

Home Instead Inverclyde and North Ayrshire Support Service

Victoria House
5 East Blackhall Street
Greenock
PA15 1HD

Telephone: 01475603860

Type of inspection:
Unannounced

Completed on:
7 August 2023

Service provided by:
Ixion Consulting Ltd

Service provider number:
SP2022000048

Service no:
CS2022000071

About the service

Home Instead Inverclyde and North Ayrshire is a support service providing care to people living in their own homes. The service registered with the Care Inspectorate in March 2022 and is a franchise of the Home Instead group, operated by Ixion Consulting Ltd.

The service is provided by a team of care staff who Home Instead call Care Professionals. Care professionals provide care to people living throughout Inverclyde and North Ayrshire. The service is based in Greenock, Inverclyde. Services include companionship, support with personal care, medication administration, meal preparation, domestic support, and getting out in the community.

About the inspection

This was an unannounced inspection which took place on 2, 3, & 4 August 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 registration information, information submitted by the service, and intelligence gathered since registration.

In making our evaluations of the service we:

- spoke with six people using the service and five of their family members
- spoke with eight staff and management
- observed practice
- reviewed documents
- spoke with four external professionals.

Key messages

- Care professionals are skilled at engaging with people and provide person-centred, warm, and encouraging support.
- The service works hard to ensure continuity of care professionals to promote positive relationships.
- The service encourages feedback and uses this to drive change and improvement.
- Care professionals are well trained, and good practice is supported by competency checks and regular supervision.
- Some improvements are required to supervision recording.
- Leaders have a good understanding of what is working well and where improvements are needed.
- Care plans and risk assessments reflect people's needs and outcomes and are regularly reviewed to support care professionals to deliver quality care.

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
How good is our staff team?	5 - Very Good
How well is our care and support planned?	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 evaluated this key question as very good, as we identified major strengths in the care provided which supported positive outcomes for people.

People experienced warm, encouraging, and positive relationships with care professionals and were supported to shape and direct their support. We observed care professionals interacting kindly with people and encouraging them to be active and involved during their support visits. This helped people to feel respected and listened to which was important to help people maintain their dignity and sense of identity.

The service was working hard to ensure people were involved in scheduling of care visits. People told us they knew who was coming to see them and when. Changes to agreed visits were rare and people told us 'Communication from the service was very good if any changes were required.' This helped people to feel safe and confident in the care provided. Family members told us they 'felt reassured that their loved ones were safe.'

Care professionals took time to understand people's needs and preferences. The service encouraged feedback and people told us they were confident any concerns would be taken seriously by the manager of the service. Leaders undertook regular 'check in' calls or visits, as well as more formal review meetings, to ensure the service continued to meet people's needs. This helped people to feel valued and confident that the service was tailored to their needs and preferences.

People were clear about the standards they should expect from the service. The service promoted the Health and Social Care Standards (HSCS) during care professional induction and training. The service also outlined the principles of the HSCS in the information pack provided to service users. We observed care professionals demonstrating good professional values in practice. This helped people and their families to feel reassured that staff were competent and acting with integrity.

People were recognised as experts in their own lives by the service. Care plans reflected involvement of people and their families. Care professionals were encouraged to read the care plans and spend time getting to know people. The service encouraged people to identify what they wanted to do with their time, and care professionals helped encourage and support people to engage in activities they enjoyed. This supported people to maintain or regain their confidence whilst taking account of the impact of their changing health. People told us their 'family members had seen improvements in their wellbeing since using the service.'

The service aimed to co-ordinate support times to compliment and support planned events. People told us they felt more able to do the things they enjoy because of the service and that it didn't interrupt their lives. The values of the service promoted having fun and social bonds which helped people to feel confident that they could maintain their interests and lifestyle as their needs changed.

The service prioritised continuity which enabled care professionals to get to know people well. Care professionals told us this helped them to recognise changing needs which they felt confident to report to the manager of the service. We saw evidence of contact with family members to highlight health changes. Family members told us they were 'confident health concerns would be passed on and that the service supported accessing appropriate healthcare.' This helped families to feel confident their loved ones were being well cared for. One family member told us, "I was so worried before but now I can go away on holiday and relax from time to time. They look after him so well."

The service had a robust approach to Adult Support and Protection (ASP). There was a comprehensive ASP policy and ASP training was provided to all staff as part of their induction and through eLearning. Staff were encouraged to share concerns and were provided with clear written and verbal guidance about what constitutes potential harm. Staff told us they were 'confident to speak to the manager of the service about concerns for people's welfare.' The manager demonstrated a sound understanding of ASP principles and responsibilities. We saw evidence of partnership working where ASP concerns had been raised. This helped to ensure staff were vigilant to potential risks and that people were protected from harm.

The service had an effective approach to managing risk. People using the service were involved in risk assessment and care planning, and risk assessments were in place where necessary. The manager told us that 'risk enablement and making informed choices was central to the values of the service.' This helped people to feel included, safe, and confident that their views were heard. One person told us they had restarted going out independently for a short time each week, as they knew their care professional would be visiting later in the day to check on them.

Clear information about health needs, power of attorney, and anticipatory care planning were maintained by the service. This helped to provide clarity about decision making and ensured the right people were involved in making decisions about health and wellbeing needs.

People and relatives had access to an electronic 'app' which they could use to access daily notes. Family members told us this 'enabled them to 'check in' with what had been happening for their relative.' This helped people and their families to feel confident in the care provided. We saw evidence of training and advice being provided to staff to ensure the recording notes were of good quality.

The service used an electronic medication recording system (eMar) which care professionals completed for all people being supported with medication. This was monitored and overseen by the manager of the service with a system in place for identifying any errors. Comprehensive care plans were in place where medication was being provided. This ensured people were safely supported with their medication where required.

