

My Life (Edinburgh & Lothians) Housing Support Service

Lower ground Floor
15 Alva Street
Edinburgh
EH2 4PH

Telephone: 01316 034 449

Type of inspection:
Announced (short notice)

Completed on:
22 May 2023

Service provided by:
CSN Care Group Limited

Service provider number:
SP2019013299

Service no:
CS2019374378

About the service

My Life (Edinburgh & Lothians) is a housing support / care at home service which provides support to people to enable them to remain living independently in their own homes.

The service operates across the City of Edinburgh.

140 people were using the service at the time of our inspection.

About the inspection

This was a short notice announced inspection which took place on 11 May 2023 in their offices, followed by visiting people in their own homes on 17 & 18 May 2023. This inspection was undertaken by one inspector from the Care Inspectorate.

To prepare for the inspection we reviewed information about the 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 14 people who experience care and 18 of their family / friends / representatives.
- Spoke with 14 staff and management.
- Observed practice and daily life.
- Reviewed documents.

Key messages

- People praised the quality of the staff who supported them.
- People's care plans should be further developed to ensure they provide appropriate information to guide staff.
- The service should ensure staff have enough travel time between visits.
- Some people and their relatives felt communication from the office could be improved.

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 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

We made an evaluation of good for this key question. Whilst some improvements were needed, the strengths identified had a significant positive impact on people's experiences.

People told us that they found the staff to be very kind and polite. We spent time observing how people interacted with others and staff. We saw on many occasions positive interactions which demonstrated that people were treated with dignity, respect, and genuine affection.

Staff consistency was important for people. Some had core teams of carers which they welcomed. One relative said to us: "My wife and I have a very good working relationship with the carers and we are like a small team."

However, this was not the case for everyone and although some people liked varied staff supporting them, others were not so keen. One person said "I find it a little unsettling when the carers are not consistent as they do not fully know the content of my care plan."

The service strived to ensure consistency of staff as much as possible and systems were in place to monitor the effectiveness.

People felt communication could be improved, especially when communicating with the office. We heard from people that they were not always informed as to changes to staff expected to provide support. The manager was aware that improvements were needed and following the recruitment of additional administrative staff, improvements should now be made. We highlighted the benefits of perhaps implementing communication agreements with people, detailing when, how and under what circumstances people would be contacted.

Staff covered a wide geographic area, and many felt they did not always have adequate travel time between visits. This meant that care time agreed with people was often reduced to accommodate the travel required. On one visit we accompanied staff on, the agreed visit was for 60 minutes, however in practice it lasted 22 minutes, with carers being conscious of the travel time to the next visit. Some relatives were happy for carers to finish early, however this placed pressure on staff and from our observations appeared rushed. The provider should ensure staff have appropriate travel time built into their scheduling. (Please see area for improvement one.)

The electronic system used to monitor the length of time staff were visiting someone was not reliable and the manager was looking to introduce a replacement in the coming weeks.

Overall, people were happy with the quality of care they received from the service. Comments from people we spoke with included: "I feel that my parents are both very well supported by the service."

Areas for improvement

1. To ensure people have positive experiences, the provider should develop visit scheduling systems, ensuring that they are realistic, take into account the agreed length of time in people's personal care plans and realistic travel time between visits.

This is also to ensure that care and support is consistent with the Health and Social Care Standards which state: "My care and support is provided in a planned and safe way, including if there is an emergency or unexpected event " (HSCS 4.14).

How good is our leadership?

4 - Good

We made an evaluation of good for this key question. Whilst some improvements were needed, the strengths identified had a significant positive impact on people's experiences.

The service had a variety of quality assurance systems in place which provided good management oversight, including but not limited to the administration of medication for people.

The service promoted the involvement of people into the delivery of the service to a good level through facilitating satisfaction surveys, curtesy calls and review of their care needs to support ongoing monitoring of their experiences and outcomes.

How well is our care and support planned?

4 - Good

We made an evaluation of good for this key question. Whilst some improvements were needed, the strengths identified had a significant positive impact on people's experiences.

We sampled 28 care plans, primarily focusing on those with high support needs. Care plans were electronic which enabled staff to have quick access to information.

Personal plans focused mainly on tasks to be carried out rather than building an enabling approach based on agreed outcomes. The detail of the care plans were mixed. Some were of a good standard re people's assessed care needs, however others lacked detail to guide staff. For example, one personal plan stated that a person had diabetes, but had no information as to how the person manages this health condition and what support was required from staff.

To support people to achieve good outcomes, the provider should ensure their care plans reflect their assessment of needs, how these will be met and are reviewed on a regular basis to ensure the level of accuracy required. (Please see area for improvement one)

Areas for improvement

1. To ensure people have positive experiences, the provider should develop personal plans with people which provides clarity and guidance for staff to follow to meet people's assessed care and support needs.

This is also to ensure that care and support is consistent with the Health and Social Care Standard 1.15 which state "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."

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
1.1 People experience compassion, dignity and respect	4 - 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	4 - Good

How good is our leadership?	4 - Good
2.2 Quality assurance and improvement is led well	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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Care Inspectorate
Compass House
11 Riverside Drive
Dundee
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