreed that more formal arrangements for the observation of staff practice would be put in place.

Staff were able to recognise symptoms of Covid-19 and knew how to report this. They also knew where to find current guidance. Safe practice helped to keep people and staff well.

There were robust arrangements in place for staff testing. These worked well. Staff were regularly taking tests and this was suitably recorded and monitored by management. The service being able to quickly

identify any staff who could be positive helped reduce the risk of Covid-19 infection for other staff and people supported. People were supported to stay well.

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

This was assessed as good.

People reported that staff worked safely in their homes. People were reassured by staff's safe practice and saw how it reduced the risk of infection. People had confidence in staff.

Staff received Covid-19 and infection prevention and control information and guidance. Staff training had also taken place. We observed staff wearing their PPE appropriately. Measures like these helped reduced the risk of infection spread for people and other staff.

Staff felt supported and that they were able to get support and guidance when they needed it. They were attentive to people's needs and were able to identify if someone's health or wellbeing was a concern. They knew how to recognise the signs of Covid-19 infection. Management would respond to any concerns staff had when supporting a person. Management were said to be approachable and helpful.

Staff's positive and caring manner was often mentioned. It was clear that this was valued by people. People were supported well throughout the difficult period of the pandemic and were being given support that was sensitive to their personality and wishes.

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 well do we support people's wellbeing?	3 - Adequate
1.1 People experience compassion, dignity and respect	5 - Very 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 leadership?	4 - Good
2.3 Staff are led well	4 - Good

How good is our care and support during the COVID-19 pandemic?	4 - Good
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	4 - Good

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