

South West Home Care Service Canal Housing Support Service

Westerhailes Healthy Living Centre 30 Harvesters Way Edinburgh EH14 3JF

Telephone: 01314 539 498

Type of inspection:

Unannounced

Completed on:

20 December 2022

Service provided by:

City of Edinburgh Council

Service no:

CS2004069903

Service provider number:

SP2003002576



About the service

South West Homecare Service Canal is registered as a combined care at home and housing support service. The service provides long-term care and support and also aims to help people regain skills needed to feel confident about living as independently as possible at home. The provider is City of Edinburgh Council.

The service provides support to a wide range of people with varying needs including older people and adults. At the time of the inspection there were around 55 people receiving a service in their own home.

The service covers parts of South West Edinburgh including Longstone, Stenhouse and Wester Hailes.

About the inspection

This was a full inspection which took place on 14 December 2022 and 19 December 2022. The inspection was carried out by one inspector and one inspection volunteer 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
- · intelligence gathered since the last inspection.

In making our evaluations of the service we:

- spoke with 12 people using the service and some of their family members
- spoke with staff and management
- · observed daily life
- · reviewed documents
- spoke with visiting professionals.

Key messages

- · People's health and wellbeing was at the heart of service delivery.
- · People were treated with compassion, dignity and respect.
- · Staff were passionate about providing good care.
- Management were approachable and supportive.
- People's care plans were current and right for them.

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?	5 - Very Good
How good is our leadership?	5 - Very Good

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

How well do we support people's wellbeing?

5 - Very Good

We made an evaluation of very good for this key question. The service had major strengths in supporting positive outcomes for people. There were very few areas for improvement. Those that did exist had minimal adverse impact on people's experiences and outcomes. The service worked within a culture of continuous improvement to strive for excellence.

Staff knew people well, including their likes/dislikes and preferences. People told us that they were very happy with the support they received and that staff were really caring, friendly, fun and attentive. People and their families told us "I can't fault them, I couldn't do without them", "the staff are so kind, caring and friendly", "the service is a life saver" and "everything runs very smoothly". Staff demonstrated genuine empathy and compassion when talking to us about the people they supported. This meant that people were valued for their individuality and treated with due dignity and respect.

People's health and wellbeing benefitted from their care and support. We spoke with a visiting professional who told us that staff and management knew people well and made timely and appropriate referrals when further medical support was required. People benefitted from the service having close links to health professionals. People had as much control of their medication as possible and there was evidence of ongoing discussions with people and their families to ensure safe medication practices whilst enabling people to be independent. Upon reviewing medication recording, it was clear, complete and easy to follow. This meant that any treatment or intervention a person experienced was safe and effective.

People were involved in making decisions about their physical and emotional wellbeing through their personal plans. People had recently received a satisfaction survey from the service. There was a good response with a high instance of positive feedback. Personal plans were kept updated regularly. People knew where their personal plans were and confirmed they had had recent reviews and their plans were up to date. There was good detail in personal plans, and people's personalities shone through. Where this could be improved would be to add more detail to people's routines to ensure consistent approaches, particularly for new or covering staff. There was little detail about people's goals and outcomes. We asked the provider to work with the team to better understand outcomes and goals. We discussed ways to improve this through group work in the new year (please see key question two for more details). People and staff told us that the personal plans contained enough information to support people well and according to their wishes and preferences. This meant that people's personal plans were right for them, because they set out how their needs would be met, as well as their wishes and choices.

Staff were knowledgeable about safe infection prevention and control (IPC) procedures including personal protective equipment (PPE) and utilised them well to keep people safe. The provider was in the process of updating their IPC policy and training. Staff had received regular updates and information throughout the pandemic and had information sheets to reference. Staff had also received regular practice observations and feedback from their manager to ensure good practice. People told us they felt staff were very good at keeping them safe. This meant that any treatment or intervention that people experienced was safe and effective.

How good is our leadership?

5 - Very Good

We made an evaluation of very good for this key question. The service had major strengths in supporting positive outcomes for people. There were very few areas for improvement. Those that did exist had

minimal adverse impact on people's experiences and outcomes. The service worked within a culture of continuous improvement to strive for excellence.

The manager and coordinators had a very good overview of the service and met regularly to discuss any areas for improvement/development. Coordinators were close to their teams and staff reported being able to contact their manager whenever they needed and felt well supported. This meant that people used a service that was well led and managed.

The management team used a variety of auditing tools which were complete and robust. These allowed for regular quality monitoring and highlighted any areas for development. The audits showed that there was a consistent high quality of care and support.

Staff had received regular supervision, annual reviews and practice observations and this contributed to staff feeling well supported as there were a variety of opportunities to gain feedback on their practice. This meant that people could have confidence in staff because they are able to reflect on their practice and follow their professional and organisational codes.

Staff had not attended team meetings for some time. The provider acknowledged this and had already made plans to re-introduce team meetings at the start of 2023. The manager intended to use team meetings to develop staff's understanding of the health and social care standards and how they link to the everyday support they give to people. This will further improve people's confidence that staff are encouraged to be innovative in the way they support and care for people.

There was a service improvement plan in place, however this could be updated to be more current and include a formal self-evaluation. Pulling this information into a local combined self-evaluation/ improvement plan would be beneficial and provide robust evidence of the culture of continuous improvement that the service already had.

Whilst there were some areas to develop, the service already worked within a culture of continuous improvement and had maintained high standards. This meant that people could have confidence that quality assurance and improvement was led well.

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

In order that the full staff team acquire the knowledge and skills to meet people's assessed support needs, the service should ensure improvements are made in relation to the following training elements:

- (1) all staff should undertake effective and appropriate training in:
 - a. dementia to the level of the Promoting Excellence training resource
 - b. palliative care based on best practice guidance
 - c. skin integrity

Inspection report

- d. client specific training where appropriate, for example Parkinson's; diabetes; stroke awareness; multiple sclerosis.
- (2) review refresher timescales for adult protection training so that all staff more regularly attend refresher training.

This is to ensure 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).

This area for improvement was made on 25 February 2020.

Action taken since then

The service had introduced a new eLearning platform and issued staff with new technology to support them in their role. There were a range of courses available including those identified in this area for improvement. Most staff had completed their training and there was a workable plan in place to ensure all staff have received recent training in these areas. The refresher cycle for adult protection training had also been reviewed and were now scheduled with an appropriate timeframe for renewal.

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?	5 - Very Good
1.1 People experience compassion, dignity and respect	5 - Very Good
1.3 People's health and wellbeing benefits from their care and support	5 - Very Good
1.5 People's health and wellbeing benefits from safe infection prevention and control practice and procedure	5 - Very Good

How good is our leadership?	5 - Very Good
2.2 Quality assurance and improvement is led well	5 - Very Good

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 cànain eile ma nithear iarrtas.

অনুরোধসাপেক্ষে এই প্রকাশনাটি অন্য ফরম্যাট এবং অন্যান্য ভাষায় পাওয়া যায়।

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

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.