
Report To:	Community Health & Care Partnership Sub Committee	Date:	12 January 2012
Report By:	Corporate Director Community Health & Care Partnership	Report No:	CHCP/08/2012/GMcG
Contact Officer:	Gillian McCready	Contact No:	01475 715370
Subject:	Care Service Inspection Report, Inverclyde Council Care & Support at Home Service		

1.0 PURPOSE

- 1.1 To inform members of the outcome of the recent care service inspection report relating to Care and Support at Home services in Inverclyde.
- 1.2 To seek acknowledgement of the quality of service being provided.

2.0 SUMMARY

- 2.1 In 2009 an inspection of Care and Support at Home Service was carried out by the Care Commission.
- 2.2 In the report of this inspection the overall gradings were as follows:
 - Quality of care and support – Grade 4 - Good
 - Quality of staffing – Grade 4 - Good
 - Quality of Management and Leadership – Grade 4 - Good
- 2.3 There was however one requirement and 3 recommendations which still had to be met. These included:
 - the implementation of formal care plan reviews - requirement
 - implementation of staff supervision - recommendation
 - develop monitoring and audit systems – recommendation
 - improved staff training on healthcare issues - recommendation
- 2.4 An independent review of care at home services was completed in 2011, with implementation being currently underway.
- 2.5 The grades awarded to the service in its inspection carried out in October 2011 were as follows:
 - quality of care and support – Grade 5 – Very Good
 - Quality of Staffing – Grade 5 – Very Good

3.0 RECOMMENDATION

- 3.1 That Members continue to support the implementation of the review and acknowledge the improvement to the Service.

Robert Murphy
Corporate Director Inverclyde Community Health & Care partnership

4.0 BACKGROUND

- 4.1 In April 2011 the Care Inspectorate took over the work of the Care Commission and care services continued their registration under the new scrutiny body.
- 4.2 The Care Inspectorate regulates and awards grades for care services through its inspection process.
- 4.3 Inverclyde Council's Care and Support at Home service provides an integrated Housing Support and Care at Home service to people living in their own homes.
- 4.4 A short notice, low level inspection was carried out in October 2011.
- 4.5 An annual return had been provided by the service, accompanied by a completed self assessment form.
- 4.6 Service users and carers were also contacted through questionnaires sent out before the inspection.
- 4.7 Information was gathered from a range of sources including policies and procedures, records and other documentation.
- 4.7 The self assessment information was detailed and reflected the participation of people using the service and their relatives/carers.
- 4.8 Lay assessors visited Inverclyde in October 2011 and spoke with a range of people in focus groups, 1-1 meetings and by telephone, asking a range of questions about the quality of service. Contact was also made with carers, relatives or friends of service users.

5.0 PROGRESS FROM 2009 INSPECTION

- 5.1 The requirement placed on the service in 2009 relating to reviewing the service users care needs and use of care plans by the service was examined and found to be met.
- 5.2 The care plans examined showed that the needs, choices and preferences of people using the service had been recorded to a very good standard in their personal plan.
- 5.3 Staff had received training on record keeping.
- 5.4 The recommendation to implement staff supervision has also been met.
- 5.5 Staff records showed staff had received regular supervision in team groups or on a 1-1 basis.
- 5.6 It was recommended that the service should continue to develop audit arrangements and monitoring systems with a focus on service user and carer feedback. This recommendation was met.
- 5.7 Inspectors saw that there were very good monitoring and recording systems in place and there was evidence that staff had been responsive to the feedback received from people using the service.
- 5.8 The final recommendation highlighted the need for staff to receive training in supporting peoples' health needs. This recommendation has been met.
- 5.9 Staff teams had been provided with the necessary training to meet the needs of their clients and this training is ongoing.

6.0 2011 INSPECTION - QUALITY OF CARE AND SUPPORT

- 6.1 The inspectors found the service to be performing to a very good standard. There was evidence showing a strong commitment to the meaningful participation of people using the service and their users and relatives/carers.

- 6.2 There was low staff turnover resulting in staff knowing their clients very well, with staff forming positive relationships with people using the service.
- 6.3 A range of consultation processes have been developed to ensure that service users can become involved in assessing and improving the quality of service.
- 6.4 A good range of written information is provided to people to let them know what to expect from the service.
- 6.5 There were excellent initiatives that had supported individuals with complex healthcare needs to remain living at home.
- 6.6 Telecare services had continued to be very successful in supporting people to live at home and to reduce risks.
- 6.7 There was evidence of service users being consulted and involved in the assessment process and that their views and choices were taken into consideration. This included a robust risk assessment process with service users making their own decisions and staff respecting this while putting in place measures to promote safety and independence.

7.0 AREAS FOR IMPROVEMENT

- 7.1 Some work relating to the focus group and development of a carers' group still needs to be progressed.
- 7.2 Weekend service still shows areas of weakness with reduced service and changes in staffing.

8.0 QUALITY OF STAFFING

- 8.1 Feedback from service users and carers found that there was a high level of satisfaction with the quality of staffing. Positive feedback was received on reliability, staff practice and continuity of staff.
- 8.2 Service user preference was taken into account and recorded in support plans.
- 8.3 Members of the focus group had been involved in staff recruitment and development of the new home support worker handbook.
- 8.4 Staff were said to be professional, reliable and caring.
- 8.5 Staff interviewed as part of the inspection process presented as well trained, motivated, professional knowledgeable and committed to the provision of a good quality service.
- 8.6 A well organised staffing structure and clear management responsibilities had been put in place and this supported good staff management and accountability.
- 8.7 A planned approach to staff training combined with staff appraisal has resulted in 60% of staff undertaking or completing relevant training with a rolling programme ongoing.

9.0 AREAS FOR IMPROVEMENT

- 9.1 The management team had a good awareness of the areas where the service could improve including weekend service.
- 9.2 Better communication about cover for regular carers during holiday periods is needed.
- 9.3 Staff should be involved more in the self assessment process in future.

