

# **CERA - Central Scotland**Housing Support Service

Unit 16 Arca Business Centre 8 South Caldeen Road Coatbridge ML5 4EG

Telephone: 01236 368 009

Type of inspection:

Announced (short notice)

Completed on:

1 November 2022

Service provided by:

CERA Care Operations (Scotland) Limited

Service no:

CS2010250092

Service provider number:

SP2009010680



## Inspection report

#### About the service

CERA Care is a London-based technology-enabled home care company which have now expanded to Scotland.

CERA - Central Scotland provide services to 116 people in North Lanarkshire and 77 people in West Lothian.

CERA Care state that they enable people to live at home in their own communities and remain as independent as is practicably possible. As well as supporting people with vital everyday tasks, they encourage and enable people to achieve their personal goals and to actively engage in their local communities.

CERA Care's mission statement is to provide outstanding care and support to customers, enabling them to live as independently as possible, in their own home, and to have a good quality of life.

## About the inspection

This was a short notice announced inspection which took place on 31 October. The inspection was carried out by two inspectors from the Care Inspectorate. To prepare for the inspection we reviewed information about this service. This included previous inspection findings, registration information, information submitted by the service and intelligence gathered since the last inspection.

In making our evaluations of the service we:

- spoke with three people using the service and four of their relatives
- · spoke with management
- · reviewed documents.

## Key messages

The service had met two requirements and two areas for improvement.

Two areas for improvement were not assessed.

The service had made significant improvements and have been regraded to reflect this.

## 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 leadership?	4 - Good
How good is our staff team?	4 - Good
How well is our care and support planned?	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?

4 - Good

There was an area for improvement made at the last inspection to ensure that each care plan details the person's medication needs. Within West Lothian, each person now had a care plan in place which identified their support and needs. The service were also in the process of implementing a new medication system. Some additional work needs to be completed with this area for improvement which will be looked at during the next inspection.

Further information is detailed in the section 'What the service has done to meet any areas for improvement we made at or since the last inspection'.

In view of the level of improvement that the service has made in meeting the requirements, we have regraded this section from adequate to good.

#### Areas for improvement

1. To support people's health and wellbeing, the provider should ensure that each care plan details the person's medication needs. This should include information about what the medication is, how it should be administered alongside any 'as required' protocols.

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 my 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).

## How good is our leadership?

4 - Good

There was a requirement made at the last inspection around reviewing and updating all personal care plans at a minimum of every six months or more frequently as required. This was met. Further information is detailed in the section 'What the service has done to meet any requirements made at or since the last inspection'.

There was also an area for improvement around quality assurance. Due to the service focusing on meeting requirements, there had been progress with this area, but some additional work needs to be completed. This area for improvement will be revisited at next inspection. Further information is detailed in the section 'What the service has done to meet any requirements made at or since the last inspection'.

In view of the level of improvement that the service has made in meeting requirements, we have regraded this section from adequate to good.

#### Areas for improvement

1. To improve outcomes for people, the service should regularly review quality assurance audits and make sure they are followed up and updated within specific timescales to show progress.

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 practise' (HSCS 4.11).

### How good is our staff team?

4 - Good

There was an area for improvement made at the last inspection about staffing. This was met. Further information is detailed in the section 'What the service has done to meet any areas for improvement we made at or since the last inspection'.

## How well is our care and support planned?

4 - Good

There was an area for improvement made at the last inspection to ensure that people's information was accurate and reflective of their needs. This was met. Further information is detailed in the section 'What the service has done to meet any areas for improvement we made at or since the last inspection'.

In view of the level of improvement that the service has made in meeting requirements, we have regraded this section from adequate to good.

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

## Requirements

#### Requirement 1

By 31 October 2022, the provider must review and update all personal care plans at a minimum every six months or more frequently as required, in particular:

- when this has been requested by the supported people or their representative
- when there has been a significant change in the person's health, welfare, or safety needs
- if changes have been agreed at the review, the personal care plan must be updated on to current care plan systems.

This is to comply with Regulation 4(1) (a) and (d) (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).

This requirement was made on 21 June 2022.

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#### Action taken on previous requirement

The vast majority of reviews across all teams, had taken place. Within the care plans, review paperwork had been completed. The service had also used the six monthly review as an opportunity to gain feedback from people. This information had also been recorded and included within the review. People had said they had been happy with their care and support.

There had been a couple of reviews that the service had not been able to complete due to exceptional circumstances. However, arrangements were now in place for these to go ahead and we were assured that these would be completed.

