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<b>Report To:</b>	<b>Health and Social Care Committee</b>	<b>Date:</b>	<b>22<sup>nd</sup> October 2015</b>
<b>Report By:</b>	<b>Brian Moore Chief Officer Inverclyde Health and Social Care Partnership (HSCP)</b>	<b>Report No:</b>	<b>SW/20/2015/BC</b>
<b>Contact Officer:</b>	<b>Beth Culshaw Head of Health and Community Care</b>	<b>Contact No:</b>	<b>01475 715283</b>
<b>Subject:</b>	<b>CARE INSPECTORATE REPORT ON INVERCLYDE CARE AND SUPPORT AT HOME SERVICE</b>		

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## 1.0 PURPOSE

- 1.1 The purpose of this report is to advise Members of the outcome of the annual inspection of the Care and Support at Home Service.

## 2.0 SUMMARY

- 2.1 The Care Inspectorate carried out an unannounced inspection between 22 and 29 May 2015. Reflecting the history of previous inspections, it was carried out on a low intensity basis.
- 2.2 A full public report of the inspection and grades is published on the Care Inspectorate website.
- 2.3 The summary of grades awarded is:-

Quality of Care and Support (5)	Very Good
Quality of Staffing (5)	Very Good
Quality of Management and Leadership (5)	Very Good

## 3.0 RECOMMENDATIONS

- 3.1 Members are asked to note the outcome of the inspection and, in particular that no recommendations or requirements were issued by the Care Inspectorate.

**Brian Moore  
Chief Officer  
Inverclyde HSCP**

## 4.0 BACKGROUND

4.1 Inverclyde Council's Care and 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, Homecare, Meals on Wheels, Respite, Community Alarms, Telecare, Benefits Maximisation and a Rapid Response service. The majority of the service is provided by staff employed by Inverclyde Council although services are also 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 homecare services to assist people in their own homes and enable them to remain there
- To provide homecare in a way which will ensure that the independence of service users is enhanced and their lifestyles are safeguarded
- To provide homecare in a way that demonstrates respect for the service users' home and possessions
- To manage homecare services in a way that ensures Service Objectives and the Charter of Rights for Homecare Services are fulfilled and quality standards are met.

4.2 The Care Inspectorate highlighted that:-

- The majority of people who used the service that we spoke with or received questionnaires from were very positive about the quality of care and support provided
- Meaningful participation of service users and their relatives/carers continued to be embedded in the culture and ethos of the service
- Social care and healthcare needs were well supported through collaborative working with healthcare colleagues and other agencies
- Staff were well trained, professional and provided care and support in a person-centred way
- The quality of service was complemented by very good use of reablement, telehealthcare, telecare and assistive technology
- The provider was very good at quality assurance and continually strived for improvement.

4.3 Whilst making no recommendations or requirements, the Care Inspectorate concluded that some improvements could be made to further enhance the service in the following ways:-

- Further improving participation in the service user focus groups;
- Further improvements in complaints recording;
- Further improve communication with service users who have communication impairments.

4.4 Summary of overall grades:-

*Quality of Care and Support*  
Statement 1 Graded 6  
Statement 4 Graded 5

Overall Grade 5, Very Good

*Quality of Staffing*  
Statement 2 Graded 5  
Statement 4 Graded 5

Overall Grade 5, Very Good

## 5.0 PROPOSALS

- 5.1 The grades awarded reflect that Inverclyde's Care and Support at Home Service continues to operate at a very high standard. Continuous improvements in the service have been noted by the Care Inspectorate, enabling the service to sustain gradings from previous years.

## 6.0 FINANCE

- 6.1 Financial Implications:

Any costs associated with this report will be met from existing budgets.

One off Costs

Cost Centre	Budget Heading	Budget Years	Proposed Spend this Report £000	Virement From	Other Comments

Annually Recurring Costs/ (Savings)

Cost Centre	Budget Heading	With Effect from	Annual Net Impact £000	Virement From (If Applicable)	Other Comments

## LEGAL

- 6.2 There are no legal issues within this report.

## HUMAN RESOURCES

- 6.3 There are no human resources issues within this report.

## **EQUALITIES**

6.4 There are no equality issues within this report.

Has an Equality Impact Assessment been carried out?

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YES (see attached appendix)

NO – This report does not introduce a new policy, function or strategy or recommend a change to an existing policy, function or strategy. Therefore, no Equality Impact Assessment is required.

