

# **Inspection report**

# Carers Direct Ltd Support Service

71 Sinclair Street Helensburgh G84 8TG

Inspected by: (Care Commission Officer)

Elspeth Gibb

Type of inspection:

Inspection completed on: 11 September 2008

Improving care in Scotland

Service Number	Service name
CS2004076349	Carers Direct Ltd
	Service address
	71 Sinclair Street Helensburgh G84 8TG
Provider Number	Provider Name
SP2004004444	Carers Direct Limited
Inspected By	Inspection Type
Elspeth Gibb Care Commission Officer	
Inspection Completed	Period since last inspection
11 September 2008	10 months
	Local Office Address
	Central West Region 4th Floor 1, Smithhills Street Paisley PA1 1EB

#### Introduction

Carers Direct Limited has been registered with the Care Commission since December 2004 to provide a care at home and housing support service. In their information booklet it states " Carers Direct provides a complete Caring Service for elderly and less able people living in their own homes and support to the carers of dependent relatives".

The service operates in two geographical areas of Helensburgh and Oban with the administrative office based in Helensburgh.

The service was registered with the Care Commission in 2004.

Based on the findings of this inspection the service has been awarded the following grades: Quality of Care and Support - 4 - Good Quality of Staffing - 4 - Good Quality of Management and Leadership - 4 - Good

This inspection report and grades represent the Care Commission's 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. Please refer to the care services register on the Care Commission's website (www.carecommission.com) for the most up-to-date grades for this service.

# **Basis of Report**

Before the Inspection

The Annual Return The service submitted a completed Annual Return as requested by the Care Commission.

The Self-Assessment Form The service submitted a self-assessment form as requested by the Care Commission

Views of service users Questionnaires were received from 11 service users

#### **Regulation Support Assessment**

The inspection plan for this service was decided after a Regulation Support Assessment (RSA) was carried out to determine the intensity of inspection necessary. The RSA is an assessment undertaken by the Care Commission Officer (CCO) which considers complaints activity, changes in the provision of the service, nature of notifications made to the Care Commission by the service (such as absence of a manager) and action taken upon requirements. The CCO will also have considered how the service responded to situations and issues as part of the RSA.

This assessment resulted in this service receiving a low RSA score and so a low intensity inspection was required. The inspection was based on the relevant Inspection Focus Areas and associated National Care Standards, recommendations and requirements from previous inspections and complaints or other regulatory activity.

During the inspection process

#### Staff at inspection

The inspection was carried out by Elspeth Gibb, Care Commission officer.

Evidence

During the inspection, information was gathered from a number of sources including;

- Discussion with the manager and the provider

- A review of a range of policies, procedures, records and other documentation.

- Service user support plans.
- Service users and staff questionnaires

All of the above information was taken into account during the inspection process and reported on.

Inspection Focus Areas and links to Quality Themes and Statements for 2008/09 Details of the inspection focus and associated Quality Themes to be used in inspecting each type of care service in 2008/09 and supporting inspection guidance, can be found at: http://www.carecommission.com.

### Fire Safety Issues

The Fire (Scotland) Act 2005 introduced new regulatory arrangements in respect of fire safety, on 1 October 2006. In terms of those arrangements, responsibility for enforcing the statutory provisions in relation to fire safety now lies with the Fire and Rescue service for the area in which a care service is located. Accordingly, the Care Commission will no longer report on matters of fire safety as part of its regulatory function, but, where significant fire safety issues become apparent, will alert the relevant Fire and Rescue service to their existence in order that it may act as it considers appropriate. Further advice on your responsibilities is available at www.infoscotland.com/firelaw

#### Action taken on requirements since last Inspection

The following requirements were made at the previous inspection:

The provider must develop a policy and procedure on restraint. The provider must ensure that risk assessments related to restraint are completed and are regularly reviewed. Staff should receive appropriate training on restraint issues including the assessment and appropriate record keeping.

This requirement has been met. Issues regarding training and supervision and are included in this report.

The care service will ensure access to appropriate training in adult abuse issues and associated policy and procedures.

This requirement has been met.

#### **Comments on Self Assessment**

This was completed by the manager prior to the inspection. In future years, the views of staff, service users and their carers should be included in the self assessment and grading of the service.

#### View of Service Users

Service users consulted were all positive about the service received. Questionnaires indicated that some people were not aware of their personal plan.

