

Report To: Community Health & Care
Partnership Sub Committee

Date: 25th April 2013

Report By: Brian Moore
Corporate Director
Inverclyde Community Health &
Care Partnership

Report No:
CHCP/34/2013/BC

Contact Officer: Beth Culshaw
Head of Health & Community
Care

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Subject: INSPECTION OF INVERCLYDE CHCP'S CARE AND SUPPORT
AT HOME SERVICE

1.0 PURPOSE

1.1 To advise members of the outcome of the inspection conducted by the Care Inspectorate in relation to Inverclyde's Care and Support at Home service.

2.0 SUMMARY

2.1 The Care Inspectorate carried out an inspection of Inverclyde's Care and Support at Home service in the last week of October 2012.

The Service retained grade 5 Very Good for Quality of Care and Support, and Quality of Staffing and improved to grade 5 Very Good for Quality of Management and Leadership.

3.0 RECOMMENDATION

3.1 To note the positive outcome of the inspection and Inverclyde's ongoing commitment to the provision of high quality Care at Home services. An action plan has been developed to progress the recommendations and areas of improvement contained within the report.

Brian Moore
Corporate Director
Inverclyde Community Health & Care
Partnership

4.0 BACKGROUND

- 4.1 Inverclyde's Care and Support at Home service, based at the Hillend Centre, was subject to a Short Notice Announced Inspection in October 2012.

The report concluded that:

The Care & Support 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 service users and their relatives.

The report also commented positively on the services use of focus groups, customer feed/back forms, an improved newsletter and the availability of public information.

Reference was also made in the report to low staff turnover and the increasing use of tele care and tele health equipment. The successful implementation of reablement and the introduction of CM2000 was also referenced.

During the period of inspection a new staffing structure had not long been introduced and the report commented positively on staff training, regular staff meetings and the introduction of an appraisal system.

The findings of the report were partially based on discussions with 39 service users and 83 questionnaires, completed by service users, carers and staff.

The report also identified potential areas for improvement and noted that some people weren't happy with the number of different staff that provided them with support. The report suggested that review meetings and customer feedback forms should be used to get service user views on the consistency of staffing and the numbers of staff that attend individual service users.

- 4.2 The following recommendations were made-:

in relation to Theme 1, Statement 1, "We ensure that service users and carers participate in assessing and improving the quality of care and support provided by the service"...A system to oversee the planning and tracking of service users' six monthly reviews should be introduced;

in relation to Theme 3, Statement 3, "We have a professional, trained and motivated workforce which operates to National Care Standards, legislation and best practice"...A targeted review of service users' satisfaction in relation to the continuity of staffing should be carried out to identify and address any areas of concern;

in relation to Theme 4, Statement 4, "We use quality assurance systems and processes which involve service users, carers, staff and stakeholders to assess the quality of service we provide"...The continuity of staffing and how this is promoted and monitored should be discussed with contracted agencies on a regular basis, and a policy should be devised and implemented to inform and support the approach taken to carrying out spot checks on staff.

5.0 PROPOSALS

- 5.1 Inverclyde CHCP will continue to apply the principles in Reshaping Care for Older People to continuously improve Inverclyde's Care and Support at Home Service.

6.0 IMPLICATIONS

6.1 Legal: None

6.2 Finance: There are no financial implications in respect of this report.

Cost Centre	Budget Heading	Budget Year	Proposed Spend this Report	Virement From	Other Comments

6.3 Personnel: None

6.4 Equalities: None

6.5 Repopulation: None

7.0 CONSULTATION

8.0 LIST OF BACKGROUND PAPERS

8.1 Care Inspectorate Report.

Care service inspection report

Care & Support at Home

Housing Support Service

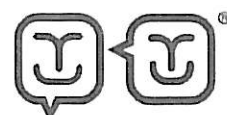
Hillend Centre
2 East Crawford Street
Greenock
PA15 2BT
Telephone: 01475 715-946

Inspected by: Isabel Purdue

Colin McCracken
Marjorie Bain
Gerry Tonner

Type of inspection: Announced (Short Notice)

Inspection completed on: 31 October 2012



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

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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	5	Very Good

What the service does well

At this inspection we could see that the meaningful participation of service users and their relatives/carers continues to be promoted and managed to a very good standard. The staff team are 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 service users' health, wellbeing and independence to ensure they can continue living at home for as long as possible. There are also good quality assurance systems in place to monitor the standard of service being provided.

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 continuity of staff usually received. At this inspection, we could see that this had improved a lot but some people still had concerns about this.

We made four recommendations about planning and tracking service users' six monthly reviews, monitoring the continuity of staff and improving quality assurance under quality statements 1.1, 3.3 and 4.4.

What the service has done since the last inspection

The reablement service has become well established with very positive results for the people using it. The use of telecare equipment has also continued to increase and both these initiatives have supported service users to remain more independent.

Twenty four senior home support worker (HSW) roles have been introduced and the electronic communication system (CM2000) has been rolled out to 50% of the service.

Conclusion

The 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 service users and their relatives/carers.

Who did this inspection

Isabel Purdue

Colin McCracken

Marjorie Bain

Gerry Tonner

Lay assessor: Janine Cameron Barbara Barnes

1 About the service we inspected

The Care Inspectorate regulates care services in Scotland. Prior to 1 April 2011, this function was carried out by the Care Commission. Information in relation to all care services is available on our website at www.careinspectorate.com

The Care Inspectorate will award grades for services based on findings of inspections. Grades for this service may change after this inspection if we have to take enforcement action to make the service improve, or if we uphold or partially uphold a complaint that we investigate.

