

## **Care service inspection report**

# **Carers Direct Ltd** Support Service Care at Home

71 Sinclair Street Helensburgh G84 8TG Telephone: 01436 671 389

Inspected by: Elspeth Gibb Type of inspection: Unannounced Inspection completed on: 14 February 2013



## Contents

		Page No
	Summary	3
1	About the service we inspected	5
2	How we inspected this service	7
3	The inspection	11
4	Other information	18
5	Summary of grades	19
6	Inspection and grading history	19

#### Service provided by:

Carers Direct Limited

#### Service provider number:

SP2004004444

#### Care service number:

CS2004076349

#### Contact details for the inspector who inspected this service:

Elspeth Gibb Telephone 0141 843 6840 Email enquiries@careinspectorate.com

## Summary

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

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

#### We gave the service these grades

Quality of Care and Support5Very GoodQuality of Staffing4GoodQuality of Management and Leadership6Excellent

#### What the service does well

Carers Direct provides a very good service to people in their own homes. The inspection showed that service users were receiving a very good level of care and that they were satisfied with the the service they received. People with intensive support needs, some of whom require 24 hour care, were being very well supported by small consistent teams of staff.

The service is very well managed and there was strong evidence that the service is responsive to individual needs.

The service works very well with NHS colleagues and the social work department to make sure that the needs of service users are met appropriately.

#### What the service could do better

Some people told us they would like the service to let them know who was coming to their home a week ahead of time. We discussed this with the manager and she has agreed to give people notice of the staff rota for the following week. Some staff still need to complete SVQ training and the manager is trying to get funding for this to happen.

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

The service continues to provide very good care which meets the standards outlined in the Quality Themes and Statements inspected very well.

## Conclusion

The service is working well with the Care Inspectorate to improve the service.

## Who did this inspection

Elspeth Gibb Lay assessor: Not Applicable.

## 1 About the service we inspected

The Care Inspectorate regulates care services in Scotland. Prior to 1 April 11, 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.

The history of grades which services have been awarded is available on our website. You can find the most up-to-date grades for this service by visiting our website, by calling us on 0845 600 9527 or visiting one of our offices.

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.

Carers Direct Limited is registered to provide a care at home 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.

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 4 - Good Quality of Management and Leadership - Grade 6 - Excellent

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

This report was written after an announced inspection that took place over two days; 8 and 31 January 2013.

As requested by us, the care service sent us an Annual return. The service also sent us a Self Assessment form.

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

Evidence from the service's Self Assessment and Annual return Discussion with the service provider and the manager Visits to service users and their family members Questionnaires from service users, staff and relatives of service users Personal Plans Training records All of the above information was taken into account during the inspection process and reported on.

## 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 Self Assessment was completed prior to the inspection and included information about what the service thought they did well and identified areas for improvement. Staff and service users should continue to be encouraged to be more involved in the process of self assessment to promote awareness of the Quality Themes and the grading process.

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

"All the staff are very good to me - I am grateful for all the care they show me."

"I think staff do a great job and are always helpful and caring".

"The carers sometimes don't have enough time to do the things they need to do in the time they have been allocated "

"I would like to know who is coming in for the whole week and not just a day at a time"

"I am grateful I can stay in my own home and have the support I get"

"The manager is very good - she always helps if things are not working out so well."

#### Taking carers' views into account

"I can't fault this service - I can give you many examples of how the staff go the extra mile and really look out for my mother"

"I am very happy with the service"

"I think the staff are very good and very professional in the way they go about their work"

## 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 that this service's performance was very good in the areas covered by this statement. We concluded this after looking at personal plans and speaking with the manager, five members of the staff team and discussion with the people who use the service and their families.

We found that this service has well established systems in place to ensure that each person is integrally involved in the way the service runs.

Each person has a personal support plan and there are regular reviews of their support arrangements. There was evidence that the service involves people in any decisions which affect their lives.

Individuals are given information about what they can expect from the service when they start using the service and people are regularly asked for feedback individually and using questionnaires.

There was evidence of an open, positive and responsive culture throughout the service and questionnaires are sent regularly to service users asking for feedback on the service.

The staff team at the office base communicate well with service users and families and demonstrated very positive communication skills during the inspection. People said that they found it easy to contact the office and that staff were efficient and helpful .

The paperwork we looked at and several people we spoke with confirmed the above. We looked at email communication between service users and the management staff and there was evidence that when improvements had been identified they were actioned.

#### Areas for improvement

The service should continue to promote understanding and awareness of the National Care Standards and Quality Themes and Statements and promote the involvement of staff and service users in the ongoing self Assessment and grading of the service.

#### Grade awarded for this statement: 5 - Very Good

#### Number of requirements: 0

#### Number of recommendations: 0

#### Statement 3

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

#### Service strengths

We found that this service's performance was excellent in the areas covered by this statement. We concluded this after looking at individual support plans and speaking with the people using the service, the staff who support them and the manager. It was evident from discussion and observation of how the service operates that staff adopt person centred approaches to supporting people's health needs and that the quality of the service was high.

Each person's personal plan includes an assessment of their health needs and records any special requirements or preferences they have. When specific health needs are identified, the team who support the service user receive training to enable them to meet those needs.

All staff receive regular training on administration of medication, health and safety and have access to ongoing statutory training in moving and handling and food hygiene. Training has also been provided in foot care, dementia care and palliative care and feedback from questionnaires indicated that staff provided a very good service when people have complex needs.

Relevant policies are in place to ensure that the health and wellbeing of service users is protected and there are very good links with health professionals.