10.0 DEVELOPMENTS

- 10.1 The introduction of senior homecare staff positions as proposed in the review of homecare services will address the areas where managers were making limited progress in relation to reviews and staff management.
- 10.2 The pilot of an electronic care monitoring system has been very successful and when rolled out to the wider service will address the problems identified in relation to information about service user specific needs, information about holiday cover and continuity of weekend staff.

11.0 CONCLUSION

- 11.1 Inverclyde Council's Care and Support at Home service provides a safe, reliable and responsive service that is personalised to meet the needs of each individual. The service operates to a very good standard due to the skills and commitment of the staff team and there is a culture of continuous improvement.
- 11.2 The service being provided at weekends and public holidays needs to continue to be monitored.

12.0 LIST OF BACKGROUND PAPERS

- 12.1 Appendix 1. Inspection report

Care service inspection report

Care & Support at Home Housing Support Service

Hillend Centre
2 East Crawford Street
Greenock
PA15 2BT
Telephone: 01475 715-946

Inspected by: Isabel Purdue

Colin McCracken

Type of inspection: Announced (Short Notice)

Inspection completed on: 4 October 2011



HAPPY TO TRANSLATE

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Service provided by:

Inverclyde Council

Service provider number:

SP2003000212

Care service number:

CS2004078041

Contact details for the inspector who inspected this service:

Isabel Purdue

Telephone 0141 843 4230

Email enquiries@scswis.com

Summary

This report and grades represent our assessment of the quality of the areas of performance which were examined during this inspection.

Grades for this care service may change after this inspection following other regulatory activity. For example, if we have to take enforcement action to make the service improve, or if we investigate and agree with a complaint someone makes about the service.

We gave the service these grades

Quality of Care and Support	5	Very Good
Quality of Staffing	5	Very Good
Quality of Management and Leadership		N/A

What the service does well

At this inspection we could see that the meaningful participation of people using the service and their relatives/carers continues to be promoted and managed to a very good standard. The staff team is well trained, professional and motivated to provide a personalised service that enhances each individual's quality of life. Staff also work very effectively with other agencies to promote and maintain the health, wellbeing and independence of the people using the service to ensure they can continue living at home for as long as possible.

What the service could do better

Concerns were raised at the last inspection about the quality of the weekend service and the service provided when regular staff are away in comparison to the very good service usually received. At this inspection, we could see that this had improved a lot and the management team is continuing to take action to address the remaining issues.

What the service has done since the last inspection

A requirement and three recommendations made since the last inspection have been met.

Staff have been undertaking training on improved record keeping and the telecare service has continued to grow. A comprehensive review of the service has been carried out and there is a focus on two new initiatives involving the introduction of a reablement approach to service delivery and an electronic communication system.

Conclusion

Inverclyde Council's Care & Support at Home service provides a safe, reliable and responsive service that is personalised to meet the needs of each individual. The service operates to a very good standard due to the skills and commitment of the staff team and there is a culture of continuous improvement. However, the service being provided during holiday periods and weekends needs to continue to be monitored to address the remaining issues raised by people using the service and their relatives/carers.

Who did this inspection

Isabel Purdue

Colin McCracken

Lay assessor: Barbara Diamond, Clare Egan and Greg McFarlane

1 About the service we inspected

The Care Inspectorate regulates care services in Scotland. It awards grades for services based on the findings of inspections. These grades, including any that services were previously awarded by the Care Commission, are available on www.careinspectorate.com

Inverclyde Council's Care & Support at Home service provides an integrated Housing Support and Care at Home service to people living in their own homes. The service includes home care, meals on wheels, respite, community alarms, home from hospital, telecare and a rapid response service. The service is mainly provided by staff employed by Inverclyde Council although services may also be contracted out to the private or voluntary sector.

Before 1 April 2011 this service was registered with the Care Commission. On this date the new scrutiny body, The Care Inspectorate, took over the work of the Care Commission, including the registration of care services. This means that from 1 April 2011 this service continued its registration under the new scrutiny body, The Care Inspectorate.

The principal aim of the service is to enable people to live as normal and independent a life as possible in their own home. Specific objectives are:

- to provide home care services to assist people in their own homes and enable them to remain there
- to provide home care in a way which will ensure that the independence of service users is enhanced and their lifestyles are safeguarded
- to provide home care in a way that demonstrates respect for the service users' homes and possessions
- to manage home care services in a way that ensures Service Objectives and the Charter of Rights for Home Care Services are fulfilled and quality standards are met.

Based on the findings of this inspection this service has been awarded the following grades:

Quality of Care and Support - Grade 5 - Very Good

Quality of Staffing - Grade 5 - Very Good

Quality of Management and Leadership - N/A

Inspection report continued

This report and grades represent our assessment of the quality of the areas of performance which were examined during this inspection.

Grades for this care service may change following other regulatory activity. You can find the most up-to-date grades for this service by visiting our website www.scswis.com or by calling us on 0845 600 9527 or visiting one of our offices.

2 How we inspected this service

The level of inspection we carried out

In this service we carried out a low intensity inspection. We carry out these inspections when we are satisfied that services are working hard to provide consistently high standards of care.

What we did during the inspection

We wrote this report after a short notice inspection that took place over the morning and afternoon of 3 and 4 October 2011. The inspection was carried out by Inspectors Isabel Purdue and Colin McCracken who were accompanied by Lay Assessors Barbara Diamond, Greg McFarlane and Clare Egan.

As requested by us, the provider sent us an annual return. The provider also sent us a self assessment form.

We sent 150 questionnaires to people using the service and their relatives/carers. Sixty seven completed questionnaires were returned before the inspection. We also received completed questionnaires from 18 members of staff who worked in the service.