The service had a very good approach to supporting nutrition and enjoying meals. We saw examples of care professionals promoting a healthy attitude to food and drink with people being supported with meal planning, shopping, preparing meals, and eating together with their care professional. This enabled people to enjoy their meals in an unhurried and relaxed way. Staff took time to understand preferences and demonstrated flexibility and creativity in assisting people to eat well. This helped to promote wellbeing by making mealtimes enjoyable for people. One person told us, "she makes me my lunch which we eat together. It's so lovely to have a companion and I so look forward to it."

How good is our leadership?

5 - Very Good

We identified major strengths in leadership and quality assurance which supported positive outcomes for people. We evaluated this key question as very good. We made some suggestions for improvement but these did not impact on people's experiences overall.

Leaders had laid effective foundations for monitoring the effectiveness of the service. An improvement plan was in place which outlined key areas for development. This had been devised by the provider with input from the manager of the service. The service was planning to develop this by exploring how to meaningfully involve care professionals in the improvement plan. This helped to ensure people received good quality care due to a culture of continuous improvement in the service. We asked the service to develop 'Smart Goals' to ensure they could clearly evidence progress and change over time.

The service had effective quality assurance systems in place. Regular staff competence checks were taking place, along with monitoring of medication administration, incidents and accidents, record keeping, and financial transactions. Care plans were regularly sampled and reviewed to ensure the information was accurate and up-to-date. This was led by the manager of the service with oversight from the provider, with wider organisational support available to ensure compliance. Effective systems were in place to identify issues and monitor progress with resolving these. This helped to ensure the service was maintaining quality by using evidence and good practice guidance to drive improvement.

The service was responsive to feedback and actively sought feedback to learn and improve. Leaders regularly 'checked in' with people and their families and used formal review processes to gain feedback. The service clearly communicated how to complain and had a comprehensive complaints policy. Families told us that 'the manager and provider were responsive to feedback and they felt confident that any concerns would be taken seriously and action taken if required.'

Leaders in the service demonstrated a clear understanding of what was working well and where further development was required. The service was clear about accountability and responsibility for supporting improvement activities, with clear roles assigned to the leadership team. Staff meetings were held quarterly to ensure staff were informed of developments in the service and the wider organisation. This was followed up by detailed written information to ensure all staff had access to this information. This helped ensure good communication within the team and demonstrated commitment to staff involvement and service development.

How good is our staff team?

5 - Very Good

We evaluated this key question as very good, as we identified major strengths in staff recruitment, training and development. These strengths contributed to good outcomes for people. We made some minor suggestions for improvement but these did not impact on people's overall experiences.

New care professionals had been recruited safely and the recruitment process reflected the principles of 'Safer Recruitment, Through Better Recruitment.' All Care Professionals had been interviewed in line with organisational policy, and employment references, protection of vulnerable group checks, and registration of professional bodies checks were undertaken. This was well managed with comprehensive records being maintained by the service co-ordinator.

The service had a system in place for ensuring care professional supervision was completed regularly. This complemented regular competence checks which were followed up with discussion with the manager of the service. This helped to identify training or development needs. We asked the manager to develop the quality of supervision records to ensure they reflected the content of discussions. This was to ensure the service could demonstrate that care professionals were consistently supported to reflect on and learn from their experiences.

Care professionals had access to a wide range of mandatory and additional training which was delivered via e-Learning modules and in person. There was a clear structure for learning with clear job descriptions in place for each role. Care professionals told us they had access to additional training and mentoring from the manager of the service when required. Systems were in place to monitor staff competency and records were kept and monitored to ensure staff attended relevant training. This helped to ensure care professionals were able to maintain and develop their knowledge and skills in order to keep people safe.

How well is our care and support planned?

5 - Very Good

We evaluated this key question as very good, as we identified major strengths in assessment and personal planning, which contributed to positive outcomes for people.

People had detailed personal plans in place which reflected their rights, choices, and wishes. These were completed by the manager of the service with input from people, their loved ones and care professionals, where appropriate. They contained information about people's preferences and what was required to keep them safe. They also contained information about people's lives and past experiences which were used to inform their care and support. This meant people experienced personalised care which helped to improve their quality of life.

Support planning reflected good practice in risk assessment. Risk assessments were in place where required and contained a sufficient amount of information. People told us they 'were encouraged to be active and enjoyed undertaking activities with the care professionals.' Care professionals told us they 'aimed to maximise people's skills and independence.' This helped to ensure people felt valued and had opportunities to develop their abilities. One care professional told us she was "impressed by how quickly a review was arranged following a change in a person's wellbeing." This led to re-assessment of the person's support needs which helped ensure support continued to meet their needs and outcomes.

Systems and planners were in place to ensure regular 'check ins' and care reviews took place. This helped to ensure the service was working well and meeting people's identified outcomes. Formal reviews included input from families and care professionals, where appropriate. This helped ensure personal plans were dynamic and responsive to changing needs. Many people using the service had minimal involvement with health or social care professionals but we asked the service to continue to nurture relationships with care managers and external professionals. This was important to embed and develop good multi-disciplinary communication.

The service had effective systems in place to record legal measures and documentation, where necessary. Power of Attorney (POA) and Guardianship were clearly recorded in care plans. POA documents were obtained from those who had legal measures in place and safely stored. This helped to ensure clarity about legal responsibility and decision making to ensure people's rights were upheld.

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
1.2 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

How good is our staff team?	5 - Very Good
3.2 Staff have the right knowledge, competence and development to care for and support people	5 - Very Good

How well is our care and support planned?	5 - Very Good
5.1 Assessment and personal planning reflects people's outcomes and wishes	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 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.