

# Home Care (Scotland) Support Service

5 Hill Street  
Dingwall  
IV15 9JP

Telephone: 01349 863 302

**Type of inspection:**  
Announced (short notice)

**Completed on:**  
22 May 2023

**Service provided by:**  
Home Care (Scotland) Ltd

**Service provider number:**  
SP2018013207

**Service no:**  
CS2018370470

## About the service

The service registered with the Care Inspectorate on 1 March 2019.

Home Care (Scotland) is a care at home support service registered to provide services to adults living in their own homes within the Highland area. The provider is Home Care (Scotland) Ltd. The service's main aim is to "provide the highest quality, person centred care to support the individual to maintain and improve their quality of life in a safe, respectful, loving and professional manner."

## About the inspection

This was a short announced inspection which took place on 16 May 2023 at 09:30. 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 seven of their family/representatives
- spoke with 10 staff and management
- observed practice and daily life
- reviewed documents
- spoke with visiting professionals.

## Key messages

- Staff knew their service users very well and supported them with care and sensitivity.
- This included supporting people with a range of abilities and promoting people's independence.
- People's health and wellbeing benefited from good communication with health and social work colleagues.
- The manager had clear systems for quality assurance.
- Staff were well supported by management and working relationships were good.
- People's support plans were person centred and up to date.

## 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

Evaluation of evidence:

We found significant strengths in aspects of the care provided and how these supported positive outcomes for people, therefore we evaluated this key question as very good.

Value based practice was threaded throughout the organisation. We observed staff supporting people with warmth, respect and kindness. People were supported by staff they liked, whom they felt treated them in a respectful and dignified way. Staff displayed strong positive values and we heard how people were being supported in person-centred and informed ways to support their unique needs and skills. People told us:

"They always try their best and its great to have someone to talk to you, have a laugh and a blether".

"Oh aye, they do treat me very well and I can't think of anything they could improve".

People felt safe when care was being delivered as there were strong, trusting relationships between staff and the people they supported. Staff advocated strongly for people to ensure they lived the best life they could, and people experienced support that promoted their identity, independence, dignity, privacy and choice.

People had been encouraged to complete surveys aimed at identifying what worked well and what could improve with the support they received. This helped staff and managers to benefit from people's lived experience. People and families had the chance to contribute to the direction the service was going in, through completing surveys and regular reviews. This demonstrated how the service worked in person-centred ways, how it valued people and helped them achieve positive outcomes. Families felt confident in their loved one's care because they knew the staff who provided their care and support, and when to expect them. They told us:

"I honestly cannot fault them and, especially the last 6-8 months, they have been really, really good".

"I can't fault those girls that come, I don't know what we would do if they weren't there".

We saw evidence of staff being responsive to people's needs and how they were able to communicate effectively with people who had cognitive and sensory impairment. Staff were very skilled in this way, and this helped ensure that people's needs were met. It was positive that 'shadow shifts' were used to introduce a new staff member to people, to get to know them and their preferred routines. New staff were also allocated to people with care and sensitivity and encouraged to focus on maximising people's independence. This meant staff were able to support people to get the most out of life. Families agreed and said that staff helped their loved ones to maintain and develop their mobility and independence around their home.

Staff were supported in their roles through training, as well as by linking in with other agencies to ensure they had professional support and guidance as needed, to understand more complex and sensitive needs.

The digital support planning system ensured staff could access the most current, detailed information about people. People told us they knew the staff who were coming to support them. Families had digital access to support plans and the system the service used allowed relatives to communicate with staff and managers through the 'Family Portal'.

This helped people build positive relationships with staff and managers.

People were well supported with their oral medication, and records confirmed that people were receiving their oral medication as prescribed. The service regularly monitored and audited medication and staff received regular training to ensure safe practice which benefitted people's health. The service worked proactively with the health and social care partnership and relatives, to ensure the correct level of support was made available to people as their needs changed. Where there were people potentially at risk, this was responded to in a timely and appropriate manner. There was very good engagement with relevant professionals and interagency working.

The service worked in a way that respected people's rights whilst striking a balance of also ensuring their safety. Training for staff was very robust and updated training was provided to meet people's changing needs. We heard from staff that they felt well supported with regards to learning and development needs. Staff demonstrated a clear understanding of their responsibilities to protect people from harm. They described the measures they needed to take to prevent adverse incidents or stressful situations. These were tailored to people's individual needs and personalities. This meant people and families could be confident that staff understood how to keep their loved ones safe.

## How good is our leadership?

## 5 - Very Good

Evaluation of evidence:

We found significant strengths in aspects of the care provided and how these supported positive outcomes for people, therefore we evaluated this key question as very good.