Requirements and recommendations

If we are concerned about some aspect of a service, or think it could do more to improve its service, we may make a recommendation or requirement.

- A recommendation is a statement that sets out actions the care service provider should take to improve or develop the quality of the service but where failure to do so will not directly result in enforcement.
- A requirement is a statement which sets out what is required of a care service to comply with the Public Services Reforms (Scotland) Act 2010 and Regulations or Orders made under the Act or a condition of registration. Where there are breaches of the Regulations, Orders or conditions, a requirement must be made. Requirements are legally enforceable at the discretion of the Inspectorate.

Inverclyde Council's Care & Support at Home service has been registered with the Care Inspectorate since April 2011 to provide an integrated Housing Support and Care at Home service to people living in their own homes. The service includes reablement, home care, meals on wheels, respite, community alarms, telecare, benefits maximisation 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.

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' home 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 - Grade 5 - Very Good

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.careinspectorate.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 22, 23 and 30 October 2012. The inspection was carried out by Care Inspectorate Inspectors Isabel Purdue, Colin McCracken, Gerry Tonner and Marjorie Bain who were accompanied by Lay Assessors Janine Cameron and Barbara Barnes.

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

We sent 100 questionnaires to service users and their relatives/carers. Seventy completed questionnaires were returned before the inspection. We also received completed questionnaires from 13 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
- 83 questionnaires that had been requested, filled in and returned by staff (13), service users (62) and their relatives/carers (8)
- participation records including support plans, meeting minutes, newsletters and customer feedback forms/questionnaires
- service users' personal plans including assessments, care plans, risk assessments and daily recordings
- formal care reviews
- focus group meeting minutes
- staff supervision, training and development records
- staff meeting minutes
- the service information leaflets
- the quality assurance policy
- quality assurance records
- health and safety records
- accident and incident records
- the complaint policy and log

- the reablement policy
- reablement activity report June-September 2012
- Inverclyde Telecare Strategy
- community alarm and telehealthcare report October 2012
- Inverclyde Carers Strategy 2012-15
- discussions with various people including:
 - 51 service users either on a 1-1 basis, by telephone or in small groups. This included people who used the home care; reablement; telecare and out of hours services
 - 38 staff including: mainstream home support workers (8); out of hours staff (5); mobile community alarm staff (5); senior home support workers (4); home support managers (5); acting home support manager (1); co-coordinators/ home support officers (3); the reablement lead; a clinical lead; the community alarm team leader; the community alarm manager; the tele-healthcare coordinator; the CM2000 technician and the service manager

Lay assessors also spoke with 39 service users - 14 on a 1-1 basis in their own home or in focus groups and another 23 by telephone. Two family members also spoke with lay assessors on their relative's behalf.

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

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 manager. We were satisfied with the way the manager had completed this and with the relevant information they had given us for each of the headings we grade them under.

The 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

We spoke to 88 service users and 2 relatives during the inspection using 1-1 meetings, telephone interviews and small focus groups. Very positive comments were made about levels of involvement; the care and support provided; the staff team; reliability; continuity of staff; the personalised service provided and the overall management of the service. The main area of concern for some service users was the continuity of staffing when their regular carers were off.

We also sent out 100 questionnaires and 62 of these were completed and returned by service users before the inspection. The questionnaires asked questions about personal planning; communication; staffing; involvement and awareness of complaint procedures.

The responses to the questions asked were very positive. When asked whether they were happy overall with the quality of the care and support provided by the service:

- 38 respondents strongly agreed that they were
- 23 respondents agreed that they were
- one person chose the 'don't know' option

We discussed the outcome of the questionnaires with the management team. The main areas where respondents chose the 'no' or 'don't know' answers were in relation to awareness of complaint procedures and not being sure about being asked for opinions regarding making improvements. Although we found that service users had been given information about both these aspects of the service, action should be taken to reinforce this in newsletter, questionnaires and review meetings as a reminder.

The comments recorded in the questionnaires and those we received from our meetings and telephone interviews are detailed under the relevant quality statements throughout this report.

Taking carers' views into account

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

We sent out 100 questionnaires and eight of these were completed and returned by relatives/carers before the inspection. The questionnaires asked questions about personal planning; communication; staffing; involvement and awareness of complaint procedures.

The responses to the questions asked were very positive. When asked whether they were happy overall with the quality of the care and support provided by the service:

- 4 respondents strongly agreed that they were
- 4 respondents agreed that they were

The comments recorded in the questionnaires and those we received from our interviews are detailed under the relevant quality statements throughout this report.

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

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 had performed to a very good standard in the areas covered by this statement. We concluded this after we spoke to staff, service users and relatives/carers; looked at the relevant records and reviewed the questionnaires we received.

There had continued to be a strong commitment to the meaningful participation of service users and their relatives/carers. We saw that staff valued their involvement and recognised their right to be consulted and involved when making decisions about the care and support to be provided.

The areas for improvement we discussed at the last inspection in relation to the involvement of service users and their relatives/carers had been addressed. This had led to people getting more information about the service which was a positive development.

There had been a low staff turnover and the staff we spoke to knew the people they supported very well. Service users told us that they had developed positive relationships with staff who met their care and support needs in line with their individual choices and preferences. We found that there were very high levels of satisfaction with levels of involvement and the quality of the care and support provided. Some of the comments made included:

"If there's anything I'm not happy with or sure about it's not a problem for them. I'm not worried about raising anything - I know they'll deal with it properly and kindly."