## **REPOPULATION**

6.5 There are no repopulation issues within this report.

## **7.0 CONSULTATION**

7.1 This report has been prepared by the Chief Officer, Inverclyde Health and Social Care Partnership (HSCP).

## **8.0 BACKGROUND PAPERS**

8.1 Care Inspectorate Report.

# Care service inspection report

Full inspection

## Care & Support at Home Housing Support Service

Hillend Centre  
2 East Crawford Street  
Greenock



HAPPY TO TRANSLATE

Service provided by: Inverclyde Council

Service provider number: SP2003000212

Care service number: CS2004078041

Inspection Visit Type: Unannounced

Care services in Scotland cannot operate unless they are registered with the Care Inspectorate. We inspect, award grades and set out improvements that must be made. We also investigate complaints about care services and take action when things aren't good enough.

Please get in touch with us if you would like more information or have any concerns about a care service.

## Contact Us

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Dundee  
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[www.careinspectorate.com](http://www.careinspectorate.com)

 [@careinspect](https://twitter.com/careinspect)

## 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

The majority of people who used the service that we spoke with or received questionnaires from were very positive about the quality of care and support provided. Meaningful participation of service users and their relatives/carers continued to be embedded in the culture and ethos of the service. Social care and healthcare needs were well supported through collaborative working with healthcare colleagues and other agencies. Staff were well-trained, professional and provided care and support in a person-centred way. The quality of service was complimented by very good use of reablement, telehealthcare, telecare and assistive technology. The provider was very good at quality assurance and continually strived for improvement.

### What the service could do better

The provider had good insight into the areas for development that needed addressed to further improve the service. We discussed some areas for improvement identified at this inspection, including improving participation in the service user focus group, signposting the provider to guidance for further improving complaints recording and discussing how staff can further improve communication with service users who have communication impairments.

Managing staff sickness/absence is also an area that the provider continues to try and improve.

### **What the service has done since the last inspection**

The service has maintained very good quality standards across all four quality themes since we last inspected the service. The quality of participation around care and support is excellent.

### **Conclusion**

Care & Support at Home is a very well liked and well received service by the people who use it. The staff in the service work hard to improve standards of care whilst promoting independence and person-centred care. There is a very good culture of learning and continuous improvement. Some elements of the service are innovative. The service is prepared to try new ideas with the involvement of people who use the service at every stage. Any areas for improvement that have been identified at this inspection are clearly understood by the provider and we are confident that they will work hard to address these.



# 1 About the service we inspected

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

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](http://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.

## Recommendations

A recommendation is a statement that sets out actions that a care service provider should take to improve or develop the quality of the service, but where

failure to do so would not directly result in enforcement.

Recommendations are based on the National Care Standards, SSSC codes of practice and recognised good practice. These must also be outcomes-based and if the provider meets the recommendation this would improve outcomes for people receiving the service.

## Requirements

A requirement is a statement which sets out what a care service must do to improve outcomes for people who use services and must be linked to a breach in the Public Services Reform (Scotland) Act 2010 (the "Act"), its regulations, or orders made under the Act, or a condition of registration. Requirements are enforceable in law.

We make requirements where (a) there is evidence of poor outcomes for people using the service or (b) there is the potential for poor outcomes which would affect people's health, safety or welfare.

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](http://www.careinspectorate.com) or by calling us on 0345 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 following an unannounced inspection. The inspection was carried out by two inspectors. The inspection started on Friday 22 May 2015 and continued over four days on various dates and times until Friday 29 May. We gave feedback to three team leaders on Friday 29 May 2015.

As part of the inspection, we took account of the self assessment form that we asked the provider to complete and submit to us.

We sent 200 care standards questionnaires to the manager to give to service users to complete and we got 89 completed questionnaires back.

We asked the manager to give out 100 questionnaires to staff and we got 43 completed questionnaires back.

During this inspection we gathered evidence from various sources, including the following:

We met and spoke with:

- 35 service users in five focus groups
- Three team leaders
- Six home support managers
- Eight senior home support workers
- Eight home support workers
- Four members of the business performance team
- Three members of the community alarm/tele-care team
- One manager from Inverclyde Centre for Independent Living (ICIL)

We also met with a sample of service users in two daycare settings, which included people who also received care from the service in their own homes.

