

# Care service inspection report

Full inspection

## Carers Direct Ltd Support Service

71 Sinclair Street  
Helensburgh



HAPPY TO TRANSLATE

Service provided by: Carers Direct Limited

Service provider number: SP2004004444

Care service number: CS2004076349

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.

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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	4	Good
Quality of management and leadership	5	Very Good

### What the service does well

The service provided a good standard of care and support and was highly valued by the people who used the service, this was confirmed by the service users and their families that we spoke and met with during the inspection.

There was a good response to the questionnaires we sent out and service users were very satisfied with the support they received.

There was strong evidence that the service is responsive to individual needs, the people who used the service told us that they were very happy with the level of support they received; staff had the skills to adapt to their changing needs.

The service is well managed and there are quality assurance systems in place to support staff and service users.

The service worked very well with other professional organisations to make sure that the needs of service users were met appropriately.

### What the service could do better

Previous inspections had noted that the service should develop their recording system for training in order that training needs can be identified more readily. We feel this is still an area of development for the service.

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

The service had developed its "Partners Questionnaire" in order to maintain and improve the service it provided.

### Conclusion

Carers Direct Ltd welcomed the inspection process and feedback as a means of further developing and improving the service to meet the future needs of people who used the service.

We found that the service was committed to continuous improvement and had demonstrated that they were meeting the Quality Themes and Statements we looked at on this inspection to an appropriate standard.

# 1 About the service we inspected

The Care Inspectorate regulates care services in Scotland. Information about all care services is available on our website [www.careinspectorate.com](http://www.careinspectorate.com)

The service was previously registered with the Care Commission and transferred its registration to the Care Inspectorate on 1 April 2011.

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 mainly within the Argyll and Bute area including Helensburgh, Oban, Tiree, and Colonsay with the administrative office based in Helensburgh.

## 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 4 - 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 took place on 6 October 2015 between 9:30am and 3pm. It continued the following day, Wednesday 7 October 2015 from 11am until 7pm. We gave feedback to the service Director on 8 October 2015.

As part of the inspection, we took account of the completed annual return and self-assessment forms that we asked the provider to complete and submit to us.

We sent 60 care standards questionnaires to the manager to distribute to people who used the service. We received 27 responses from people who used the service.

We also asked the manager to give out questionnaires to staff and we received eight completed questionnaires.

Throughout the inspection process we obtained various pieces of evidence from speaking to the following staff and people who used the service.

- 10 Service users
- Four relatives
- The service Director
- Care staff

To support the inspection process we also reviewed the following documents:

- Insurance certificate
- Accident and incident reports

- Complaints
- Care and Support plans
- Training planner
- Training records
- Staff supervision records
- The service action plan
- Minutes of team meetings
- Risk assessments
- Partners Questionnaires
- Quality assurance questionnaires
- Carer - Job description
- Service user welcome pack
- Carers Direct policies and procedures



## **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 with 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 they planned to involve people who used the service to take part in the self-assessment process.

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

"I am very glad there is a service like this".

"Overall I am very happy with the service".

"My confidence has increased so much since the girls started coming".

"I am very lucky to have a service like this and to have effective girls who know what they are doing".

"Just knowing that someone is coming makes my day, and they always show up".

Other comments are reflected throughout the statements of the report.

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

"I couldn't manage on my own, they are a great support".

"The girls have been like a life line for me".

Other comments are reflected throughout the statements of the 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

After we reviewed the information we gathered during the inspection process, we decided that the service was performing in this quality statement at a very good level.

We reviewed the services participation strategy which stated: "This participation strategy is for you - the people who use Carers Direct Ltd, your carers and our staff who support you. Carers Direct Ltd has a long tradition of partnership working with service users and carers. This strategy aims to build on our previous work and to help us to develop a more consistent approach to service users and participation".

We found that the service had developed its welcome pack to include a process of communication between the service and people who used the service.