"From the beginning I was able to tell them what I wanted because they asked me. I couldn't have better attention."

"It was a relief to know that they wanted to know about me and the way I liked things to be done - it made me feel like I was important to them and not just a number."

"I was included from the start - it was made clear to me that what I wanted was important to them."

"I know about the complaint procedure but I don't have any - the care they give is first class."

"They have a meeting with us to discuss if things are going okay to see if the black folder (personal plan) needs to be changed."

"The newsletter is a lot better now - I look forward to reading it and it keeps me up to date with what's happening."

"The girls treat me like an individual and not just a job they have to attend to. All the carers are wonderful."

"All of the girls that deal with (relative) are very kind and helpful. They treat him with respect and let him keep his dignity. (Relative) was a very private person and would not allow help with personal care, however, the girls have worked with him and he now allows them to help him a lot and we all really appreciate it."

Service users had been given a written agreement when they started using the service and they had been involved in putting this together. The agreement detailed the service that would be delivered and people told us they had felt well informed about the kind of support they would get. Having a written agreement lets people know what their rights are and what to expect from a service which is good practice.

The personal plans we looked at reflected service users' needs, choices and personal preferences in very good detail overall. There was evidence to show that staff had recorded and respected the choices made, for example, a preference for male or female carers. This information supported staff to meet service users' needs in a way that was acceptable to them.

The minutes of the review meetings we looked at showed that service users and/or their relatives/carers had been involved. Other people like GP's, district nurses and private providers who delivered care packages on behalf of the service had also been consulted where this was appropriate. We saw that this had supported good communication and joint working. The review records were detailed and showed that the service had been responsive to the views expressed. Changes had been made where necessary to keep personal plans accurate and up to date. This approach

helped to make sure that service users' needs continued to be assessed and met properly.

The service user focus group had become well established and continued to develop as detailed under quality statement 4.1 in this report.

The questions in the customer feedback forms focussed on aspects of the service that were important to service users. This included being treated with respect, whether the service was reliable and consistent, what they thought of staff and being able to make choices. We saw that there had been high levels of satisfaction. Where areas for improvement had been identified action had been taken in response, for example, some service users indicated that they wouldn't know what to do if their home support worker didn't turn up. This had been discussed with the individuals concerned so they were clear about what they should do.

A new customer feedback form had been developed and used to get feedback about the new reablement service. The questions were specific to this aspect of the service. Responses had been very positive and there had been high levels of satisfaction. The format had been changed to make it easier to use in response to service users' needs. We saw that any issues or suggestions for improvement had been discussed with service users on a 1-1 basis and this information had been used to inform the continued development of the reablement service.

The newsletter had been reviewed and improved. Those who recalled the newsletter told us they thought it was informative. The newsletters we looked at contained a range of useful information and encouraged readers to become involved. The newsletters had been a very good way of getting information and updates across given the very large number of people using the service.

Service users had been told about the outcome of the customer feedback survey via the newsletter. This had been done very well and detailed the key areas for improvement and the action being taken to carry this forward. This was a very good way of letting people know how their involvement had influenced the quality of the service.

Information about the outcome of the last inspection and the grading scale had also been included in the newsletter. This covered "what we do well" and "what we could do better". This was a very good way of keeping people informed about good practice as well as changes and improvements that were taking place.

A very good range of written information had been developed about the Care & Support at Home Service. This could be provided in different formats in response to service users' needs, for example, larger print. Service users told us they had been given very good information in the form of leaflets and other records. This let people know about the services provided and what they could expect.

The service had established close links with the local advocacy service and promoted this where a need was identified. This meant that service users could get independent advice and support if they needed it.

The provider had a formal complaint procedure and service users had been given a copy of this. Most of the people we spoke to knew how to raise a complaint and those who weren't sure about the complaints process told us they were confident that if they had a problem it would get sorted out.

We saw that there was a system in place to record and address any complaints received. The records we looked at showed that the small number of complaints received had been very well managed. A record of more informal comments had also been kept to see if there were any common issues that needed to be followed up and this had been done. This was a pro-active approach that helped to resolve more minor issues before they became serious enough for a complaint to be made.

Lay Assessor reports

Everyone was very pleased with the care and support that they received and were very complimentary about the carers and the quality of the support that they are given. All people asked were aware of support plans (which some service users refer to as their black book/folder) and review meetings. Some comments were:

"The newsletter gives me lots of information and phone numbers for contact."

"My black book is filled in every day."

"My care support plan is reviewed - it's running okay."

"The black book? -yes it is filled in."

"The supervisors are very open to have a discussion about my needs."

"I have a care support plan - I'm okay with the services I'm getting."

"My personal file is kept up to date."

"No complaints."

"Great service - very pleased with it."

"I'm quite happy with the services."

"I'm pleased I'm getting as much as I am."

"It's a good package."

"It's like a big family - a wee community."

"It suits my needs."

"I know when they're coming and I find everything fine."

Areas for improvement

It was intended that the planning and tracking of service users' six monthly reviews would become part of the new senior home support worker role. A system to oversee this should be introduced by the management team until this becomes well established to make sure that reviews continue to be well managed. We made a recommendation about this - see recommendation 1.

More training on record keeping was planned for staff to continue to improve the quality of information being recorded in service users' personal plans.