We looked at:

- The participation strategy. This is the service's plan for how they will involve service users in all areas of the care service.
- A sample of personal plans and single shared assessment care plans.
- Service newsletters.
- A client feedback report (collated responses).
- The online scheduling and monitoring system (CM2000).
- A performance review report (April 2015).
- A sample of client observation reports.
- A sample of staff training records and a staff training plan.
- Home Support Workers Procedures and Handbook.
- The provider's complaints policy and procedures.
- A sample of accident/incident/complaint records.
- The registration certificate.
- Public liability insurance.
- Employers liability insurance.
- A sample of minutes of meetings with service users, carers and staff.

### **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.firescotland.gov.uk](http://www.firescotland.gov.uk)

## 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 provider. We were satisfied by the way the provider completed this and with the relevant information included for each heading that we grade services under.

The provider identified what it thought the service did well, some areas for development and any changes it had planned. The provider told us how the people who used the care service had taken part in the self assessment process.

From the self assessment the provider, manager and staff had compiled a development plan for making further improvements to the service. This took account of the views of service users, relatives and carers.

## Taking the views of people using the care service into account

For this inspection we received views from 124 people using the service. 89 people gave their views via care standard questionnaires that we asked the manager to give to people using the service. We also spoke with service users in small focus groups.

The majority of people that we spoke with or who completed our questionnaires said that they were happy or very happy with the overall quality of the service.

Additional comments from service users are included in the body of this report.

### **Taking carers' views into account**

We did not have the opportunity to speak with any carers at this inspection.

## 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

At this inspection, we found that the performance of the service was excellent for this statement. We concluded this after we spoke with service users and staff, observed practice and examined a range of relevant documentation.

As noted at the last inspection, meaningful participation of service users and their relatives/carers was embedded in the culture of the service. As at the last inspection, 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 service tried to promote participation wherever opportunities arose and explored new ways to do this. For example customer feedback forms not only asked for feedback but invited people who used the service to become focus group members, take part in focus group roadshows in the community, be involved in staff recruitment and contribute to the staff training programme. This demonstrated to us that the service was open, transparent and valued contributions from the people who used the service.



Comments from service users that we met during the inspection included:

"I would grade the service excellent overall."

"Its very good."

"I don't think you could ask for better. They go out of their way to satisfy you."

Service users had a written agreement when they started using the service. They and their representatives were actively involved in putting this together along with their personal plan of care. Having a written agreement lets people know what their rights are and what to expect from the service. 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 of individual service users. The participation by service users in the service users focus group and staff training group was well established. The involvement of service users in staff training aimed to raise awareness amongst home support workers and other staff of the importance of using a person-centred approach when providing care to people in their own homes. Feedback from service users and carers suggested that this was done very well.

Since we last visited the service, the provider had introduced SHANARRI as part of the initial and on-going assessment of people's care and support needs. This was an interesting development but it was too soon for us to assess how effective this tool was in improving outcomes for people. That said, it was another excellent example of a provider who is willing to try new ideas. We will revisit this at a future inspection.

SHANARRI is a set of eight indicators to assess a child or young person's overall wellbeing and identify any concerns.

The provider had adapted these indicators for use with adults. SHANARRI stands for:

- Safe
- Healthy
- Achieving
- Nurtured
- Active
- Respected
- Responsible
- Included

The majority of people that we spoke with and who completed our questionnaires were aware of their personal plans, the information contained in them and in communication diaries. Overall, people strongly agreed or agreed that their needs and preferences were detailed in their plans and that the service checked with them regularly that they were meeting their needs. The benefits of including service users in regular planning and reviews of their care include better person-centred care, more timely adjustment of support and regular feedback about the quality of care being provided.

Excellent introductory information about the service was available and this was supplemented by a welcome pack given to all users of the service. This meant that people who used the service could access key information in their own time about a range of issues. Examples included information on any service charges, how to use the community alarm system, out of hours contacts, respite services and reablement services.

Inverclyde Council had updated its website recently and this had a very useful section dedicated to information about health and social care services and this registered service in particular, (see <http://www.inverclyde.gov.uk/health-and-social-care>). This meant that existing and prospective users and carers could easily access information about the services that might be available to them.

### Areas for improvement

Some of the feedback we received from service users was that they might become more involved in the service user focus group if some of the meetings were held in daycare settings which people who received care at home also attended. We shared this feedback with the provider.

**Grade**

6 - Excellent

**Number of requirements - 0**

**Number of recommendations - 0**

## Statement 4

“We use a range of communication methods to ensure we meet the needs of service users.”

