

# Dalriada Care at Home Housing and Support Housing Support Service

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**Type of inspection:**  
Unannounced

**Completed on:**  
12 January 2023

**Service provided by:**  
Dalriada Homecare Ltd

**Service provider number:**  
SP2003002699

**Service no:**  
CS2004085401

## About the service

Dalriada was registered with the Care Inspectorate on the 24.02.2005. It provides a Care at Home service to people living in Bo'ness and Falkirk.

The service is currently supporting 79 people. The service is provided by a team of permanent staff and the manager.

The aim of the service is: "To deliver a service of the highest quality that will improve and sustain the Service User's overall quality of life."

## About the inspection

This was an unannounced inspection which took place on 10, 11 and 12 January 2023. The inspection was carried out by one inspector 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 seven people using the service and eight relatives
- spoke with eight staff and management.
- observed practice and interaction with service users.
- reviewed documents.

## Key messages

- People think that communication with the service is very good.
- People told us the service was flexible and responsive to their changing needs and circumstances.
- Staff were friendly and caring towards the people they supported.
- People found the service approachable and easy to contact.

## 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

In this part of the inspection report we considered three quality indicators;

**1.1 People experience compassion, dignity and respect.**

**1.3 People's health and wellbeing benefits from their care and support.**

**1.5 People's health and wellbeing benefits from safe infection prevention and control practice and procedures.**

We assessed the service as Very Good for all three quality indicators which means overall we evaluated this key question as Very Good, where several strengths impacted positively on outcomes for people and clearly outweighed areas for improvement.

People were involved in the assessment of their own care and how they would like it to be delivered. Care was reviewed after six weeks and regularly thereafter to ensure that it was working well for people. One person told us "They were excellent at working out what mum requires." The service aimed to provide support in a way that was non intrusive and respected people's dignity.

The service used an electronic care planning system which people using the service (and their relatives, with consent) have access to, which was open and transparent. Care plans were easy for people to navigate and to understand. The tasks staff were to complete were based on people's needs, and were detailed. This meant people knew what was going to be done and when. People's independence was encouraged. They could be amended very quickly if people's needs changed. People could message the service using the app which meant it was easy to let them know if they wanted to cancel or rearrange a visit. This promoted good communication between people using the service and staff and support being altered to meet people's needs. One person said "There is always adequate cover and the support is always reliable."

Care plans were person centred and outcome focused. They made clear the way in which people wanted to receive their support to promote people's wellbeing. Staff understood the importance of delivering care in the way that people needed, by offering reassurance and talking people through support if they experienced agitation or stress. People were supported by people they knew and had formed a relationship with. Staff were warm and friendly toward people and understood their needs well. One person told us "My carers have taken me away on holiday - it's more like your pals coming in to care for you. It's about what I want, when I want it, and how I want it done. That's how my care works. They always listen to me. If I don't click with a member of staff, if they're just not right for me, I just let them know and they fix it for me."

The service had good oversight of people's health needs and any medication they were taking. People were assessed regarding the level of support they required to take their medication (if any), what medication they needed to take and if this was time specific. This meant people were supported to take their medication safely.

The service tried to schedule visits at times that suited people best where possible, showing respect for people's routines. People were supported to engage in meaningful activities in their homes, locally and further afield depending on their interests.

Where possible people receiving social support could bank their support hours and people really valued this flexibility. The number of staff supporting people was generally kept small as possible in order that people could form good relationships with the people supporting them.

People could feel confident they were supported by staff who were trained and competent in preventing the spread of infectious diseases, including Covid-19. This was because staff received training in infection prevention and control and this was reinforced through regular assessment of their knowledge via service policies and procedures, spot checks, staff meetings, supervisions and appraisals. All people using the service had a Covid-19 risk assessment that was particular to them.

## How good is our leadership?

**5 - Very Good**

We evaluated this key question as very good, where there were major strengths in supporting positive outcomes for people.