The manager was going to explore the provision of an audio newsletter for service users' who couldn't read the printed one.

At the last inspection, the management team had been looking to develop a carers group to support carers and promote their involvement in the assessment and development of the service. Since then it had been identified that this may be more successful by linking in with the Inverclyde carers centre. Stronger links had been made with the carers centre and the service had put an identified staff link in place to continue to support and develop this initiative. It was planned that there would be a joint approach to contacting carers with a view to establishing a carers group for homecare users.

The Care & Support at Home leaflets and other information were in the process of being updated to reflect the work of the Inverclyde Community Health and Care Partnership (CHCP).

Grade awarded for this statement: 5 - Very Good

Number of requirements: 0

Number of recommendations: 1

Recommendations

1. A system to oversee the planning and tracking of service users' six monthly reviews should be introduced.

National Care Standards - Care at Home, Standard 3: Your Personal Plan; Standard 4: Management and Staffing.

Statement 3

We ensure that service users' health and wellbeing needs are met.

Service strengths

We found this service had performed to a very good standard in the areas covered by this statement. We concluded this after we spoke to service users, relatives/carers and staff; looked at the relevant records and reviewed the questionnaires we received.

Staff had worked in partnership with service users, relatives/carers, social workers and other staff from the local community healthcare network to make sure that each individual's health and wellbeing needs had been properly assessed. Staff had also carried out risk assessments in relation to areas like mobility; safety and the home environment; nutrition and skin care. These aimed to identify and reduce risks while still respecting service users' choices and preferences.

The personal plans we looked at contained very good information about service users' health and wellbeing needs. The minutes from review meetings also showed that service users and/or their relatives had been involved in discussing whether the personal plan continued to meet their needs with changes being made where necessary.

Staff told us they had been provided with information about service users before working with them for the first time. This meant that staff knew what they had to do to meet people's individual needs from the start. Service users all had a copy of their personal plan in their own home and staff had kept a record of what they had done each time they visited. This let family members and staff know what was happening from visit to visit.

The electronic communication system (CM2000) that had been introduced last year took account of the specific needs of service users and matched this with staff that had the skills to meet their needs. Visit times could also be set and prioritised for people who needed calls at particular times, for example, someone with diabetes.

The staff teams knew the service users they attended very well. This had been supported by the low turnover of staff which provided very good continuity overall and service users and relatives told us this was important to them. They said:

"The girls all know me well and I know them - I've had the same carers for a long time now."

"I have my own carers all the time apart from when they're on holiday or off sick. The workers that stand in for them are every bit as good but you develop a special bond with your regular carers."

"I'm very happy with the girls that come in to me. I know them really well - they've become like part of the family."

"Apart from at holiday times (relative) gets the same carers every week which is good as you don't want lots of different people coming in and doing personal care. The way it works (relative) has their dignity and we've got to know the girls well - they're first class."

"I would like to say that all the carers who have attended me have treated me with care and respect. I have no complaints to make about the service I have received."

"I am a very recent 'member' of the care group and since beginning I can say that I have been very impressed. I find the girls very helpful, obliging, polite and caring. At my age, it has made quite a difference and very much appreciated."

The training provided to staff informed and supported them to meet service users' health and wellbeing needs. Where staff needed to know about specific health conditions training had been provided, for example, Parkinson's disease and dementia awareness.

Staff told us what they did if they had concerns about service users' health and wellbeing. This included liaising with family members, care managers and GP's depending on the circumstances of individual service users. The records we looked at showed that staff had acted quickly and properly in response to health issues.

There had been very good communication between managers and their staff teams to review and discuss the needs of individual service users on a regular basis. We found that this had been managed properly in response to people's changing needs, for example, providing equipment, changing support times if this suited people better or increasing/decreasing the level of support. This had supported a flexible and responsive service that changed quickly where there was a need for this.

The reablement service introduced last year had been very well managed and had become well established as a result. The purpose of this service was to help people to remain as independent as possible at home by supporting them to regain daily living skills and confidence following a period of illness, accident or disability. Staff had been given training on reablement so that they knew what this service aimed to achieve. At the end of the reablement period reviews had been held to see if people could manage on their own or if they needed ongoing support. We saw that this had been flexible and people who hadn't been as independent as possible after the initial six weeks had been supported for a longer period of time after which they no longer needed the service. Where service users had transferred to homecare they had been able to manage with less help than before. Goals had been set with each individual and the cases we looked at showed that this had been very successful with service

users experiencing excellent outcomes that meant they could live at home as independently as possible. People who had used this service were very positive about the benefits.

The number of service users being supported to live at home for longer with the use of Telecare equipment had continued to increase. This strategy used a wide range of technology to help vulnerable people to remain at home in safety using a wide range of equipment like falls detectors, epilepsy monitors, bed sensors, flood detectors, door exit monitors and so on. The service was supported by a 24 hour mobile response team.

Telehealthcare equipment had been used to support service users with long term health conditions to test themselves for key warning signs as often as they wished through the day. The system had been monitored by a qualified nurse and alerts had been given where it had been identified that someone needed to take medication before their condition got worse. The telehealthcare initiative had resulted in excellent outcomes for the people using it and the management team could show that it had resulted in a 78% reduction in hospital admission for people using the system. The number of people using this equipment had doubled and consideration was being given to other health conditions that this could be used for. People who used it told us:

"Before having this I was in hospital five or six times a year. Now I've only been in once in the last 2 years."