We found that service users had the opportunity to be involved in all aspects of their assessment and the decision making process regarding the level of care and support they required.

During the inspection process we spoke with service users and their families in their own homes, we saw that each person had their own individual care plan and communications book, the communications book was used by staff, and relatives.

During our inspection we found there to be an open and honest flow of communication between the office staff, the care staff and the service users.

We found that the service had an appropriate complaints policy and procedure which enabled service users to have their views known.

### Areas for improvement

The service encourages service users and their carers to contact the office at any time to discuss problems, or necessary changes to their level of support, we found during our inspection that some service users had requested changes to times but it had yet to be resolved.

The service would benefit from developing a tracking system with appropriate timescales for resolution of any requests.

### Grade

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

After we reviewed the information we gathered during the inspection process, we decided that the service was performing in this quality statement at a very good level.

Throughout the inspection we were able to speak to people who used the service and to look at their care and support plans, which were reviewed internally every month, and fully reviewed annually. The information from the care plan was commented on every visit through the daily recording book, service user's and their relatives were happy with how information was recorded, they stated that it gave the service a sense of professionalism.

During our visits to service user's homes we observed very positive interaction between staff and service users; it was evident that care staff were aware of service users specific needs, service users were very relaxed in the presence of the care staff.

We saw from the daily notes of some care plans that there were very good links with the external multi-disciplinary team, these included the District Nurse, Occupational Therapist and Podiatrist.

We met and spoke with staff who told us that they received the necessary training in order to support the people who used the service, this included, moving and assisting, foot care, and dementia awareness.

We saw that service users care plans were informative and were outcome focused, and kept up to date, this meant the staff were confident in supporting the needs of the service user and the service user was confident that the staff could ensure that their health and well-being needs were being met.

### Areas for improvement

We found that the care plans included risk assessments for all service users, but this was very generic, the service and service users would benefit from a person centred approach to risk management.

The service should ensure that all staff have up to date and refreshed adult support and protection training.

### Grade

5 - Very Good

**Number of requirements - 0**

**Number of recommendations - 0**

## Quality Theme 3: Quality of Staffing

Grade awarded for this theme: 4 - 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

After we reviewed the information we gathered during the inspection process, we decided that the service was performing in this quality statement at a good level.

Throughout the inspection process we met with new staff and reviewed their personnel files in order to gain information in relation to the organisations safer recruitment process.

We examined staff recruitment files which detailed a clear application process, a competency based interview, relevant identification, comprehensive references, and clear disclosure checks (Protection of vulnerable groups). This evidenced that if everything was in place the service would be following a robust safer recruitment process and meet the safer recruitment standards within social care.

### Areas for improvement

We reviewed staff files and found that some references gained could have had clearer information, whilst we accepted how difficult it was to gain appropriate references the service should seek further information from the candidate in order to obtain appropriate and accurate references.

The service would benefit from having a clear strategy for staff induction with clear timescales for completion.



The service may benefit from involving people who used the service to be more actively involved in the recruitment and selection of staff.

### Grade

4 - 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

After we reviewed the information we gathered during the inspection process, we decided that the service was performing in this quality statement at a good level.

Throughout the inspection process we met with staff who had varying degrees of experience and training.

The staff we spoke with appeared knowledgeable and demonstrated a strong commitment to the people who used the service. We saw that staff worked very flexible in order to meet the needs of the people they supported. This was evident when we met and spoke with service users and their relatives and meant that they were very happy with the way their support was being organised.

The service had a training planner in place which ensured that staff received induction and relevant training appropriate to the support they provided.

Staff expected to receive the following training:

- Food and Hygiene
- Moving and assisting
- Continence management
- Medication awareness
- Challenging behaviour
- Yeah Foot care
- Dementia Awareness
- Abuse
- Palliative care
- Infection control

- Adult protection
- Falls

We concluded that if all staff received the aforementioned training then service users would be confident they were being supported by a professional and motivated team.