The service was led and managed well. There was clear leadership within the service and a culture of openness and transparency. It was apparent that leaders had a clear understanding of their role in monitoring, directing and supporting improvement. The focus was on providing a person-centred service and there was regular evaluation of people's outcomes. This helped people get the right care and support at the right time. Feedback and the wishes of people using the service were key drivers for service development and improvement. Communication within the staff team was good and information was shared verbally and electronically. This meant staff were kept up to date with changes in people's care needs so that action could be taken quickly and effectively. The staff team shared responsibility for identifying and supporting improvement. Staff told us they were confident about giving feedback and raising concerns and their views would be considered.

There were a number of effective systems in place to evaluate people's experiences. This included client and service feedback surveys which had evaluated well. The service was using a digital support planning system which allowed management to audit and evaluate all aspects of support provided to people. Audits took place across a range of different areas within the service, and these linked into the service improvement plan. It was positive that the service had developed its service improvement plan in line with the Care Inspectorate's Quality Framework and this plan clearly outlined the future direction of the service. The plan provided detail about how this would be delivered and what success looked like. The manager had robust systems for assessing accidents and incidents and there were appropriate follow up actions taken to identify the causes or to minimise any reoccurrence. This meant people and families could be confident that staff understood how to keep their loved ones safe.

Families felt staff and managers valued and listened to them and took appropriate action when issues were raised.

This resulted in true partnership working with the focus remaining on the individuals' needs and how these were met. Families told us:

"They are doing a good job, they are great."

"When I can't attend reviews, they will call me and ask for my opinion which I do appreciate."

External professionals rated the service, staff and management team positively and told us:

"They are good at communicating with us and are person-centred."

"Their strength is their tenacity, and they are confident in being able to support people who are complex."

Staff spoke positively about the training they were expected to complete to ensure their practice supported improving outcomes for people. This included a robust induction and 'shadowing' period for new staff. Training, staff supervisions and appraisals were all up to date because the system for ensuring these took place was effective. The service provided staff with an effective e-learning platform, and this provided assurance that staff were in receipt of the right training and updates.

To monitor the quality of care and support received by people, there were regular audits across a range of staff practice and how well staff supported people. There were dedicated members of staff who undertook direct observations with staff. This meant staff's interactions were observed and then staff were told what they were doing well and what could be improved on when they were supporting people. This helped staff remain focused on delivering person-centred care.

We saw evidence that the service has made considerable efforts to recruit new staff to existing vacancies and has had recent success in this respect. We looked at whether recruitment procedures were in line with 'Safer Recruitment' guidance. We found evidence that references, including most recent, were being followed up, Protection of Vulnerable Groups checks completed, SSSC registration confirmed, ID documents and evidence of previous employment. This meant that people could be confident that staff had been appropriately and safely recruited.

## 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 manager must ensure that people feel confident in their care because they always know who is coming to provide their care and support, and when to expect them.

This area for improvement was made on 16 December 2019.

**Action taken since then**

The implementation of the 'NurseBuddy' digital support planning system ensures that people know who is coming and when.

**Previous area for improvement 2**

The manager must ensure people's health and care needs are planned and delivered in line with their service agreement to support people, their relatives and carers to maintain their interests and lifestyles.

**This area for improvement was made on 16 December 2019.**

**Action taken since then**

The implementation of the 'NurseBuddy' digital support planning system ensures that people know what is in the service agreement and support plan so that people, staff and families have access to the most current information.

**Previous area for improvement 3**

The manager must ensure that people experience care and support in an unhurried, relaxed atmosphere.

**This area for improvement was made on 16 December 2019.**

**Action taken since then**

The feedback we had from people, families and staff has provided clear evidence that care and support is in accordance with people's wishes and in line with detailed support planning.

**Previous area for improvement 4**

The manager must ensure that people benefit from a clear service agreement which sets out what they can expect from the service and their support, including how their identified outcomes will be met.

**This area for improvement was made on 16 December 2019.**

**Action taken since then**

We saw evidence that all those supported have clear service agreements in place which are consistent with support plans and regularly audited by the manager.

**Previous area for improvement 5**

The manager must ensure that people, their relatives and carers are aware of how to raise a concern or make a complaint.

**This area for improvement was made on 16 December 2019.**

**Action taken since then**

All people and families have access to HCS complaints policy and procedure at the point the contract is signed.

## 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
1.2 People get the most out of life	5 - Very Good
1.3 People's health and wellbeing benefits from their care and support	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](http://www.careinspectorate.com)

## Contact us

Care Inspectorate  
Compass House  
11 Riverside Drive  
Dundee  
DD1 4NY

[enquiries@careinspectorate.com](mailto: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.