All the people we contacted told us that they had received their six monthly review. The service had also carried out quality assurance calls to people every six months. These calls had been made out with review dates which meant the service had been capturing any comments or concerns before the six monthly review. The quality assurance call consisted of asking the person 10 questions about their care and support. A record of this call had been kept within people's care plans. This shows that the service had given people opportunities to raise any comments or concerns about their care and support.

#### Met - within timescales

#### Requirement 2

By 31 October 2022, the provider must ensure there is clear information in every care plan to support people in the way they prefer. The care plan must inform staff what people can and cannot do independently alongside any strategies to support their health and wellbeing needs.

This is to comply with Regulation 4(1) (a) and (d) (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 needs, as agreed in my personal plan, are fully met, and my wishes and choices are respected' (HSCS 1.23).

This requirement was made on 21 June 2022.

#### Action taken on previous requirement

There was now clear information about people's needs within their care plans. The service had implemented and reviewed every care plan within West Lothian team. There was also evidence of partnership working to improve people's health and wellbeing. When we sampled plans, we were pleased to find that as a result of receiving the service, one person had regained some of their independence. This shows that the service were collaborating with external professionals in efforts to improving people's health and wellbeing.

The service also used a digital care planning system which had been accessible to the full staff team. All staff had made amendments to care plans when required. All updates to care plans that had not been administrative such as a request for additional hours, had also been logged within the system. Each request was highlighted in traffic light colours. This assured us that people's health and wellbeing needs were continually monitored and reviewed.

People who received the service told us, 'I like my care and I like my carers,' 'every lassie that comes in to support me is respectful'.

Relatives told us, 'I'm happy with the care', 'They're all very nice'.

Met - within 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

To support people's health and wellbeing, the provider should ensure that each care plan details the person's medication needs. This should include information about what the medication is, how it should be administered alongside any 'as required' protocols.

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 my 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).

This area for improvement was made on 21 June 2022.

#### Action taken since then

Some additional work needs to be completed. The service were implementing a new system to record people's medications which will be looked at during next inspection. The service had also carried out a review of everyone's care plan within West Lothian. Information about people's health and wellbeing needs was now in place.

This area for improvement will be looked at during next inspection.

#### Previous area for improvement 2

To improve outcomes for people, the service should regularly review quality assurance audits and make sure they are followed up and updated within specific timescales to show progress.

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 practise' (HSCS 4.11).

This area for improvement was made on 21 June 2022.

#### Action taken since then

We had noted that the service had really focused on meeting requirements. Some additional work needs to be completed within quality assurance.

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There was evidence people's reviews were used to gather feedback on their experiences of care and support. Their views and opinions were used to help quality assure the service.

This area for improvement will be revisited at next inspection.

#### Previous area for improvement 3

To ensure that people receive the right support at the right time, the provider should review staffing schedules on a regular basis.

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

'I know who provides my care and support on a day to day basis and what they are expected to do. If possible, I can have a say on who provides my care and support' (HSCS 3.11).

This area for improvement was made on 21 June 2022.

#### Action taken since then

The service had recruited a talent manager and new staff have been inducted into West Lothian services. The service still had vacancies but there was evidence that staff rota's had met people's needs.

Relatives and people had been complimentary about the staff who visited them. They did recognise that there had been staffing pressures and had said some of their staff had left and they now had new staff. One relative commented that staff let them know if they were running late. This meant that they were confident that staff would arrive to support them.

The service had an on-call duty system in place. The West Lothian team have been supported by the North Lanarkshire team when they have been short staffed. This assured us that people received their care and support at the right time.

This area for improvement has been met.

#### Previous area for improvement 4

To improve the care experience for people, the provider needs to make sure that all information they input into personal care plans is accurate and reflective of the person's 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).

This area for improvement was made on 21 June 2022.

#### Action taken since then

Information within care plans was accurate and up to date. All care plans were signed off by people and their representatives. This meant that people had viewed and agreed that they were happy with the content. There was a good level of detail highlighting what care and support people required to maintain their health and wellbeing. All preferred routines had been broken down into steps according to the person's preferences. This ensured that support was offered in a consistent way. People had been supported in alignment with their wishes.

Care plans could be more person-centred by adding more detail to people's life histories particularly about their families. This information could help build relationships and give topics for chat and reminiscence.

This area for improvement has been met.

## 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?	4 - Good
1.3 People's health and wellbeing benefits from their care and support	4 - Good
How good is our leadership?	4 - Good
2.2 Quality assurance and improvement is led well	4 - Good
How good is our staff team?	4 - Good
3.2 Staff have the right knowledge, competence and development to care for and support people	4 - Good
How well is our care and support planned?	4 - Good
5.1 Assessment and personal planning reflects people's outcomes and wishes	4 - Good

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