In this inspection we gathered evidence from various sources, including the relevant sections of policies, procedures, records and other documents including:

- evidence from the service's most recent self assessment
- the service's aims and objectives
- the service information leaflets
- the service review
- 85 questionnaires that had been requested, filled in and returned by staff, people using the service and their relatives/carers
- personal plans of people who use the service including assessments, care plans, risk assessments and daily notes
- formal care reviews
- social activities records
- the service user agreement
- participation records including support plans, meeting minutes, newsletters and customer feedback forms
- staff supervision, training and development records
- staff meeting minutes
- the quality assurance policy

- quality assurance systems and records
- health and safety records
- accident and incident records
- complaint records
- discussions with various people including:
 - 62 people who use the service
 - 7 relatives/carers
 - 34 staff including team leaders, home support workers, home care managers, homecare coordinators, out of hours staff, monitoring officers, telecare staff, financial assessment officers, tuck in staff, community alarms staff and the reablement development lead.

Lay Assessors spoke with 69 people who use the service and relatives/carers during the inspection in focus groups, by telephone or at 1-1 interviews.

Grading the service against quality themes and statements

We inspect and grade elements of care that we call 'quality themes'. For example, one of the quality themes we might look at is 'Quality of care and support'. Under each quality theme are 'quality statements' which describe what a service should be doing well for that theme. We grade how the service performs against the quality themes and statements.

Details of what we found are in Section 3: The inspection

Inspection Focus Areas (IFAs)

In any year we may decide on specific aspects of care to focus on during our inspections. These are extra checks we make on top of all the normal ones we make during inspection. We do this to gather information about the quality of these aspects of care on a national basis. Where we have examined an inspection focus area we will clearly identify it under the relevant quality statement.

Fire safety issues

We do not regulate fire safety. Local fire and rescue services are responsible for checking services. However, where significant fire safety issues become apparent, we will alert the relevant fire and rescue services so they may consider what action to take. You can find out more about care services' responsibilities for fire safety at www.firelawscotland.org

What the service has done to meet any requirements we made at our last inspection

The requirement

The service provider requires to review the service user's care needs and put in place a robust care plan which is accessed by all staff from all organisations who work with her.

What the service did to meet the requirement

Action had been taken in response to this requirement. The care plans examined at this inspection showed that the needs, choices and preferences of people using the service had been recorded to a very good standard in their personal plan. Staff had been receiving training on record keeping to further improve standards and this was ongoing. Although there continued to be two records in place for individuals who received a service from Inverclyde Council staff and staff from another provider, the care plans were accessible to both parties and there were plans to develop an integrated record in the future.

The requirement is: Met

What the service has done to meet any recommendations we made at our last inspection

Three recommendations had been made since the last inspection:

1. The service should continue to develop its approach to staff supervision, making sure that this happens regularly and is recorded.

Action: Discussions with staff and the records we looked at showed that staff had received regular supervision in team groups or on a 1-1 basis. This recommendation is met.

2. The service should continue to develop audit arrangements and monitoring systems, with a focus on service user and carer feedback.

Action: We saw that there were very good monitoring and recording systems in place and there was evidence that staff had been responsive to the feedback received from people using the service and their relatives/carers. This recommendation is met.

3. Staff should receive training in supporting peoples' health and particularly in diabetes management.

Action: The staff training programme included healthcare topics relevant to the needs of people using the service and this had been delivered to meet the specific needs of individual service users. Staff teams had been provided with the necessary training to meet the needs of their clients and this training was ongoing. This recommendation is met.

The annual return

Every year all care services must complete an 'annual return' form to make sure the information we hold is up to date. We also use annual returns to decide how we will inspect the service.

Annual Return Received: Yes - Electronic.

Comments on Self Assessment

Every year all care services must complete a 'self assessment' form telling us how their service is performing. We check to make sure this assessment is accurate.

The Care Inspectorate received a fully completed self assessment document from the service provider/manager. We were satisfied with the way the service provider/manager had completed this and with the relevant information they had given us for each of the headings we grade them under.

The service provider/manager identified what they thought they did well, some areas for development and any changes they had planned. The information was detailed and reflected the participation of people using the service and their relatives/carers. The self assessment reflected the findings of our visit.

Taking the views of people using the care service into account

Lay Assessors spoke with 62 people using the service in focus groups, at 1-1 meetings or by telephone. The views expressed are recorded under the relevant quality statements in this report.

We sent out a total of 150 Care Standards Questionnaires and 44 of these were completed and returned to us by the people who use the service before our inspection. These asked a range of questions about the quality of the service.

Responses were very positive overall with some concerns raised about the service provided when regular carers were on holiday. The management team was aware of these issues and was taking ongoing action in response. When asked whether they agreed that they were happy with the overall quality of the care and support provided:

- 34 people indicated that they strongly agreed
- 10 people indicated that they agreed

Some of the comments noted in the questionnaires included:

"Provides secure feeling about my personal needs."

"I am very happy with the service provided. All the staff are caring, organised, friendly and helpful."

"Happy with the level of service provided."

"If I had any complaints/concerns I would contact the service direct."

"The service is very good. I don't know what I would do without it."

"Very helpful and have a good chat and laugh."

"Staff are all gems."

"Professional, helpful, caring service provided by all staff."

"I couldn't have a better carer."

"I'm very satisfied with the service I receive. They have all been very good and give me the confidence to carry out my personal care independently allowing me to shower confidentially whilst supervising."

"More time required for calls as girls struggling for time."

"I have said before that weekend services could improve. One that I don't like is staff changes and not letting us know who is coming to our home - this can be upsetting."

"Overall pleased with the quality of care but would like to have more consistency with carers."

"Sometimes staff don't have a lot of time at the weekend. Regular staff come in but I can't remember names very well. Would like hoovering done more often."

"On the whole I am delighted with the service. I need more help over a longer time given to the carers as first anticipated. A couple of weekends ago I was not happy as no-one appeared... hopefully this has been sorted."

"Happy with how things are going."

"Carers cheer me up when they visit - very helpful."

"I am happy with the service being provided."

"Staff keep me going - they are kind and polite."

"I like to thank every one of the girls that come in to me - they are all lovely. They all give me every respect - thanks once again."

"The staff are just wonderful. They put themselves out so far for us. I appreciate them so much, I have three daily carers who I am so glad to see coming in to me."