"It's kept me out of hospital, I've only been in once in the last three years. It's also a great reassurance to know someone checks my results."

The community alarm service had been well managed and had an established team of staff. We saw that service users had received a very good response from staff when they needed help and action had been taken to follow up any issues identified. Service users told us:

"I always get a quick response."

"I can't think of any improvements - when I need to use the alarm they've been fantastic."

"I'm quite happy - they explained everything very well when they came to install the alarm."

"They check the alarm once a quarter and encourage me to buzz them in between to check its working."

"It makes me feel safe and that lets me live in my own home without having to worry - I know they're there for me if ever I need them."

Recently, staff had noticed that they had attended a lot of service users who had fallen. The individual circumstances had been looked at in detail to find out why this was the case to see what could be done to help reduce the number of falls. As a result, an occupational therapist assistant was being recruited for a year to help develop a longer term strategy to reduce the risk of falls for people living in the community. This was an important initiative as falls can result in people no longer being able to live independently at home.

Staff had been able to provide small pieces of equipment like remote control sockets and big button switches quickly where they saw that service users would find them useful. This helped to promote independence.

We found that staff had worked well with other professional agencies to promote safety for service users, for example, the fire service had referred people they saw as being vulnerable in the event of a fire to have an alarm fitted. This meant that the fire service would be directly alerted. This was very important to people who couldn't get themselves out in the event of a fire. One service user told us they felt reassured by this and said "my alarm has gone off a couple of times and the fire brigade have come out."

Staff had been working jointly with the hospital support worker from the Inverclyde carers centre to ensure that patients and carers had accurate information about their homecare service prior to discharge. This approach helped to identify and address any gaps in service.

A support worker linked to the Inverclyde carers centre had been working with staff there to develop emergency support plans for service users. This was in relation to planning ahead for unexpected situations that might happen to make sure that the necessary supports were in place.

Lay Assessors reports

Everyone was very pleased with the care and support that they receive and were very complimentary about the carers and the quality of the support that they are given. Some comments were:

"I get excellent care. They are very respectful to us both."

"Very pleased with all the care I receive. Carers are very kind, helpful and respectful."

"I'm very happy with mum's care during the week and at weekends."

"I'm very comfortable with the girls as I'm so well looked after. They go above and beyond for me."

"Carers are very helpful and respectful. They would do anything for me."

"I'm really happy with the care."

"Very good services - it took me a lot of time to get settled in but they have given me my life back."

"I feel safe now."

"The care is fantastic."

Areas for improvement

Although there were high levels of satisfaction with the service and the quality of the staff, there were some people who weren't happy with the number of different staff that provided them with support. We made a recommendation about this under quality statement 3.3 in this report. The management team knew about this and were taking action to monitor this to address service users' concerns. The CM2000 system was being used as part of this process as it could quickly show who the staff were that attended each service user over any period of time.

More training was planned for staff to continue to improve the quality of recording in service users' personal plans.

A more formal system was being set up to record and review any missed calls. Although this had happened very rarely and a record had been made, it was good practice to have a more in-depth process that looked at why a call was missed to reduce the risk of it happening again.

Consideration was being given to introducing a GPS system called the Buddy System. This would allow vulnerable people to leave their house for a walk within a known area with an alert being sent if they went outside the agreed zone. This technology would reduce the level of risk for people while supporting and promoting independence by allowing an individual to go out on their own if they wanted to.

The CM2000 system was in the process of being rolled out in the remaining areas so that the whole service would be covered.

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 had performed to a very good standard in the areas covered by this statement. We concluded this after we spoke to staff, service users and relatives/carers; looked at the relevant records and reviewed the questionnaires we received.

In addition to the related strengths detailed under Quality Statement 1.1:

Service users' views on the quality of staffing had been asked for using the review process and the customer satisfaction surveys. We saw that the feedback received had been very positive. During the inspection we also found that there were high levels of satisfaction with the quality of the staff team and the service they provided.

Service users had been asked routinely if they had a preference for a male or female worker. Where a preference had been stated this had been respected and recorded in personal plans.

Where service users had asked for a change of carer this had been done. We found that this had been carried out in a non-judgemental way with the focus being on service users feeling comfortable and confident with the staff who attended them.

The focus group had become routinely involved in aspects of the service relating to staffing. This had included:

- involvement in staff recruitment
- developing the questions about staffing that had been included in the customer satisfaction survey
- involvement in developing the new staff handbook
- presentations about the new senior home support worker role

The way the focus group had been supported to be involved in meaningful ways was very good and the members we spoke to were very positive about the way this had been developed and supported.

The newsletter included information about staffing topics like the development of the senior home support workers.

Areas for improvement

In addition to the related areas for improvement detailed under quality statement 1.1:

Although the feedback about staffing was very positive overall, consideration should be given to adding specific questions to review meetings and customer feedback forms to get service users' views on the following:

- the consistency of staffing
- the number of different staff that attend individual service users
- how well sickness and holiday cover is managed

Along with the monitoring carried out by the management team using the CM2000 system, this would help to identify any particular issues that individual service users might have. We made a recommendation about this under quality statement 3.3 in this report.

It was planned that members of the focus group would become more involved in staff training from early 2013 onwards.

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 had performed to a very good standard in the areas covered by this statement. We concluded this after we spoke to service users, relatives and staff; looked at the relevant records and reviewed the questionnaires we received.