Comments included : 'I am very happy with the service I receive" Excellent overall service'.

#### View of Carers

'All the carers have been lovely to my mother' 'The organisation has been much better this year and the support has been more consistent'.

### **Overall CCO Theme Grading: 4 - 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**

Following consideration of the sampled written evidence, questionnaires and feedback from service users, manager and staff consulted, this service was found to have a good performance in relation to this statement.

The service demonstrated a responsive attitude to service user involvement and participation and the manager is clearly committed to continuous improvement of the service.

Each person who is supported by Carers Direct has their care and support needs reviewed regularly at an individual meeting in the home between themselves , any family member whom the individual wishes to be present and the manager of the service. Depending on the level of support , these visits are carried out between every 8 weeks and 6 months.

Each service user is encouraged to participate in the decision making process regarding the ongoing level of care and is invited to give feedback about the quality of the service .

A written questionnaire is sent to service users or their representative annually in order to seek their views on the quality of service provided. Any issues raised are discussed in person between the manager and the individual in order to improve the service. The service also supports people to raise issues anonymously if thy wish, and all results from questionnaires are analysed by the provider and the manager.

The self assessment, discussion with the manager and questionnaires confirm that service users and their carers are encouraged to contact the office at any time to discuss problems or necessary changes to the level of provision.

Carers who are employed by Carers Direct are encouraged to communicate any service user's concerns they become aware of with the manager.

#### **Areas for Development**

The service should develop a written participation strategy and copies of this should be distributed to staff and service users. This document should include all the systems and procedures which are in place and invite feedback and suggestions from all as to how continuous improvement can be achieved . (see recommendation 1)

All staff and service users should be able to contribute to the self assessment and grading of the service prior to the inspection and this feedback should inform the content of the self assessment form submitted to the Care Commission.

The provider and manager should consider developing a regular forum for service users and their representatives to meet together and further develop the opportunity to influence the development of the service. This was discussed during the inspection and some possible suggestions were explored. (see recommendation 2)

# **CCO Grading**

5 - Very Good

**Number of Requirements** 

0

Number of Recommendations

2

Statement 5: We respond to service users' care and support needs using person centered values.

# Service Strengths

Following consideration of the sampled written evidence, questionnaires and feedback from service users, manager and staff consulted, this service was found to have a good performance in relation to this statement.

When individuals begin to use the service they are involved in discussion about their care needs and how these can be best met. Each person had an individual assessment visit to define the level of care required. In consultation with the service user and, if appropriate, their carers/ representatives, a personal care plan is drawn up. All relevant details, including any specific communication difficulties, are noted in the care plan and taken into account when staff are introduced to the service user.

Personal preferences, key dates and social interests are noted and taken into consideration in the care plan.

Discussions during the inspection and questionnaires confirm that each person is treated as an individual and regular reviews of the service provided are undertaken as required.

Each Service User will have a team of regular care staff attending. If a regular member of staff is not available the Service User will be phoned and offered a replacement. Endeavour will be made to provide a staff member familiar to the Service User.

Periodic team meetings are held with key workers for each Service User to discuss needs. Outcomes are reported in the Service Users file.

The Care Manager samples records in the care plan when visiting the Service User for a review. Spot visits are also carried out when care staff are with a Service User.

# Areas for Development

The manager advises that care staff regularly report on their involvement with service users and raise concerns or changes in their circumstances with the manager.

This communication would be more accountable, and the risk of concerns being missed would be minimised, by regular one to one supervision of staff and regular staff meetings. These meetings will offer the opportunity to share information, seek advice and raise any training issues staff may have in order to improve the support offered to service users. This

was acknowledged by the manager during the inspection .( see recommendation 3)

# **CCO Grading**

4 - Good

Number of Requirements

0

Number of Recommendations

0

Quality Theme 2: Quality of Environment

Overall CCO Theme Grading:

## **Quality Theme 3: Quality of Staffing**

#### **Overall CCO Theme Grading: 4 - Good**

Statement 1: We ensure that service users and carers participate in assessing and improving the quality of staffing in the service.

#### **Service Strengths**

Following consideration of the sampled written evidence, questionnaires and feedback from service users, the manager and staff consulted, this service was found to have a good performance in relation to this statement.

Detailed information on the systems in place to promote service users participation are outlined in statement 1.1

Service users are encouraged on admission to the service to raise any issues they ma have about the staff who support them and their attention is drawn to the complaints procedure which states that it is possible to make a complaint at any time directly to the provider or through an advocacy service or independent representative. Service users are provided with the necessary information in order to make contact with the Care Commission.