### Areas for improvement

We discussed the need for staff to have up to date and appropriate training in respect of protecting vulnerable people, we reviewed the staff training records and found that of the 79 staff on the register only 22 had received adult support and protection training of those only 10 were current within the last 12 months.

The service should ensure that all staff receive appropriate adult support and protection training in order that people who use the service are kept safe from harm.

See requirement with reference to Theme 3, Statement 3:

### Grade

4 - Good

### Requirements

#### Number of requirements - 1

1. The service provider must ensure that all staff have appropriate and up to date training in respect of Adult Support and Protection.

This is in order to comply with the Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011. Scottish Statutory Instrument 210 Regulation 15 (a) (i) Staffing.

A provider shall,

(a) ensure that at all times suitably qualified and competent persons are working in the care service in such numbers as are appropriate for the health, welfare and safety of service users; and (b) ensure that persons employed in the provision of the care service receive?

(i) Training appropriate to the work they are to perform.

**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

After we reviewed the information we gathered during the inspection process, we decided that the service was performing in this quality statement at a very good level.

Additional service strengths can be found under Quality Theme 1, statement 1.

Throughout the inspection process we met and spoke to care staff who all gave their views on their ability to determine the direction and future objectives of the service.

They told us that they felt that their ideas and views were taken on board, and that the management team were very supportive. They also told us that they could address any issues they had at their regular supervision meetings, and that they were dealt with effectively.

We concluded that there was a commitment from the service management to continue to involve staff in determining the direction and future objectives of the service. This meant that people who used the service could be confident that they were being supported by an involved and motivated staff team.

### Areas for improvement

The service could benefit from involving staff in service users, carers, and relative meetings in order that they could share ideas to a wider audience.

**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

After we reviewed the information we gathered during the inspection process, we decided that the service was performing in this quality statement at a very good level.

The service had continued to work hard in creating a positive and inclusive way of working throughout the service. Staff told us they felt supported by the management team and they were very flexible in accommodating their changing needs.

There was strong evidence that the people who used the service, their relatives and staff were all encouraged to be involved in the planning of the care provided

The service issued a copy of aims and objectives to all service users, carers, and staff.

People who used the service were encouraged to make comment on the quality of the service provided during visits from the service manager, and review meetings.

In addition to the quality assurance questionnaires the service also carried out spot checks, direct observations of staff on site, and on-going communication with people who used the service.

We found that the exchange of information between service users and their care staff was very person centred, and continued to keep the service user at the centre of the support provided.

We concluded that the service involved people who used the service to assess the quality of care and support they provided.

### Areas for improvement

The service could look at more innovative ways of involving service users and the people who use the service in auditing their service paying particular attention to people whose disability does not allow them to fully communicate and engage with other people.

### Grade

5 - Very Good

**Number of requirements - 0**

**Number of recommendations - 0**



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

### Previous requirements

There are no outstanding requirements.

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

### Previous recommendations

There are no outstanding recommendations.

## 6 Complaints

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

## 7 Enforcements

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

## 8 Additional Information

There is no additional information.

## 9 Inspection and grading history

Date	Type	Gradings	
4 Mar 2015	Unannounced	Care and support	6 - Excellent
		Environment	Not Assessed
		Staffing	5 - Very Good
		Management and Leadership	6 - Excellent
31 Mar 2014	Unannounced	Care and support	6 - Excellent
		Environment	Not Assessed
		Staffing	5 - Very Good
		Management and Leadership	6 - Excellent
14 Feb 2013	Unannounced	Care and support	5 - Very Good
		Environment	Not Assessed
		Staffing	4 - Good
		Management and Leadership	6 - Excellent
20 May 2010	Announced	Care and support	5 - Very Good
		Environment	Not Assessed
		Staffing	4 - Good
		Management and Leadership	Not Assessed
29 May 2009	Announced	Care and support	4 - Good
		Environment	Not Assessed
		Staffing	4 - Good
		Management and Leadership	4 - Good

## To find out more

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