The service users and relatives we spoke to during the inspection were very positive overall about the quality of the staff team and the care and support they provided. We were told that most of the staff "go that extra mile" doing extra jobs in their own time such as bringing in morning rolls, posting letters and making additional cups of tea. Lots of people told us they could not manage without the service and were very grateful to the staff. We received a lot of very positive comments including:

"Priceless - really good lassies."

"The carers are always cheery each time they attend me. They see to my needs and I look forward to seeing them. They have had a good training and we have an excellent rapport with each other."

"They can't be more helpful and polite."

"Brilliant - couldn't complain - very courteous."

"They go over the top to help."

"Absolutely great staff - will do anything for you."

"I look forward to the friendly banter with the carers and feel so much better."

"The tuck in is excellent - I feel very secure."

"No bother with any of them - I'm very content."

"I'm very happy - I don't know how anyone could be anything else but happy."

"Excellent - couldn't ask for better, very caring and very considerate. I have the admiration for all the girls."

"Two decent lads - very easy to get on with."

"Some carers are exceptional - very good and very efficient."

"I would look at the service as a life saver for both me and my wife."

"The community alarm is also a very good service. It is checked regularly and gives me peace of mind."

In terms of the reablement service, staff were said to be experienced, skilled and responsive to needs. Some of the comments we received included:

"They are so polite, well trained and obliging."

"I couldn't have done without the service."

"Overall it was a very positive experience."

"The staff are good - trained up and they focused on my needs."

"They were super."

"I had the paperwork and this reflected what I needed to be helped with."

"I was very satisfied with the work of the carers."

"I wrote up the goal plan with them".

"They gave me great respect."

"I have been very well looked after by all the carers who have visited me. I cannot fault any part of the service and can only praise all the lassies who showed such kindness and patience to me. I was really sorry when I didn't need them any more."

The provider had developed policies and procedures and a new staff handbook to guide and inform staff practice. Standards had been set so that staff were clear about their roles and responsibilities. We saw that arrangements were in place to monitor staff performance to make sure that the expected standards were being maintained for service users.

A clear staffing structure had been put in place and this set out who was responsible for different aspects of the service. Information about who to contact had been given to service users. This had supported good staff management and accountability.

Twenty four senior home support worker posts had been introduced since the last inspection in response to the needs of the service. A specific training programme had been delivered to inform and support this role. As well as making home visits and carrying out support, these staff had a supervisory role and dedicated management

time. This was a positive development that and supported home support managers and further promoted the approach to quality assurance.

There had been a planned approach to staff training and this had been monitored to make sure the required training had taken place. Some of the topics were mandatory which meant that staff had to attend. This had included child and adult protection; health and safety; moving and assisting; infection control and fire awareness.

We found that staff had undertaken training that was responsive to the specific needs of individual service users. This had included topics like Parkinson's disease, alcohol awareness, palliative care and meal time assistance. Extra training had also been arranged where it had been identified that parts of the service needed more development, like record keeping. This was a good approach that supported continuous improvement.

A training programme had been put in place to support staff to get qualifications that would allow them to register with the Scottish Social Services Council (SSSC). The purpose of the SSSC staff register is to support the delivery of a safe and qualified social care workforce. To date, 70 % of home support workers were trained to SVQ Level 2 and 41% of senior home support workers had SVQ level 3.

A new appraisal system had been introduced to support staff performance and development. Staff also had supervision meetings with their manager to explore and support their individual training and personal development needs.

There had been regular staff team meetings to support good communication. These meetings had been used to discuss caseloads, changes and planned developments as well as the training needs of individual staff. Staff told us they could access their manager whenever they needed to when any issues or concerns came up.

The CM2000 system was being used to monitor how many different home support workers were going to service users when their regular workers were on holiday or off sick. This was to identify any issues to cut down on the number of different staff attending individual service users.

We found the staff we spoke with during the inspection to be professional, knowledgeable and motivated to provide a good quality service. Staff said training was very good and they felt well supported and safe at work. There had been a low turnover of staff and this had provided good continuity for service users and their relatives/carers. Staff valued the work they did and felt able to provide a high standard of care and support.

We received 13 completed questionnaires from staff with different roles who had worked in the service for a period of less than six months up to six years and over. The questionnaires asked questions about policies and procedures; training and

development; resources; safety; communication and views on the quality of the service being provided. The responses to the questions asked were very positive. The comments in the questionnaires included:

"The training I receive related to my job is very good. It helps me to provide a good service to service users."

"I attended lots of training in my first month to prepare me for job role."

Lay Assessors Reports

People had very positive views about the staff. Some of the comments were:

"They are so punctual I could put the kettle on for them."

"The girls do a magnificent job - I wouldn't like to do it!"

"I'm delighted with my carer during the week."

"Overall the carers are lovely and would do anything for you."

"They are very pleasant and helpful - they chat away to you. I can't complain about anything."

"No complaints about the care - girls come at the right time."

"Staff are brilliant, great - no complaints."

"Staff are fine - you can approach them if you are worried."

"The two girls that come are very good - I get on well with them and they always come at the right time - perhaps an hour late if it's another girl."

"Staff treat me well - very respectful."

"Girls are very nice and helpful."

"Girls are lovely - every one."

Areas for improvement

As detailed under quality statements 1.3 and 3.1, some service users felt the continuity of staff could be improved, especially at weekends and during holiday periods. Most of the service users we had contact with were very happy with their staffing arrangements but some people felt there had been a deterioration in regular carers since the CM2000 system had been introduced. They told us:

"If there could be a way of people getting the same worker in when its holiday time that would be better."