Service users' care plans were easy to understand. This meant staff knew what help service users needed and could deliver this in the way the service user wanted. There were communication logs in service users' homes and staff could keep up to date with any changes in the care plan and deliver care in a consistent manner.

There was evidence of very good partnership working with health professionals and social work colleagues.

#### Areas for improvement

The service should continue to develop the service in line with their aims and objectives and strive to maintain the excellent standards found at this inspection.

Grade awarded for this statement: 6 - Excellent

Number of requirements: 0

## Quality Theme 3: Quality of Staffing

Grade awarded for this theme: 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

The inspection showed that the service's performance was very good in relation to this Quality Statement.

The service involves people who use the service and their families in the recruitment process for new staff.

People are encouraged to give their feedback about the staff who support them at their regular review meetings. The systems in place to promote participation are noted at Quality Statement 1.1.

#### Areas for improvement

The areas for development in relation to participation are noted at Quality Statement 1.1.

#### 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

The inspection showed that the service's performance was good in relation to this Quality Statement.

Staff spoken with were well motivated to provide a very good service and demonstrated a caring and confident approach to their work.

The majority of staff have SVQ qualifications and all are made aware of the SSSC Codes of Conduct and of the need to register with the SSSC. The staff we spoke with were competent, knowledgeable and advocated for service users. Staff were working flexibly to meet service users' needs and knew their needs very well.

This meant that the people we spoke to were very happy with the way their support was being organised.

Staff had undertaken a variety of training courses which were relevant to the people they supported and they felt confident that they could talk with the manager if they had any concerns.

The feedback about some individual members of staff from the people who use the service was excellent.

The manager showed very strong commitment to service users and to the ongoing improvement of the service. She had developed very good relationships with staff who were very positive about her leadership and competence.

#### Areas for improvement

The provider is exploring opportunities for the remaining staff to gain SVQ qualifications to comply with the registration requirements of the SSSC within the timescales required.

Although the staff in the office try to make sure that people know about emergency changes to rotas, the inspection showed that forward planning with service users about the staff rota could be improved.

The manager is planning to improve the way supervision of staff is managed and this was discussed at the inspection.

Grade awarded for this statement: 4 - Good

Number of requirements: 0

## Quality Theme 4: Quality of Management and Leadership

Grade awarded for this theme: 6 - Excellent

#### 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

The inspection showed that the service's performance was excellent in relation to this Quality Statement.

The manager has worked hard to create a very positive and inclusive ethos throughout the service . Staff said that they felt well supported by her and she has successfully promoted a service in which people feel free to express their needs and concerns.

There was strong evidence that the people who use the service, their relatives and staff are all encouraged to be involved in the management of the service.

The systems in place to promote participation are noted at Quality Statement 1.1.

#### Areas for improvement

The areas for development in relation to participation are noted at Quality Statement 1.1.

Grade awarded for this statement: 6 - Excellent

Number of requirements: 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

The inspection showed that the service's performance was excellent in relation to this Quality Statement.

Regular monitoring visits are carried out by the Care Manager to discuss the level of support provided and whether it is meeting the Service User's needs every six months or more frequently as required.

Regular review meetings take place to offer the opportunity for feedback and to plan future care arrangements. We found that the service had responded very well to the needs identified at review and that arrangements were changed in response to the expressed wishes of service users.

Service users and relatives told us that they were very happy about the way the service is managed and that they felt confident that issues raised with the manager would be addressed efficiently and sensitively.

Staff told us that she was a very supportive person and that she always responded positively to resolve any issues or concerns raised.

There were very good systems in place to ensure that communication between staff was effective and this included a feedback meeting with the on call manager at the beginning of the week. Regular small team meetings are scheduled regularly to allow staff to discuss important matters relating to each service user they support.

We found that the manager had effective systems in place to audit care arrangements and that the required policies and procedures were in place . There was a thorough and accountable approach to the management of the service in all aspects of its operation.

#### Areas for improvement

The manager should explore ways of storing documentation for ease of retrieval. The service should strive to maintain the excellent standards observed at this inspection.

#### Grade awarded for this statement: 6 - Excellent

Number of requirements: 0

## 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

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

## 6 Inspection and grading history

Date	Туре	Gradings	
20 May 2010		Care and support Staffing Management and Leadership	5 - Very Good 4 - Good Not Assessed

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

### To find out more about our inspections and inspection reports

Read our leaflet 'How we inspect'. You can download it from our website or ask us to send you a copy by telephoning us on 0845 600 9527.

This inspection report is published by the Care Inspectorate. You can get more copies of this report and others by downloading it from our website: www.careinspectorate.com or by telephoning 0845 600 9527.

### Translations and alternative formats

This inspection report is available in other languages and formats on request.

Tha am foillseachadh seo ri fhaighinn ann an cruthannan is cànain eile ma nithear iarrtas.

অনুরোধসাপেক্ষে এই প্রকাশনাটি অন্য ফরম্যাট এবং অন্যান্য ভাষায় পাওয়া যায়।

- ای بایتسد می مونابز رگید روا مولکش رگید رپ شرازگ تعاشا می

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

. ى رخ أ تاغلبو تاقى سنتب بلطلا دنع رفاوتم روش نمل اذه

本出版品有其他格式和其他語言備索。

Na życzenie niniejsza publikacja dostępna jest także w innych formatach oraz językach.

Telephone: 0845 600 9527 Email: enquiries@careinspectorate.com Web: www.careinspectorate.com