Taking carers' views into account

Carers include parents, guardians, relatives, friends and advocates. They do not include care staff.

The Lay Assessors spoke with seven carers during the inspection and the views expressed are recorded under the relevant quality statements in this report.

We sent out a total of 150 Care Standards Questionnaires and 23 of these were completed and returned to us by relatives/carers before our inspection. The responses to the questions asked were very positive overall with a few concerns raised about the service provided when regular carers were on holiday. As detailed above, the management team was aware of these issues and was taking action in response. When asked whether they agreed that they were happy with the overall quality of the care and support provided:

- 18 people indicated that they strongly agreed
- 5 people indicated that they agreed.

Some of the comments noted in the questionnaires included:

"My wife has received first class service from all members of staff. Particularly X who had almost become like a member of our family. Our grateful thanks to everyone."

"The service has made a lot of difference to my dad's life for the better and has helped me."

"My mum is happy and contented - I am very happy with her care."

"Carer gets on so well with my mother - she makes her feel at ease."

"X feels very satisfied about the service she receives. However, she feels that carers should have more time as they rush a lot (don't rush her - just have too many people to attend to)."

"Poor communication between teams - information about hospital appointments etc not passed on. Very poor communication to relief carers often arriving with little or no information about clients' circumstances or needs. Lack of skills/understanding about nutrition for the elderly or food preparation. Fry ups with too much oil used all too frequently."

As before, the daily service provided is first class and mum could not remain independently in her own home without this support. However, glitches do arise when the regular carers are on holiday or sick leave. This has resulted in missing meals as information re address has not been passed on accurately. This is the only area where I am not confident that the best service is offered. For the rest of the year I can't praise the ladies who attend to mum enough."

"My hospital to home manager has worked first class to provide the superb care services to enable my mother to return to her home in the later stages of terminal cancer. This is her remaining wish and certainly would not have been achievable if these services were not in place. Not only my mum but I as her principal carer am grateful that her wishes have been fulfilled. Thank you."

"The service provided has given us as a family a quality of life, unquestionable support and reassuringly reliable care for my mother. As far as is humanly possible the care provided is provided by experienced, compassionate staff with respect for mum as an individual. The skills required to diplomatically and gently encourage her with her personal care while stepping in where necessary are balanced extremely well considering her dementia can make this a tricky task. The regular carer always keeps contact and will advise if I should contact the office. I feel confident to express if a change has occurred and service needs reviewed. I know how to access that."

3 The inspection

We looked at how the service performs against the following quality themes and statements. Here are the details of what we found.

Quality Theme 1: Quality of Care and Support

Overall grade awarded for this theme: 5 - Very Good

Statement 1

We ensure that service users and carers participate in assessing and improving the quality of the care and support provided by the service.

Service strengths

We found this service was performing to a very good standard in the areas covered by this statement. We concluded this after we had discussions with staff, people using the service and relatives/carers; looked at the relevant records and reviewed the questionnaires we received.

There was evidence to show that there was a strong commitment to the meaningful participation of people using the service and their relatives/carers. Staff valued their involvement and recognised their right to be consulted and involved when making decisions about the care and support to be provided.

There had been a low staff turnover and staff knew their clients very well. The feedback we received confirmed that staff had formed positive relationships with people using the service and met their care and support needs in accordance with their individual choices and preferences. People using the service were very positive about the quality of the care and support provided.

A range of options had been established to support and promote the ways people could become involved in assessing and improving the quality of the service, including the care and support. These were:

- 1-1 meetings
- involvement in the assessment process and care planning
- formal care reviews
- a service user focus group
- questionnaires
- newsletters
- the provider's complaint procedure.

The provider had a quality assurance policy and this outlined the approach that was to be taken towards consultation with people using the service and their relatives/ carers. The participation opportunities that were specific to the Care & Support at Home service had been included, for example, the focus group, the newsletter and questionnaires.

A very good range of written information had been provided to people to let them know what to expect from the Care & Support at Home service. This included a range of leaflets about different aspects of the service with the relevant contact details, a written agreement, the complaint procedure and confirmation about their agreed plan of support.

The feedback we received confirmed that staff had consulted the people using the service in relation to the care and support provided and had respected the choices they made, for example, preferences for male or female carers or agreeing support times. The personal plans we looked at reflected this involvement. The support needs, choices and preferences of each individual had been recorded and most of the personal plans had been formally reviewed at least on an annual basis to make sure information remained accurate and up to date. Reviews had been done more often where there was a need for this. Feedback about the quality of the care and support had also been sought from people using the service following their initial six week assessment and we saw that the views expressed had been listened to and acted on properly.

The provider gave people a written agreement when they started using the service and this had been re-visited during the formal review process to make sure that any changes were added in. This agreement detailed the service to be provided and people spoken to during the inspection said that they felt well informed about this. All confirmed that they had received the agreed support. Written agreements had been signed by people using the service or their relatives/ carers.

The personal plans we looked at reflected the needs, choices and personal preferences of the people using the service in very good detail. The personal plans for people with very complex needs were particularly good. Each person's ability to make decisions and advise staff was stated and, where an individual was not able to do this, more detailed information had been recorded to fully inform staff. A focus on record keeping training for staff was ongoing.

The formal care reviews we looked at showed that the people using the service and their carers had been consulted and involved as had other relevant parties like GPs, district nurses and representatives from private providers who delivered care packages on behalf of the Care & Support at Home service. This approach had supported good communication and effective joint working.

The review records were detailed and showed that the service had been responsive to the views expressed, for example, changing the times at which the service was provided to fit in with people's other commitments, increasing the scope of the service and increasing or decreasing the level of support according to individual needs.

The service user focus group had become well established. The purpose of the group was to support meaningful involvement and inform people using Inverclyde Council's services of the provision available to older people. The ways in which members were involved had continued to develop and there were measures in place to raise awareness of the focus group amongst people using the service and their carers. There was evidence that the management team had responded properly to feedback and suggestions from the group who had been involved in things like the self assessment process and staff recruitment. This had been well managed and supported.

