

DUNDEE CITY COUNCIL

REPORT TO: SOCIAL WORK AND HEALTH COMMITTEE – 25 MARCH 2013

REPORT ON: CARE INSPECTORATE INSPECTION - HOME CARE LOCALITY TEAM AND HOUSING WITH CARE WEST

REPORT BY: DIRECTOR OF SOCIAL WORK

REPORT NO: 148-2013

1 PURPOSE OF REPORT

- 1.1 The purpose of this report is to report the findings of the Inspection of Home Care Locality Team and Housing with Care - West Team which was carried out during 11, 13, 14 and 18 February 2013.

2 RECOMMENDATIONS

It is recommended that the Social Work and Health Committee:

- 2.1 Notes the contents of this report; and
- 2.2 Requests that the Director of Social Work monitor the progress made towards improving this service.

3 FINANCIAL IMPLICATIONS

- 3.1 None.

4 MAIN TEXT

Service Inspection

Home Care Locality team and housing with care – West Team received an inspection over 11, 13, 14, and 18 February 2013 by the Care Inspectorate.

4.1 Quality Indicators

The Care Inspectorate assessment uses a six point scale for reporting performance.

6	Excellent
5	Very Good
4	Good
3	Adequate
2	Weak
1	Unsatisfactory

The Inspectorate use Quality Themes to assess the service.

- Quality of Care and Support
- Quality of Staffing
- Quality of Management and Leadership.

Each Quality Theme is made up of several quality statements and this inspection focussed on four of these quality statements

- Quality of Care and Support Theme 1 – Statement 1 and 2

- Quality of Staffing Theme 3 – Statement 1 and 3
- Quality of Management and Leadership Theme 4 – Statement 1 and 4

The grades awarded for each of the Themes and Statements are as follows:-

Theme	Statement	Grade
Quality of Care and Support	1 and 2	5
Quality of Staffing	1 and 3	5
Quality of Management and Leadership	1 and 4	4

4.2 Quality Theme 1. Quality of Care and Support

Grade awarded for this statement 5 – VERY GOOD.

The Care Inspectorate highlighted the following service strengths

Statement 1

- People using the service were asked to complete a questionnaire during 2012. The results had been gathered collated and analysed in detail by the service. Feedback had been provided to people using the service by letter. This detailed the results of the survey and additional comments made, showing very good evidence of how suggestions were acted upon and shared. Staff were aware of the results of the survey and how this had driven service improvement.
- Focus groups for people using the service and their relatives/carers has been held in early 2012, one of these groups was chaired by a Senior Officer and a representative from 'Celebrate Age Network' allowing people to express their view to someone independent. Further focus groups being planned and prepared for.
- A 'User Involvement' policy had been developed by Dundee City Council and staff were aware of this policy and demonstrated a commitment to listening to what people said to make improvements to the service. Copies of this policy were provided to people using the service which should be highlighted as good practice.
- A recently updated written agreement in use providing people with details of the service they would receive. Commitment to listening to peoples' comments and suggestions demonstrated and people encouraged to make their views known.
- Home care surveys in use to gather peoples' views of the quality of service during their six monthly reviews. Any concerns raised through these surveys immediately addressed by the Social Care Organisers.

Statement 3

- There was good evidence of joint working with other professions such as district nurses and Care Managers.
- Reviews of support needs had been received by people during the last six months.
- There were clear assessments and guidance to staff detailing what they needed to do to keep people safe.
- There was good evidence of how staff supported people to stay as independent as possible.
- Staff communicated well with each other to share information with colleagues by use of mobile phones, texts and memos.
- Staff we spoke with felt well trained to carry out their job. They told us that, if there was anything they were unsure of, they were confident their Social Care Organiser would

arrange for further training. This might include awareness training from other health professionals.

- There were various comments made by service users. Two people spoke of staff commitment in reaching them during recent bad weather. One person told us; "I was worried that they wouldn't come during the bad weather as my friend wasn't able to get to me. However, they were here four times a day without fail, walking to make sure I got the help". Service users were confident in the skills and knowledge of the staff who supported them. "The staff are very reliable. They turn up on time and never miss a visit. They treat me with dignity and listen to how I prefer my care to be given. I wouldn't be able to live in my home without them".