"Sometimes different girls at weekends - all the girls are still very pleasant but I have had six different girls at a weekend."

"I would like to see more regular weekend staff."

"I would prefer to have the same home care helpers Monday to Friday rather than having the week split between two different helpers as at present."

"I don't like getting different members of staff who do not know me when my regular girls are off."

The management team were aware that more training and support was to be given to staff who were new to organising staff allocations and this was in the process of being reviewed to address these concerns. The management team should take action to find out how many people have concerns about this to address any issues on a case by case basis - see recommendation 1.

A trial was ongoing where service users were being given a print out detailing the staff who would be covering when regular home support workers were on holiday and the times they would attend.

The registration of staff with the SSSC was ongoing with priority being given to staff who had recently taken on the role of senior home support worker.

Lay Assessors report

"Carers are excellent - only at weekends is it a bit confusing as I'm not sure when they are coming in."

Grade awarded for this statement: 5 - Very Good

Number of requirements: 0

Number of recommendations: 1

Recommendations

1. A targeted review of service user satisfaction in relation to the continuity of staffing should be carried out to identify and address any areas of concern.

National Care Standards - Care at Home, Standard 4: Management and Staffing.

Quality Theme 4: Quality of Management and Leadership

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 management and leadership of the service.

Service strengths

We found this service had performed to an excellent standard in the areas covered by this statement. We concluded this after we spoke to service users, relatives/carers and staff; looked at the relevant records; met with members of the focus group and reviewed the questionnaires we received.

In addition to the related strengths detailed under quality statements 1.1 and 3.1:

The service user focus group had become well established. We found that this had continued to be a very positive initiative that had been well managed and supported. The Lay Assessor met with members of the focus group during the inspection. They were very enthusiastic about it and said they felt valued and involved in all aspects of the service including future planning.

The purpose of the group was to support meaningful involvement and to inform people using Inverclyde Council's services about what was available to support older people. There was evidence that the management team had responded properly to feedback and suggestions from the group who had been consulted and involved in the following aspects of the service:

- the development of the new staff handbook
- the self assessment process
- the development of customer satisfaction forms
- staff recruitment
- the development of the revised care plan format

The focus group members had also been kept informed about changes and new initiatives in the service. They had attended presentations on the introduction of the senior support worker role, the CM2000 system and the reablement initiative.

The focus group had continued to carry out information sessions in the form of 'roadshows' where they visited sheltered housing complexes and local community events to raise awareness about what they did. This had involved giving out information about resources in the community, keeping people up to date with what was happening and asking for people's views about the quality of the Care & Support

at Home service. We saw that this was an excellent way of promoting and supporting meaningful involvement.

Membership of the group had continued to increase. Consideration was being given to the development of sub-groups that would be involved in specific areas like recruitment, training and so on.

The newsletter had been used to keep service users up to date with what was happening in the service. Information about how the service was performing had been included and this let people know what was being done well and the plans for further improvement.

Questionnaires had been used to get feedback from group members who had attended sessions like manual handling training and reablement to get their feedback about the content and suggestions for improvement.

As detailed under quality statement 1.1, stronger links had been developed with Inverclyde carers centre. A member of staff had been identified as a link person and there were plans to develop a group for relatives/carers.

Lay Assessors reports

Everyone was very pleased with the care and support that they received and were very complimentary about the carers and the quality of the support that they are given. Comments included:

'I get everything I need. It's a very good service. The carers are very cheery.'

All people spoken to had heard of the Care Inspectorate even if they were not fully aware of its role.

The people from the focus group using care and support at home services commented:

"Training of staff - we go and take part in this."

"If anyone has problems with homecare where we live they speak to us about it."

"The senior carer in charge is very good - they take the minutes of the meetings."

"They discuss plans for the future with us including other agencies - they keep us up to date."

"They ask our opinion - managers ask our opinion and they get us to go and do things like training roadshows."

"They do a great job - the senior carer is an excellent worker."

"We have an opportunity to speak and we get listened to."

"Our opinions are valued."

"We have brought things up at the focus group meetings and our proposals have been acted upon - for example, they changed the name from 'Dial a Bus' to 'My Bus'.

"I have a new life back."

Areas for improvement

The management team should continue to promote awareness of the focus group so that service users are fully aware of their role.

Grade awarded for this statement: 6 - Excellent

Number of requirements: 0

Number of recommendations: 0

Statement 4

We use quality assurance systems and processes which involve service users, carers, staff and stakeholders to assess the quality of service we provide

Service strengths

We found this service had performed to a good standard in the areas covered by this statement. We concluded this after we spoke to service users, relatives and staff; looked at the relevant records and reviewed the questionnaires we received.

In addition to the related participation methods detailed under quality statements 1.1, 3.1 and 4.1:

Clear standards had been set in relation to the standards that were expected from staff. The staff we spoke to knew what their roles and responsibilities were and there was evidence that senior staff monitored this to make sure standards were kept up. There were very high levels of satisfaction with the service and people told us:

"It's a great service - first class."

"I have found this service extremely helpful after I left hospital. It took a lot of pressure off my mind as to how I would cope with taking care of myself. The staff that have tended to my needs have been very helpful, pleasant and have taken good care of my needs. They have arrived at an acceptable time and make sure I have all the care possible. An admirable standard of service."