The focus group had carried out a number of information sessions in the form of 'roadshows' where they had visited sheltered housing complexes and community events telling people about what they did. This had involved giving out information about resources in the community and asking for people's views about the quality of the service.

The customer feedback forms had asked questions about aspects of the service that were important to people like being treated with respect, whether the service was reliable and consistent, what they thought of staff and being able to make choices. The responses we looked at during the inspection had been very positive overall and any comments or concerns had been followed up by the relevant area manager and revisited later to make people using the service were happy with the outcome. This was a good approach as it let people know that their feedback had been taken seriously and was acted on to make improvements. Return rates for these questionnaires had continued to improve as a result of the action taken by staff.

The newsletter continued to be used to provide useful information and supported the active involvement of people using the service and their relatives/carers. This had been a good way of getting information and updates about the service out to individuals given the very large number of people accessing the service. Recent newsletters had been used to give feedback about questionnaire results and the last inspection outcome.

The service had continued to receive very positive feedback about the quality of the care and support from people who had used the service or their carers via thank you cards, letters and other acknowledgements.

The provider had a formal complaint procedure and there was a system in place to record and address any complaints received. People using the service had been provided with information about the complaint procedure.

The most recent Care Inspectorate inspection report had been given to all new people using the service.

Lay Assessor Reports

The range of services offered ranged from once a week, to be assisted with bathing and hair washing, to one person having someone come in every morning to ensure they had taken their medication to those receiving the service once to four times daily. Everyone talked about the excellent service they received, some telling me that their home help had phoned the doctor because they did not feel well, or had got some messages and handed them in later.

All the people I spoke to from the focus groups knew about the care plan although 99% had never read it. Some said that their family members read it. Most of them knew the care plan as the 'black book'. Those who received the hospital to home service tended to know the contents as they had much more input from social workers.

It would appear that if there are a lot of family visitors or family carers, the knowledge of the service seems to be better.

Service users from the focus groups told me:

"I don't know how the service could be improved."

"The quality of my care is excellent."

"The staff always respect my dignity."

"The staff know what care I need."

"The staff are very reliable."

"My care package is excellent."

"I am so grateful for the service I receive."

Service users who have or have had the hospital to home service told me:

"I can't fault the service I get."

"My carer reported that I had difficulty in getting in and out of the bath and someone came and installed a handle to help me."

"I feel we are very fortunate living in Inverclyde with the quality of care we get."

"The Social Work department do a tremendous job."

"I couldn't fault the level of care my husband received when he came out of hospital."

"I get the newsletter."

"If I have a complaint, my family would get in touch with the council."

"I would phone my social worker if I had a complaint."

Staff communicated with service users of the homecare service in various ways including questionnaires, a homecare newsletter and 'roadshows' that go to various areas and locations throughout Inverclyde. They also have a focus group that looks at various aspects of the service. I was involved in the inspection of this service last year and found that the care and support is still of a very high standard and much appreciated by those people who use the service and the family members that we spoke to. The service has done a lot to involve and inform people who use the service.

With the exception of two people I spoke to, everyone was aware of their Care Plan (sometimes it took a reminder about the "black book") and also said that they had regular reviews at least annually. The two exceptions were from people who cared for relatives who had recently been in hospital. Both said a full care plan was not in place.

Everyone said their carers had enough time to do the allotted tasks and sometimes even extra, for instance, going to the local shop or taking rubbish out. I was told by a number of service users "the staff are very caring", one person said "a couple of times I have felt a wee bit under the weather and the carer called my G.P."

Typically, I was told:

"Care is great."

"Carers go the extra mile."

"Always on time."

"Carer tells me the day before if she's off next day."

"Told by word of mouth by regular carer of changes."

Overall, most people said they were happy or more than happy with the service they received.

Comments from people spoken to on the phone:

"It's fine."

"Good service but I'd like more time."

"I like the same staff - you get to know them well."

The people I spoke to in focus groups were positive about some aspects of the service and also had some concerns. On a positive note, people spoke about flexibility in the service and being able to change support times to a time which suited them better:

"It's good. I got the time moved from 4.15pm to 5pm."

Other positive comments were:

"I do feel like I get a bit of attention because I can't see very well."

"I do like a wee blether with the staff."

"I know the regular staff well."

"I'm not afraid to complain."

"I'm well cared for."

"They help me."

"If you ask them to do something it's always no bother."

Regarding reviews some people said these happened "once a year."

People commented that it was "good for management to check up on staff to see if they were doing their job right".

Areas for improvement

Customer feedback forms and newsletter should be dated.

There were plans for the focus group to do a newsletter twice a year and this would be a good initiative as the group focused on things that affect and benefit people using the service like the quality of experience, community resources and service developments.

The work of the focus group should be included in the newsletter.

Although most people had received their annual review and staff had carried out extra reviews where there were issues or concerns, staffing issues had recently impacted on one area of the service resulting in a reduced number of reviews being completed. Action was being taken to address this.

Where people using the service make comments or suggestions for improvement on customer feedback forms the follow up should be recorded properly. We saw evidence that staff had been responsive but this had not been fully reflected in some of the records we looked at.

The service was looking to develop a carers' group to get direct feedback from carers giving them a forum to influence the service. This work was ongoing.

Lay Assessor Reports

A few service users talked about their concerns over relief staff not ringing their door bells and just appearing in their living rooms or bedrooms.

"During the week it's great, but big difference at weekends when there are lots of changes."

Most of the people who received a service seven days a week said there was a big difference with the weekend service, particularly with continuity and not knowing which staff would be attending. A service user who normally received her support between 8:30-9:00am said "sometimes on Sundays it can be much later. I wait until 11:00am and, if no one has come I phone the Out-of-Hours service who say they will get someone round but by that time it is too late."

A family member said morning, lunch and tea time service is fine but often his parent is told at tea time what carer will be coming in at bed time which the service user finds confusing.

