

Carers Direct Ltd Support Service

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Type of inspection: Unannounced
Inspection completed on: 30 November 2017

Service provided by:
Carers Direct Limited

Service provider number:
SP2004004444

Care service number:
CS2004076349

About the service

Carers Direct Limited was previously registered with the Care Commission and transferred its registration to the Care Inspectorate on 1 April 2011. The service is registered to provide a care at home support service.

The service operates mainly within the Argyll and Bute area including Helensburgh, Oban, Tiree, Colonsay, Taynuilt, Dalmally, Campbeltown, and Inveraray. The administrative office is based in Helensburgh.

Carers Direct Ltd's information booklet 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.'

What people told us

We spoke with people during our inspection and received many supportive comments about the service and the staff team.

We received more favourable comments from people who completed our care standards questionnaires. These included:

'The staff are doing extremely well in the circumstances. They are dedicated and caring. My relative looks forward to their visits, as each carer has a cheerful disposition. Their care is indispensable to us.'

'A very excellent care staff, who are not only professional but also have that special human touch.'

'Staff very pleasant despite being very short of time.'

Self assessment

The service had not been asked to complete a self assessment in advance of the inspection. We looked at the service's improvement plan and quality assurance documentation. These demonstrated the service's priorities for development and how they monitored the quality of provision within the service.

From this inspection we graded this service as:

Quality of care and support	4 - Good
Quality of staffing	4 - Good
Quality of management and leadership	4 - Good

Quality of care and support

Findings from the inspection

We found that the performance of the service was good for this theme.

The service met the health and welfare needs of people experiencing care effectively. We sampled personal plans that provided clear guidance about personal care needs and preferences. The support assessments in place captured meaningful information about people experiencing care and we found, and observed, that staff used this effectively. Plans clearly provided clarity to staff on how to meet people's needs in a consistent manner.

We discussed the service's plans to introduce a more person-centred care planning process and how this could provide a way of ensuring the individual is at the centre of any plan which will affect them. We felt that current plans did not always provide a sense of the person as an individual and that the new process could help raise the standard of developing meaningful outcomes and benefit people experiencing care.

We suggested that the service could introduce one-page profiles to augment the plans for people using the service. A one-page profile captures all the important information about a person on a single sheet of paper and provides an at-a-glance way of knowing what really matters to the person in their life and the way they are supported to live it.

Reviews of personal support plans had taken place. People experiencing care could be joined at their reviews by relatives or other professionals involved in their care and support. The requirement made at our last inspection, dated 12 October 2016, in respect of reviews of personal plans, had been met.

The service sought the opinions of people experiencing care by means of reviews, questionnaires and surveys. The feedback received was generally extremely positive.

We saw that each person using the service received a home care pack. The pack contained all expected information around service delivery and the complaints processes. This gave people using the service the opportunity to be listened to and empowered to make decisions about the service.

Requirements

Number of requirements: 0

Recommendations

Number of recommendations: 0

Grade: 4 - good

Quality of staffing

Findings from the inspection

We found that the performance of the service was good for this theme.

We sampled personnel files for staff who were recently employed and some who had been in employment for a number of years. We focused on the recruitment processes and subsequent documentation.

We found evidence that one interviewer had taken part in some selection processes, although the questions that were used were relevant to the post. We found that PVG (Protecting Vulnerable Groups) checks were in place, however not all references were suitable or adequate to ensure the candidate was suitable to practice in the role. We did not feel the service had made full use of the best practice guidance around the safer recruitment of staff, as suggested at our previous inspection. We asked the management team to address this and have repeated the recommendation made at the last inspection. (See recommendation 1)

We saw evidence that mandatory training had been completed by all staff, including adult support and protection and infection control training. We observed staff putting their infection control training into practice whilst out on visits to clients. The requirement made at the previous inspection, in respect of staff training, has been met.

Staff gave feedback that practical training to augment their learning, particularly for moving and handling of people, would be beneficial in giving them confidence in their role. We discussed how more time could be spent observing staff practice to evaluate if training undertaken has had a good impact in improving practice and service delivery.

We asked the management team to include the involvement of people using the service in this process and suggested information gleaned could be used to inform staff development and the supervision process.

We accompanied staff visiting people experiencing care in the Helensburgh area and observed good practice. We saw that people experienced warm, compassionate care and support and that their respect and dignity was upheld. People were encouraged to be independent, where appropriate, and there were numerous positive comments made to describe the staff and the support they provided.