### 2.2 Quality assurance and improvement is led well

The service evaluated the experience of people using the service on a regular basis and in a variety of ways and this formed the basis of their improvement plan, which was detailed and robust. People's care plans were formulated in partnership with them and regularly reviewed six monthly or as people's needs changed. There have been some reviews outstanding at the beginning of the last inspection year but the service has been addressing this.

People can access their care plan electronically via an app, which is open and transparent. Care plans represent people's views and people felt communication was good and their views were listened to. Care plans were audited to ensure they are current and information is relevant. This ensured high standards of planning and recording across the service. One person told us "Staff are very good at keeping me updated (particularly appreciated as the rest of the family and myself live quite a distance away). They have taken good care of our relative, and we all very much appreciate this."

Staff liked working for the service and felt well supported in their role via training, spot checks and appraisals. There was an open door management structure within the service and staff were encouraged to use the office space throughout the day. Staff felt valued by the service.

The service follow Safer Recruitment guidance and the manager has good oversight of SSSC registration of staff. People knew who was going to be supporting them in advance, promoting choice and control over their service.

There was a range of risk assessments associated with the service which promoted the safety and wellbeing of people using it and also the staff team.

## 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

The provider should ensure they notify the Care Inspectorate timeously on each occasion an incident or accident occurs that involves a service user.

Health and Social Care Standards 4.14 'My care and support is provided in a planned and safe way, including if there is an emergency or unexpected event.'

**This area for improvement was made on 18 April 2019.**

#### Action taken since then

We checked notifications against the service's records and found that they were in agreement. This Area of Improvement has been met.

#### Previous area for improvement 2

The provider should ensure medication administration records are regularly quality assured by senior staff, with evidence that this has been done. Any issues should be followed up timeously to ensure service user safety.

Health and Social Care Standards 1.24 'Any treatment or intervention I experience is safe. 3.14 I have confidence in people because they are trained, competent and skilled.'

**This area for improvement was made on 18 April 2019.**

#### Action taken since then

Electronic MARS are now in place within the service's electronic care planning system, and care plans are regularly audited. This Area of Improvement has been met.

#### Previous area for improvement 3

The provider should ensure regular staff meetings take place to discuss and consult about, organisational changes, innovations and external issues affecting for example, service provision, staff education and registration.

Health and Social Care Standards 4.27 'I experience high quality care because people have the necessary information and resources.'

**This area for improvement was made on 18 April 2019.**

#### Action taken since then

Staff meetings have commenced again following the pandemic and it is intended to introduce group supervision sessions also going forward. This Area of Improvement has been met.

#### Previous area for improvement 4

Senior staff should be enabled to support staff creatively and productively in supervision sessions. Seniors own supervision should be also developmental as well as meeting the organisation's administrative needs.

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

**This area for improvement was made on 18 April 2019.**

#### Action taken since then

The service holds supervisions for staff every 12 weeks. After two supervisions an appraisal is held. The service has access to online training, classroom based training/induction. This AFI has been met.

#### Previous area for improvement 5

This recommendation was an outstanding recommendation carried over from inspection in 2018.

The provider should implement the following to improve medication practice:

- a) A staff signature register.
- b) Medication needs and risk assessments for each service user.
- c) Be clear whether each person needs medication administration or prompting.
- d) Advise in care plans on the purpose of each medication and common side effects.
- e) Improve staff training and also quality assurance of medication administration and prompting.

Health and Social Care Standards 1.15 'My personal plan is right for me because it sets out how my needs will be met, as well as my wishes and choices.'

1.24 'Any treatment or intervention that I experience is safe and effective.'

2.23 'If I need help with medication, I am able to have as much control as possible.'

3.14 'I have confidence in people because they are trained, competent and skilled.'

This recommendation was made on 14 September 2018.

Action taken on previous recommendation

Staff signature register now in place; medication assessment now on each service user file; quality assurance not yet of a suitable standard.

**This area for improvement was made on 14 September 2018.**

#### Action taken since then

Electronic MARS now in place and regularly audited. This AFI 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](http://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



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