One service user who had sight problems said when non-regular carers came in, despite her clearly telling them to put food back into her fridge exactly where they normally go some carers did not do so.

A number of service users who have 'key safes' reported that carers used these but did not use the door bell. One particular service user who has hearing difficulties said that regular carers always rang the door bell which was connected to a flashing light in the living room but non-regular carers did not. She said "I get a terrible fright sometimes - it only happens in the morning when I'm waiting for my shower."

Service users from the focus groups told me:

"The weekend service is not as good, sometimes they are in a hurry and they don't give me the full service."

"The home help tells me when she is going to be off and I don't know who would come in."

"I would prefer to know who was coming - the council don't always phone and I don't like that because the home helps use the key safe."

"I wish the relief home helps would tell me who they are before they open the door, sometimes they are right in before I know they have even opened the door."

"I need to tell the relief staff what to do."

The people I spoke to in focus groups were positive about some aspects of the service and also had some concerns.

There were concerns about the time allocated for care. Comments were:

"They are always in a hurry."

"They say things like I've not got time for that."

"Coats are off and then on again quickly."

One service user commented that a three course meal was heated up and all three courses were placed in front of them at the one time.

There were concerns about the weekend service.

"I had two missed visits."

People in another focus group were happy with the service during the week but noticed a marked difference with the weekend service.

"The weekend staff are always late. They say they've been kept back."

"The care is not as good at the weekend. During the week, they know you better and they know where everything is."

Grade awarded for this statement: 5 - Very Good

Number of requirements: 0

Number of recommendations: 0

Statement 5

We respond to service users' care and support needs using person centered values.

Service strengths

We found this service was performing to a very good standard in the areas covered by this statement. We concluded this after we had discussions with staff, people using the service and relatives/carers; looked at the relevant records and reviewed the questionnaires we received.

As detailed under Quality Theme 1, Statement 1, people using the service had been fully involved in agreeing the care and support to be provided. The staff team had built up positive relationships with people using the service and their relatives/carers. This had helped them to make sure each person got the most out of the service they were receiving. The feedback we received about this was very positive overall.

Overall, there had been very good continuity of home-carers for people using the service although a few gaps remained, especially at the weekend and when regular staff were on holiday.

Staff spoken with during the inspection had a very good awareness of the individual needs of the people they supported and discussed how they met these in a person centred way that took account of the need for safety, choice, privacy and respect for people's rights.

There had been a very good approach to risk management. This had enabled people using the service to make their own decisions and staff had respected this whilst putting measures in place to promote safety and independence. Staff had also used evidence based risk assessments to reduce risks and meet healthcare needs like nutrition, falls and skincare.

There had been regular 1-1 contact between managers and their staff teams to discuss the needs of individual clients. We could see that there had been very good levels of communication and consultation about the care and support to be provided and this had been managed properly in response to people's changing needs, for example, putting equipment like therapeutic beds or telecare in place quickly where there was a need for this.

The personal plans we looked at contained a very good level of information about the people using the service including their needs, choices and preferences. The records for individuals with complex needs were particularly detailed. We could see that people had been consulted when putting together their care and support package. Staff said that they were provided with the necessary information about people before supporting them for the first time to make sure they were aware of their needs and how these were to be met.

A new support plan format had been devised and this had been changed to support a more person centred approach to record keeping, including care planning. A 'follow up' column had also been introduced where staff could record the outcome of any actions or issues identified like falls or failure to take prescribed medication. This was a good improvement and we saw that the quality of record keeping had continued to improve.

Formal care reviews were responsive to individual needs and revisited the services being provided to make sure that these needs continued to be met properly. Other relevant parties had been involved in reviews, like district nurses and coordinators of contracted services. This supported good communication and joint working. Changes had been made where there was a need for this.

The training provided to staff promoted a person centred approach. Staff said that they could ask for specific training to meet the needs of individual service users where there was a need for this. Currently, there was a focus on training to further improve record keeping including more personalised care planning using the new support plan format.

Staff said that they were able to change support times if this suited people better as long as this had been discussed with their manager. People who used the service confirmed that this had happened to accommodate other plans or commitments like hospital appointments.

There was a commitment to the promotion of independence with the aim of maintaining and developing the self care skills of the people using the service. Staff liaised effectively with other agencies, like occupational therapists, and provided equipment or arranged adaptations so that people could be supported to be as independent as possible in their own home.

Staff had also worked very effectively with relatives/carers and members of the extended community healthcare network make sure that the health and wellbeing needs of people using the service had been properly assessed and met.

A comprehensive review of the service had been carried out and there was a strong focus on establishing a reablement approach that would further improve and develop the promotion of independence for people using the service. Staff training was currently being rolled out and staff spoken with were very positive about the benefits of this initiative.

Telecare services had continued to be very successful in supporting people to live at home and to reduce risks. This used technology to assist people to remain at home within the community in safety using a range of remote control equipment, monitors, alarms and so on.

There were examples of excellent initiatives that had supported individuals with complex healthcare needs to remain living at home. This had included telecare monitoring that helped to prevent health related complications and reduced the need for hospital admissions.

Where people using the service had a preference for a male or female worker this had been met. Requests for a change of worker had also been met.

Our review of the 'Out of Hours' activity showed that the service had been responsive and the needs of people using the service had been well met during crisis situations. The necessary follow up had been put in place quickly, like providing equipment or arranging respite care and very good records of incidents and actions had been kept. There had also been very good liaison with family members and the multi-disciplinary team.

Some 'out and about' services that supported social and recreational activity had been provided. This reflected an approach that allowed individuals to continue with the activities they enjoyed.

The service had established close links with the local advocacy service and promoted this where a need was identified.

Financial and benefit maximisation assessments had been carried out to promote opportunities for the people using the service.

The electronic communication system being introduced took account of the specific needs of people using the service and matched this with staff that had the skills to meet their needs. Visit times could also be set for people who need calls at particular times, for example, someone with diabetes.

Areas for improvement

The management team should continue to monitor the formal review programme to make sure that all users have a review at least annually.