### Service Strengths

At this inspection, we found that the performance of the service was excellent for this statement. We concluded this after we spoke with service users and staff, observed practice and examined a range of relevant documentation.

Service user communication needs were assessed by staff at initial referral to the service and where necessary at care review meetings.

The provider used a range of communication methods and systems to communicate with service users. Information for service users could be provided in alternative formats to aid communication. For example the seasonal newsletter could be provided in an audio format. For people where English was not their first language an interpreter service could be accessed.

Staff communication was also an area of importance as many staff worked in the community alone or in dispersed teams. Good communication with staff was aided by the use of smart technology. An example of this was the electronic monitoring and scheduling system. This system 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.

Communication between staff and service users included the use of support plans and communication diaries kept in service users homes. This meant that staff visiting the service user could access the most up date information about any support needs the individual required. Family members and other carers could also use the communication diary as a means of passing information to staff when they were not present in the service user's home.

A new development since we last inspected the service was the use of an electronic document management system which had improved access to written client information and other correspondence. This meant that important information was held centrally and could be accessed by staff, (with appropriate permissions), more speedily than the previous system used.

Staff also had access to training in communication skills through e-learning. Examples of the available training included effective writing and report writing.

### Areas for improvement

Some staff that we spoke with advised that they had developed "ad-hoc" or improvised methods for communicating with service users who had difficulties in this area. Examples included learning gestures/signing from family members, use of electronic tablets or written materials to assist with communication. It would be helpful if staff who were supporting people with a communication need also had formal training in appropriate communication techniques at an early stage of providing support. The provider should explore this area further with staff teams.

Many staff supported people with cognitive or memory impairments, the most common of these being people with a diagnosis of dementia. Although many staff had received training in dementia awareness, we discussed with the provider developing some staff's level of expertise in this area further, in line with Scottish Government's "Promoting Excellence" framework.

"The NES/SSSC Promoting Excellence framework details the knowledge and skills all health and social services staff should aspire to achieve in relation to the role they play in supporting people with a diagnosis of dementia, and their families, and carers." (see <http://www.gov.scot/Publications/2011/05/31085332/2> accessed 27 July 2015.).

The provider agreed to look at this further.

**Grade**

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 2

"We are confident that our staff have been recruited, and inducted, in a safe and robust manner to protect service users and staff."

### Service Strengths

At this inspection, we found that the performance of the service was very good for this statement. We concluded this after we spoke with guests and staff, observed practice and examined a range of relevant documentation.

We looked at a sample of recruitment and training records for staff that were employed in the service. This included staff who had recently been recruited by the provider. The provider had a clear and comprehensive procedure for recruitment which followed good practice. This was carried out centrally by the provider. The process included seeking appropriate references, carrying out criminal records checks and checking that staff, who were required to, were registered with appropriate professional bodies.

In the sample of staff recruitment files that we examined good use was made of an interview checklist to record that each step of the interview process had been followed correctly and to allow the provider to make a measured assessment of each candidate.

We met with members of the service user Focus Group who told us that they were invited to be part of the recruitment process for new staff. This demonstrated that the provider considered the views of service users as important when employing new staff to the service. We saw an example of an interview "pre-questionnaire" which was used by members of the focus group to assist in their assessment of the qualities of candidates that were being considered for employment by the provider.

99% of service users who completed care standards questionnaires, (89 responses), said that they were confident that the staff working in the service had the skills to support them.

The provider also issued staff with a comprehensive handbook which detailed the provider's key policies and procedures. This was a helpful reference resource for staff that clearly indicated the rights and responsibilities of new and existing employees.

### Areas for improvement

We noted in the sample of staff recruitment and training records we examined that the period of time between some staff joining the service and receiving core training could be a few months. Examples that we noted included one employee who received core training four months after starting employment and another who received this training five months after being employed.

The service manager did advise us that if a specific training need was identified to support a client that this would be provided before the staff member was placed with a service user, (although we could not confirm this from the information available to us). Similarly, a small number of new staff did not have a record of regular supervision following employment although the provider had a supervisory procedure specifically for new employees. It would be helpful to have a written record of supervision and support for all new staff, particularly in the early stages of their employment.

We asked the manager to review this issue to make sure that all staff were appropriately skilled prior to working with clients. She agreed to review this.

### Grade

5 - Very Good

**Number of requirements - 0**

**Number of recommendations - 0**



## Statement 4

"We ensure that everyone working in the service has an ethos of respect towards service users and each other."