The Care Commission inspection report is made available to all potential Service Users.

There is a staff development and training plan in place which is reviewed annually and the manager confirmed that information gathered form service users informed this plan.

#### **Areas for Development**

General areas for improvement are outlined in quality statement 1.1. Future inspections will be able to evaluate how well the existing strategies impact on the improvement of the service and the ongoing empowerment of service users to influence the quality of staffing.

#### **CCO Grading**

4 - Good

Number of Requirements

0

Number of Recommendations

0

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**

Following consideration of the sampled written evidence, questionnaires and feedback from service users, the manager and staff consulted, this service was found to have a good performance in relation to this statement.

Discussion with the manager and provider ,and confirmation of written information in staff files ,confirmed that all staff are recruited through a rigorous procedure of interviewing, reference checks, medical questionnaires, Disclosure Scotland checks and checking with SSSC and professional bodies registers check where appropriate.

Relevant information is retained on staff files.

The interview and induction process ensures that staff have the skills to effectively support service users.

New staff undergo a period of induction which includes the aims and objectives of the service, orientation and shadowing experienced care staff prior to taking responsibility for themselves.

Discussion with the manager and the self assessment confirm that direct observation of care staff at work is undertaken to maintain a high standard of care and records are maintained in staff files.

Staff undergo annual appraisals when there is opportunity to have open dialogue, raise concerns and gain feedback.

The service has a whistle blowing policy and actively encourages staff to inform management of any concerns regarding the behaviour of other staff if it affects service users.

There is also an Adult Protection Policy and a Child Protection Policy in place and discussion with the manager confirmed her commitment to ensuring that concerns are managed sensitively and issues are investigated.

# Areas for Development

The service is committed to providing consistent support to service users. Staff recruitment and retention of staff remains a priority for the service as does the acquisition of funding to enable staff to complete SVQ qualifications to enable them to register with the Scottish Social Services Council.

Regular one to one staff supervision and staff meetings will improve the accountability of the service and could also serve to improve the retention of staff by allowing any concerns to be raised timeously.

# **CCO Grading**

4 - Good

#### **Number of Requirements**

0

# Number of Recommendations

0

## **Quality Theme 4: Quality of Management and Leadership**

### **Overall CCO Theme Grading: 4 - 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**

Following consideration of the sampled written evidence, questionnaires and feedback from service users, the manager and staff consulted, this service was found to have a good performance in relation to this statement.

Detailed information on the systems in place to promote service users participation are outlined in statement 1.1

Questionnaires offer service users and their carers the opportunity to influence the management of the service .

#### **Areas for Development**

General areas for improvement are outlined in quality statement 1.1.

Further improvements to participation would include evidencing service user involvement in the inspection grading process in respect of quality of management and leadership.

Future inspections will be able to evaluate how well the strategies which are in place impact on the improvement of the service through service action plans and whether the truly empower service users to influence the quality of management and leadership.

#### **CCO Grading**

4 - 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**

An examination of relevant documents, questionnaires and feedback from service users, the manager and staff consulted, indicated a good performance by the service in relation to this statement.

The manager was aware of the need to notify the Care Commission and Scottish Social Service Council of specific categories of staff conduct and disciplinary procedures.

The service has implemented internal quality assurance systems as described in statement

# 1.1.

# **Areas for Development**

The improvement agenda outlined in statement 1.1 and 1.5 will contribute to the ongoing development of the quality of the management and leadership.

The service identified the need to improve the the methods of gathering feedback from other stakeholders in order to improve the service.

# **CCO Grading**

4 - Good

**Number of Requirements** 

0

Number of Recommendations

0

**Regulations / Principles** 

National Care Standards

#### Enforcement

There has been no enforcement action against this service since the last inspection.

#### **Other Information**

There is no other relevant information.

#### Requirements

There were no requirements arising from this inspection.

#### Recommendations

1. The service should develop a written participation strategy and this should be distributed to staff and service users or their representatives.

2 The provider should develop a service users and carers forum to further promote their involvement in developing and improving the service.

3 A schedule of individual supervision meetings with staff and schedule of staff meetings should be put in place by the manager to offer a more focused opportunity to raise concerns and improve practice.

Elspeth Gibb Care Commission Officer