A number of people using the service had raised concerns about the weekend/holiday service at the last inspection. Although some of this was out of the service's control where agency staff were being used, action had been taken to improve standards and we saw that significant improvements had been made. Although most people were now happy with the service, there were a few people who felt that more improvement could be made in the following areas:

- continuity of weekend staff
- information provided to weekend staff about specific needs
- more notice when regular staff were going on holiday.

In relation to these issues, we saw that an electronic communication system had been piloted using new technology and this had been very successful in addressing the issues raised. It was planned that this would be rolled out across the service. The service had also been working more closely with the private agencies used in order to improve standards and this was ongoing.

Grade awarded for this statement: 5 - Very Good

Number of requirements: 0

Number of recommendations: 0

Quality Theme 3: Quality of Staffing

Grade awarded for this theme: 5 - Very Good

Statement 1

We ensure that service users and carers participate in assessing and improving the quality of staffing in the service.

Service strengths

We found this service was performing to a very good standard in the areas covered by this statement. We concluded this after we had discussions with staff, people using the service and relatives/carers; looked at the relevant records and reviewed the questionnaires we received.

In addition to the related strengths detailed under Quality Theme 1, Statement 1:

The feedback we received from people using the service and their relatives/carers showed that there were high levels of satisfaction with the quality of staffing. There had been a low turnover of staff and the people we spoke with said they had formed very good relationships with their individual home-carers and other members of the staff team.

The service's review process and customer satisfaction surveys asked for feedback on the quality of staffing including reliability, staff practice and continuity of staff. The feedback received had been very positive overall.

The focus group had raised the issue of notice periods when regular staff were going on holiday and this had led to improvements in this area.

Where people using the service had expressed a preference for a male or female worker this had been provided. This had been recorded in the support plans we looked at.

Where people using the service had requested a change of carer this had been carried out.

The focus group had been involved in developing the questions about staffing included in the quality improvement questionnaire. Focus group members had also been consulted and asked for their views when the service's self assessment form was being completed prior to the Care Inspectorate inspection.

Members of the focus group had been involved in staff recruitment and this was ongoing. It was advised that their involvement would extend to the recruitment of more senior staff as vacancies arose.

Focus group members had also been involved in looking at the new home support worker handbook, the new care plan layout, the reablement project and the Care Inspectorate inspection process.

The newsletter included information about staff recruitment and training.

Lay Assessor Reports

Some of the service users I spoke to did not know who was from the hospital and who was from the council but felt it did not matter as both staff groups were equally good in caring for their needs. No one had any complaints about the home carers - people said they always carried out their duties with respect and dignity. Several clients talked about how the carers always made them laugh when putting cream on, some of whom had two or three different creams every day with elastic stockings having to be put on after that. Bathing and drying was also spoken about positively. One client told the group that, very often, her carer is the only person she sees in a week and she would not know how to cope if the council did not provide such a service. I met two clients who were members of the council focus group and they explained what happened at these meetings. They also talked about the other initiatives the council carried out to try and ensure everyone using the care services knew what was happening throughout the area. One member tried to encourage others to go along to the next focus group roadshow. This is the second time I have been part of this inspection and it was good to see some of the same people, hear the good reports of the care and support service, and that, in the main the clients knew about the complaints procedure, had regular reviews, knew they had a care plan and they thought the service was second to none. I was also told about the day care service where I met the majority of clients who then told me how good the staff were - very caring, friendly, and supportive of them.

Service users from the focus groups told me:

"I think of my home help as my friend."

"I would give my carer 99 out of 100."

"Sometimes the staff are in a rush because they are given extra clients to go to - this is more so at the weekends but they always manage to carry out all the care I need."

"The quality of staff is second to none."

Everyone I spoke to said all the carers who attended them were very good and very respectful. Two of the family members said the carers always spoke to them and asked how they were and everyone said staff had enough skills to care for them.

I spoke with three members of the focus group. They all thought they were listened to and said that issues they raised were taken on board. They were involved in staff interviews though up until now that has only been care staff and not supervisory staff although it later emerged that was because there had been no supervisory appointments.

Areas for improvement

In addition to the related areas for improvement detailed under Quality Theme 1, Statement 1:

The service had hoped to involve the focus group and other people using the service in staff training, specifically the planned core training that was to be provided to all staff. This had been put on hold while the reablement training was being rolled out but it was advised that this would be planned for the future.

Lay Assessor report

Service users from the focus groups told me:

"Sometimes the weekend staff don't turn up."

Grade awarded for this statement: 5 - Very Good

Number of requirements: 0

Number of recommendations: 0

Statement 3

We have a professional, trained and motivated workforce which operates to National Care Standards, legislation and best practice.

Service strengths

We found this service was performing to a very good standard in the areas covered by this statement. We concluded this after we had discussions with the staff, people using the service and relatives/carers; looked at the relevant records and reviewed the questionnaires we received.

People using the service and their relatives/carers were very positive about the quality of the staff team and the care and support they provided. Staff were said to be professional, reliable and caring. People also said that they had regular carers who were well known to them most of the time which they felt was important.

The staff we spoke with during the inspection presented as well trained, motivated, professional, knowledgeable and committed to the provision of a good quality service.

Staff were aware of the individual needs of the people they supported and discussed how they met these in a person centred way that took account of the need for safety, choice, privacy and respect for people's rights.

There had been a low turnover of staff and this had provided good continuity for people using the service and their relatives/carers.

The provider had developed policies and procedures to guide and inform staff practice. Clear standards had been set in relation to what was expected from staff and there was evidence that managers monitored staff performance.

The staff recruitment process made sure that the proper checks had been carried out to protect the people using the service.

An induction programme had been developed to provide new staff with the information and training they needed. The records we looked at showed this had been done to a very good standard. The training provided had included appropriate topics like adult support and protection, the ethos of the service and the service user charter of rights, health and safety, confidentiality and care practices. New staff had also worked alongside experienced staff as part of their induction.