### Service Strengths

At this inspection, we found that the performance of the service was very good for this statement. We concluded this after we spoke with guests and staff, observed practice and examined a range of relevant documentation.

Service users that we spoke with and who completed our questionnaires consistently indicated that they were treated with respect and dignity. 100% of service users who completed care standards questionnaires, (89 responses), strongly agreed or agreed that staff treated them with respect.

Comments from service users included

"The good thing is that the professional people listen to you."

"Quite happy with the service. All the staff are nice."

"Staff very good and protected my dignity."

"My mum's carers are like a godsend to her because it encourages her to get out of bed every morning and get motivated. She greatly appreciates the care they provide and the chats they have which keep her connected to life outside as she doesn't go out much."

"The girls are all nice and considerate, very adept at their work and they treat me with respect and most importantly they make me laugh!"

"(Anon) would like to highly commend the regular Home Support Worker, (HSW). She is very caring and (Anon) feels very lucky that she has such a good HSW on a regular basis."

In the sample of staff training records that we looked at we saw that staff had opportunities to participate in training on subjects that were relevant to treating both service users and staff with respect and, where necessary, taking action to protect people from abuse or exploitation.

Examples included training on equality and diversity; child and adult support and protection and re-ablement training. This meant that staff had good access to information to help them better support and protect service users as individuals.

The goal of helping people to remain as independent as possible and involving service users in decisions about their care and support was embedded in the service. This demonstrated that the provider valued and respected the views of service users and carers when planning and delivering support.

### Areas for improvement

We met with focus groups of staff employed in a range of positions and roles. Although overall, the majority of staff indicated that there was an ethos of respect towards service users and each other, one particular staff group, (Senior Home Support Workers), indicated that they felt undervalued by the provider. Reasons given by staff for feeling this way included the rapid expansion of the duties of this position with no additional resources or time, variable feedback and communication from senior managers and poor succession planning to fill vacancies when staff left the position of Senior Home Support Worker (SHSW).

That said, it was clear through discussion with the registered manager, service users and staff groups from other levels in the organisation that the majority of people recognised the challenges in the last year for all staff, and the SHSWs in particular. The provider and management team had a good understanding of the issues and a clear plan to try and resolve them. We will revisit progress with this at future inspections.

### Grade

5 - Very Good

**Number of requirements - 0**

**Number of recommendations - 0**

## Quality Theme 4: Quality of Management and Leadership

Grade awarded for this theme: 5 - Very Good

### Statement 2

"We involve our workforce in determining the direction and future objectives of the service."

#### Service Strengths

At this inspection, we found that the performance of the service was very good for this statement. We concluded this after we spoke with guests and staff, observed practice and examined a range of relevant documentation.

We received 43 questionnaires back from staff who worked in the service. Of these 43 responses, 39 staff indicated that the service asked for their opinion on how it can improve and four people disagreed with this statement.

From our questionnaires, 40 staff indicated that they had regular supervision with their manager. Three out of 43 staff who responded said they did not receive regular individual supervision with their manager.

Additional comments from staff that we spoke with or who completed our questionnaires included:

"I am very happy with my work and get great satisfaction. Also I am happy with training and help in anything I ask." (Home Support Worker).

"I enjoy my job and feel well supported by my management team. Overall, I think we provide a fantastic service to our service users." (Other Support Worker).

"Homecare is a very good service for the service users in the community to enable them to stay in the vicinity they have been accustomed with."

We met with focus groups of different staff teams. Staff consistently told us that they received very good support from their managers, had regular team meetings and staff supervision. This meant that staff had very good opportunities to share new information, review their performance and be involved in ongoing decisions about the development of the service.

### Areas for improvement

See areas for improvement under Quality Theme 3 Statement 4

### Grade

5 - Very Good

**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

At this inspection, we found that the performance of the service was very good for this statement. We concluded this after we spoke with guests and staff, observed practice and examined a range of relevant documentation.

As we noted at the last inspection, we concluded that the management of the service was well organised, continually striving for improvement and responsive to service user feedback. 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.

The service benefitted from input from the business support team that provided managers and senior staff with relevant quality assurance and management information. This information could be provided on a broad scale across the whole of the service but could also be broken down to individual team level. This was very helpful in identifying any inconsistencies or concerns regarding service delivery but also demonstrated where the service was working well. A good example of this was how the provider was using the management information to try and improve consistency of staffing out of hours and weekends, which was still an issue for a small number of service users that we spoke with. Improvement in this area meant service users received consistent support from care staff that they were familiar with.