"I've no complaints but if I did I know they would sort it."

"I know who to contact if there's a problem or I need advice."

"I think it's a very well run service - I've never been let down."

"Apart from sometimes having a few too many staff if my own girls are off it's a godsend - I couldn't live in my own home without it."

"It's an exceptionally good service - they're always asking if things are okay."

"An excellent service has been provided by the home helps. There have been a couple of minor problems when the permanent staff are on holiday. However, these are sorted out when I phone the office. In general an excellent service."

We found that the service had been well organised. Individual members of staff were responsible and accountable for specific parts of the service including monitoring and reviewing quality standards. We also found that there were effective structures in place to support the day to day delivery of the service including good communication

and reporting systems.

Meetings with the contracted services that provided home care on the council's behalf had recently started. The management team aimed to have these meetings on a regular basis to increase and improve communication, consultation and information sharing. This was a positive development that should support the delivery of consistently good standards of service and joint working.

A few of the service users we spoke to during the inspection had questions and concerns and they gave us permission to discuss these with the management team. We saw that action was taken very quickly to deal with the issues raised and this showed that staff took a positive approach to receiving and addressing comments or concerns to make sure people were happy with the quality of the service they were receiving. The service users we spoke to said that any issues or concerns had been dealt with quickly.

There had been a good approach to planning and reviewing the range of services provided by the Care & Support at Home service. We looked at a number of reports that had been produced and these detailed the positive impact that each aspect of the service had on improving service users' quality of life. These reports set out what the service wanted to achieve and we saw that performance had been reviewed to measure progress. This included:

- The Inverclyde carers strategy
- The reablement activity report
- The community alarm and telehealthcare update report
- The falls project
- The telecare strategy

We saw evidence that the role of the senior HSW had made a positive impact. Part of this role involved quality assurance checks and some of the service users we spoke to referred to the senior popping in now and again to check everything was okay and to check staff recordings.

The CM2000 system had been implemented into 50% of the total service so far. This allowed information about service users' needs, changes or special instructions to be sent to staff quickly via the mobile phone system. The phone system also monitored the timing of visits and the staff who attended. An overview of this information could be easily pulled together for the management team to monitor standards. The system also provided good evidence to show whether support times needed to be increased or decreased.

Lay Assessors Reports

Comments were:

"Carers are very respectful and punctual. I have no problems at all and if I did I would know who to contact."

"I've no complaints at all. I get all the help I need. I've got a phone number to call if I'm not happy."

Areas for improvement

When meeting with the private providers who deliver home care on behalf of the service, discussion around the continuity of staffing and how this is promoted and monitored should always be included. We made a recommendation about this - see recommendation 1.

A policy should be developed to inform the approach taken to carrying out spot checks on staff. This should state the minimum number of checks that are to be carried out each year with the flexibility to increase this in response to the needs of staff and the service. A form to guide and record the checks should also be developed. A system should be established to plan and track the spot checks to make sure the policy is adhered to. We made a recommendation about this - see recommendation 2.

Service users in one area had been getting a print out detailing the timing of visits and the staff attending as a trial to see how well this worked as a way of letting people know who would be covering holiday periods. Service users who had received this told us they thought it was a good idea.

The management team should draw up a schedule detailing the local quality checks in place and how often they happen, for example, staff supervision, appraisals, meetings, care plan reviews, medication records and so on. Supporting audit tools should be developed to guide staff carrying out the checks to maintain a consistent approach. This would further improve the approach to quality assurance.

We were told that, once the CM2000 system is fully operational in all areas, there was an expectation that the contracted agencies providing home support on the council's behalf would also use this system. This is important as most of the issues around the continuity of staffing happened when regular staff were off and other agencies provided cover.

Although reviews had been well managed, consideration should be given to the way that six monthly reviews will be planned and tracked given the large number of people using the service. Discussion took place around this becoming part of the senior HSW role which could be linked in to the spot checks carried out.

While the introduction of the senior HSW role was a very positive development, the management team were aware that more work was needed to make sure that the responsibilities of staff were clear in terms of what they were expected to do and there were plans to address this.

The quality assurance policy should be reviewed and updated to reflect changes that had taken place, for example, the development of the senior HSW role in quality assurance and changes to the staff supervision system.

Grade awarded for this statement: 4 - Good

Number of requirements: 0

Number of recommendations: 2

Recommendations

1. The continuity of staffing and how this is promoted and monitored should be discussed with contracted agencies on a regular basis.

National Care Standards - Care at Home, Standard 4: Management and Staffing.

2. A policy should be devised and implemented to inform and support the approach taken to carrying out spot checks on staff.

National Care Standards - Care at Home, Standard 4: Management and Staffing.

4 Other information

Complaints

No complaints have been upheld, or partially upheld, since the last inspection.

Enforcements

We have taken no enforcement action against this care service since the last inspection.

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 3	5 - Very Good
Quality of Staffing - 5 - Very Good	
Statement 1	5 - Very Good
Statement 3	5 - Very Good
Quality of Management and Leadership - 5 - Very Good	
Statement 1	6 - Excellent
Statement 4	4 - Good

6 Inspection and grading history

Date	Type	Gradings	
4 Oct 2011	Announced (Short Notice)	Care and support	5 - Very Good
		Staffing	5 - Very Good
		Management and Leadership	Not Assessed
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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ہے-بایتسد یم وونابز رگید روا ولکش رگید رپ شرازگ تعاشا ہی

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