A well organised staffing structure and clear management responsibilities had been put in place and this supported good staff management and accountability. This made it clear who was responsible for different aspects of the service.

There had been a planned approach to training and staff had an individual training record. Training had included mandatory topics like infection control, moving and assisting, food hygiene and dementia awareness. Staff had also received training that supported them to meet the specific needs of individual service users. We saw that training had focused on improving performance where a need for this had been identified like record keeping.

A strategy was in place to support staff to meet the qualification requirements of the Scottish Social Services Council. Staff spoken with were positive about the benefits of SVQ training and felt that access had continued to improve. The records examined showed that, to date, over 60% of the staff team had completed, or were undertaking, the relevant training and the rolling programme was ongoing.

Staff received an annual appraisal as part of the provider's approach to continuing professional development and also had supervision meetings with their manager to explore and support their individual training and personal development needs. The performance reviews (appraisals) that we looked at showed that this had been a meaningful process with training plans being followed through. Some of the staff we spoke with had received their annual appraisal and said that they had found this to be a useful process.

There had been regular staff team meetings to support good communication. There was a planned schedule to support this. These meetings had been used to discuss how the needs of people using the service were being met, changes and planned developments in the service and the training and development needs of individual staff. Staff had also been pro-active in contacting their manager when any issues or concerns came up.

Very good recording and monitoring systems that measured performance and also highlighted any issues and areas where the service could be improved had been put in place. The provider had increased staff resources in response to specific issues, for example, allocating extra staff to carry out reviews where these had fallen behind.

Staff had established good working relationships with other agencies like the local community healthcare team. This had enabled them to meet the different needs of people using the service.

Staff had a good awareness of the developments that were ongoing in the service like the focus on reablement and the new computerised communication system. Training for staff was ongoing in relation to these initiatives.

The questionnaires returned by the staff who worked in the service were very positive as was the feedback we received from the staff we spoke to. Staff valued the work they did and felt able to provide a high standard of care and support to the people using the service. Staff said that training was very good and they felt well supported by their managers. Staff also said they had enough time to carry out their duties and that extra time had been given where there had been a need for this. Some of the comments made by staff included:

"Inverclyde Council provide a very good service."

"Refresher training is always available."

"Any queries or issues are always dealt with and management are always approachable and on hand for advice, etc."

"Have meetings every six weeks with my manager. If I have a problem there is always someone that you can reach by phone. If I think someone's care plan needs updated the paperwork is done nice and quick. Managers are very approachable."

"I am very happy working as a home support worker. I feel I have had good training and am currently working to achieve SVQ Level 2. Management is generally good - sometimes there is a lack of communication which can then lead to upset service users such as changing times for visits due to hospital appointments, etc."

"I believe that people who need care at home need this service to make it possible for them to stay at home with as much independence as possible."

"It's the best department I've worked in for support and communication."

Areas for improvement

The management team should continue to monitor staff supervision, performance reviews and staff meetings to make sure that improvements are being maintained across all of the teams.

The management team and staff had a good awareness of the areas where the service could improve further, especially the weekend service. Action was ongoing in this area to improve the overall quality of the service provided like the new electronic communication system currently being piloted.

A number of senior homecare staff positions were in the process of being introduced to take on an enhanced role with the intention of addressing the areas where managers were very busy like reviews and staff management. Managers were positive about this development.

People using the service said that they would like more notice of who would be standing in for their regular carers during holiday periods or when changes were made to support teams.

Staff awareness of the relevant National Care Standards should be raised especially where they have not yet undertaken their SVQ training.

The management team should involve staff more in the self assessment process in future.

Grade awarded for this statement: 5 - Very Good

Number of requirements: 0

Number of recommendations: 0

Quality Theme 4: Quality of Management and Leadership - NOT
ASSESSED

4 Other information

Complaints

There have been no complaints upheld or partially upheld about this service since the commencement of the Care Inspectorate on 1 April 2011. Since the last inspection there had been two complaints which the Care Commission had upheld.

You can find information about complaints that have been upheld or partially upheld on our website www.careinspectorate.com

Enforcements

There has been no enforcement action taken against this service since the commencement of the Care Inspectorate on 1 April 2011. Since the last inspection, there has been no enforcement action taken by the Care Commission.

Additional Information

No additional information.

Action Plan

Failure to submit an appropriate action plan within the required timescale, including any agreed extension, where requirements and recommendations have been made, will result in SCSWIS re-grading the Quality Statement within the Management and Leadership Theme as unsatisfactory (1). This will result in the Quality Theme for Management and Leadership being re-graded as Unsatisfactory (1).

5 Summary of grades

Quality of Care and Support - 5 - Very Good	
Statement 1	5 - Very Good
Statement 5	5 - Very Good
Quality of Staffing - 5 - Very Good	
Statement 1	5 - Very Good
Statement 3	5 - Very Good
Quality of Management and Leadership - Not Assessed	

6 Inspection and grading history

Date	Type	Gradings
24 Aug 2010	Announced	Care and support 5 - Very Good Staffing Not Assessed Management and Leadership 4 - Good
21 Aug 2009	Announced	Care and support 4 - Good Staffing 4 - Good Management and Leadership 4 - Good
5 Sep 2008	Announced	Care and support 4 - Good Staffing 4 - Good Management and Leadership 4 - Good

All inspections and grades before 1 April 2011 are those reported by the former regulator of care services, the Care Commission.

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Tha am foillseachadh seo ri fhaighinn ann an cruthannan is cànan eile ma nithear iarrrtas.

অনুরোধসাপেক্ষে এই প্রকাশনাটি অন্য ফরম্যাট এবং অন্যান্য ভাষায় পাওয়া যায়।

-ہے بایتسد می ونابز رگی د روا ولکش رگی د رپ شرازگ تعاشا ہی

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

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Neil Duffy

From: Terry Loughran
Sent: 08 December 2011 09:33
To: Neil Duffy
Subject: Declined: All Members' Briefing on the Operating Model review Report

Will be at a Clyde Valley procurement thingy

Terry