We made one recommendation under this quality statement following the last inspection of the service. This was that the outcome of complaint investigations should be communicated in a consistent manner. This should take account of the provider's own policy and procedures.

Complaints should consistently detail whether the complaint is upheld or not and should also consistently signpost the complainant to where they can get further advice and/or appeal the outcome of the complaint.

We looked at a sample of complaints, how they were recorded and how the outcome of complaints investigations were communicated by the provider to people who had made a complaint to the service.

A positive development with complaints handling since the last inspection was that all complaints were now managed through the provider's complaints department, rather than through different departments. This should help with monitoring complaint trends and outcomes. The provider had also reviewed and updated the complaints procedure, although this was still in draft form. There was also a strong emphasis on "frontline resolution" of complaints which meant that complaints were dealt with quickly and appropriately by frontline staff.

That said, we still identified some further areas for improvement that should be addressed by the provider. (see areas for improvement below).

Since the last inspection the CM2000 system had been implemented across all of the service and had been rolled out to partner providers. 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.

### **Areas for improvement**

In the sample of complaints that we looked at we identified that there were still some areas that could be improved. In particular, the way that complaint investigations are recorded and how complaint outcomes are communicated to complainants.

We signposted the provider to the following guidance and they agreed to look again at this aspect of their complaints handling practice:

The Scottish Public Services Ombudsman, (SPSO), model complaints handling procedure states:

"Service providers should ensure that they have a system in place to record all relevant data about a complaint. As a minimum this would include:

- The category or nature of the complaint (e.g. complaint about staff attitude, complaint about service provision)
- The service or area of the organisation complained about
- What action was taken to resolve the complaint
- The outcome of the complaint
- Whether the service user was satisfied with the outcome."

(SPSO. 2011. Guidance on a model complaints handling procedure. Accessed at [http://www.spsso.org.uk/sites/spsso/files/communications\\_material/leaflets\\_buj/Guidance-on-a-Model-Complaints-Handling-Procedure.pdf](http://www.spsso.org.uk/sites/spsso/files/communications_material/leaflets_buj/Guidance-on-a-Model-Complaints-Handling-Procedure.pdf) on 26/07/15).

We discussed with the provider, how staff sickness/absence was being managed as this had been highlighted as an issue by the provider in their annual return submission to us. The provider was well aware of the issues and the potential impact on service delivery to service users. We were confident that the provider was actively working on improvements in this area. We will revisit this at a future inspection.

## Grade

5 - Very Good

**Number of requirements - 0**

**Number of recommendations - 0**

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

### Previous requirements

There are no outstanding requirements.

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

### Previous recommendations

1. The outcome of complaint investigations should be communicated in a consistent manner. This should take account of the provider's own policy and procedures. Complaints should consistently detail whether the complaint is upheld or not and should also consistently signpost the complainant to where they can get further advice and/or appeal the outcome of the complaint.

NCS 11 Care at Home - Expressing Your Views

This recommendation was made on 30 May 2014

The provider had addressed this recommendation in part. We have identified further areas for improvement and signposted the provider to guidance in this area. See Quality Theme 4 Statement 4 for more information.

## 7 Complaints

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



## 8 Enforcements

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

## 9 Additional Information

There is no additional information.

## 10 Inspection and grading history

Date	Type	Gradings	
30 May 2014	Unannounced	Care and support	5 - Very Good
		Environment	Not Assessed
		Staffing	5 - Very Good
		Management and Leadership	5 - Very Good
31 Oct 2012	Announced (Short Notice)	Care and support	5 - Very Good
		Environment	Not Assessed
		Staffing	5 - Very Good
		Management and Leadership	5 - Very Good
4 Oct 2011	Announced (Short Notice)	Care and support	5 - Very Good
		Environment	Not Assessed
		Staffing	5 - Very Good
		Management and Leadership	Not Assessed
24 Aug 2010	Announced	Care and support	5 - Very Good
		Environment	Not Assessed
		Staffing	Not Assessed
		Management and Leadership	4 - Good
21 Aug 2009	Announced	Care and support	4 - Good
		Environment	Not Assessed
		Staffing	4 - Good

		Management and Leadership	4 - Good
5 Sep 2008	Announced	Care and support	4 - Good
		Environment	Not Assessed
		Staffing	4 - Good
		Management and Leadership	4 - Good

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