We received positive feedback from family members of clients and from staff working for the organisation.

Requirements

Number of requirements: 0

Recommendations

Number of recommendations: 1

1. The provider should ensure it operates in line with all applicable legal requirements and best practice guidelines around the recruitment and selection of its staff.

National Care Standards Care at Home: Standard 4 – Management and Staffing Arrangements.

Grade: 4 – good

Quality of management and leadership

Findings from the inspection

We found that the performance of the service was good for this theme.

Providers must respond to any requirements or recommendations and submit an action plan to the Care Inspectorate. The action plan should detail and address the areas for improvement raised in the inspection report. We did not receive an action plan from the service following our last inspection.

We found that this had not impacted on the outcomes for people, but we reminded the manager that an action plan, to respond to any future requirements or recommendations made, must be submitted.

Staff we spoke with during the inspection commented that they received good support from their peers and from the management team. Staff confirmed that they were able to discuss issues, that they felt listened to and that any concerns they had were addressed. People experiencing care told us they had some trust and confidence in the way the service was managed.

The service had a quality assurance system to assess and monitor the quality of the service delivery. This included the use of audits over a range of aspects of service delivery such as monitoring the content of personal plans, the completion of necessary documentation and staff training needs.

We asked the manager to extract detail from management meetings and other processes, to form the basis of an improvement and development plan for the service. This could be used to evaluate progress around the quality of the service provided and future issues.

We discussed the service's plans and understanding in respect of the registration of the majority of its staff team with the Scottish Social Services Council (SSSC), which commenced in October 2017. The SSSC is responsible for registering people who work in social services and regulating their education and training. This helps to raise standards of practice, strengthen and support the workforce and increase the protection of people who use services.

The service was aware of its duty to notify the Care Inspectorate of serious issues involving the people who use the service and the staff.

Requirements

Number of requirements: 0

Recommendations

Number of recommendations: 0

Grade: 4 - good

What the service has done to meet any requirements we made at or since the last inspection

Previous requirements

Requirement 1

The service must ensure that personal plans are reviewed at least once in every six month period whilst the service user is in receipt of the service, and any risk management strategy is reviewed in accordance with the changing needs of the service user.

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 5 - Personal plans
(2)(b) review the personal plan

A provider of a care service must -

(i) when there is a significant change in a service user's health, welfare or safety needs; and

(ii) at least once in every six month period whilst the service user is in receipt of the service;

Timescale: To be completed within 3 months of publication of this report.

This requirement was made on 16 November 2016.

Action taken on previous requirement

We discussed the present format of reviews and the future format of monitoring visits, and how these could be considered as a review of people's personal plans. We found that personal plans had been reviewed at least once in every six month period.

Met - within timescales

Requirement 2

The provider must ensure that persons employed in the provision of the care service receive training appropriate to the work they are to perform.

In order to do this, the service must:

1. Ensure that mandatory training is provided in particular for:

- a) Protection of vulnerable adults
- b) Infection control.

2. Ensure that there is a system in place for checking any training undertaken prior to commencing employment.

This requirement was made on 16 November 2016.

Action taken on previous requirement

We found that training in regard to infection control and adult support and protection was up-to-date. We observed the practice of staff and found that they were able to demonstrate their learning in their activities.

Met - within timescales

What the service has done to meet any recommendations we made at or since the last inspection

Previous recommendations

Recommendation 1

The provider should ensure that all staff are recruited safely and in line with best practice guidance: Safer Recruitment Through Better Recruitment 2007.

Staff induction into posts should be fully recorded.

National Care Standards Care Homes for Older People: Standard 5 - Management and Staffing Arrangements.

This recommendation was made on 16 November 2016.

Action taken on previous recommendation

This recommendation will be repeated. Please see Quality of staffing section for details.

Complaints

There have been no complaints upheld since the last inspection. Details of any older upheld complaints are published at www.careinspectorate.com

Enforcement

No enforcement action has been taken against this care service since the last inspection.

Inspection and grading history

Date	Type	Gradings
12 Oct 2016	Announced (short notice)	Care and support 4 - Good Environment Not assessed Staffing 3 - Adequate Management and leadership Not assessed
8 Oct 2015	Unannounced	Care and support 5 - Very good Environment Not assessed Staffing 4 - Good Management and leadership 5 - Very good
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

Date	Type	Gradings	
29 May 2009	Announced	Care and support	4 - Good
		Environment	Not assessed
		Staffing	4 - Good
		Management and leadership	4 - Good

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