The Care Inspectorate gave one Recommendation:-

Recommendation

The provider should consider alternative methods of raising awareness of both the service and Care Inspectorate complaint procedures.

Action Taken- A box is to be added to the review form which will evidence that staff have discussed with service users the Community Care Complaints Procedure, and how to complain to the Care Inspectorate.

4.3 Quality Theme 3: Quality of Staffing

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 staffing in the service.

Statement 3. – we have a professional, trained and motivated workforce which operates to National Care Standards, legislation and best practice

The Care Inspectorate highlighted the following service strengths:-

- Staff are aware of the National Care Standards and Scottish Social Service Council (SSSC) Codes of Practice. These codes and standards detail what is expected of social care staff as they carry out their daily work. Minutes of meetings showed these, along with Care Inspectorate Quality Themes, had been discussed at some team meetings.
- Staff meetings took place on a regular basis and samples of minutes of these meetings were looked at showing staff provided with good opportunity to be updated on any changes to practice.
- System in place for one to one staff supervision. Team Manager told us it would be expected that staff received this once every six months or more frequently if needed. Samples of staff supervision records looked at. These meetings provided an opportunity for staff to reflect on their practice, identify training needs and plan future development opportunities.
- It was recognised that the service had undergone a great deal of change during 2012. A new Team Manager had been in post for eight weeks at the time of our inspection. Although this was a very short period of time, staff we spoke with told us they felt supported by having a permanent Manager in place. Staff told us the Manager had a strong vision for the future direction of the service and that they felt fully involved in embarking on this journey.

4.4 Quality Theme 4: Quality of Management and Leadership

Grade awarded for this theme: 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.

Statement 4 - (As detailed within Quality Theme 1, Statement 1)

The Care Inspectorate highlighted the following service strengths:

- The service had developed very good opportunities for people to be involved in assessing and improving quality. The information from this previous statement has been considered when awarding this grade.
- Staff we spoke with told us they felt their Social Care Organiser was approachable and would listen to and act upon any concerns they had. Regular methods of support such as team meetings and one to one supervision provided a forum for staff to raise any concerns.
- Records of complaints received looked at and it was found these had been responded to and where necessary improvements made as a result of these findings.
- Regular methods of support such as team meetings and one to one supervision provided a forum for staff to raise any concerns.
- Staff also told us they had been asked to complete postal questionnaires asking staff views on their work such as job satisfaction, levels of support and training.
- Systems were in place for assuring the quality of personal plans. Social Care Organisers regularly checked the "contact sheets" which were returned. This allowed organisers to check the support people received was in line with their needs. In addition, the Team Manager carried out an audit of, at least, two personal files every month. This allowed any issues to be highlighted and addressed.
- The Team Manager was in the process of arranging staff focus groups. This would allow staff a forum for discussing the quality of the service.

4.5 Evaluation

The Care Commission can apply the following to services:-

- Enforcement Action
- Requirements
- Recommendations

Home Care Locality Team and Housing with Care - West received no requirements and only one recommendation, which has been actioned.

5.0 POLICY IMPLICATIONS

5.1 This Report has been screened for any policy implications in respect of Sustainability, Strategic Environmental Assessment, Anti-Poverty, Equality Impact Assessment and Risk Management. There are no major issues.

5.2 An Equality Impact Assessment has been carried out and will be made available on the Council website <http://www.dundee.gov.uk/equanddiv/equipact/>

6.0 CONSULTATIONS

6.1 The Chief Executive, Director of Corporate Services and Head of Democratic and Legal Services have been consulted in preparation of this report.

7.0 BACKGROUND PAPERS

7.1 Home Care Locality Team and Housing with Care – West Care Service Inspection Report.

7.2 Equality Impact Assessment.

JENNI TOCHER
DIRECTOR OF SOCIAL WORK

DATE: 13.03.13

Care service inspection report

Dundee City Council - Home Care - Locality Teams and Housing with Care - West

Housing Support Service

Social Work Office
Jack Martin Way
Claverhouse Road
Dundee
DD4 9FF

Inspected by: Lorna Paton

Type of inspection: Announced (Short Notice)

Inspection completed on: 21 February 2013



HAPPY TO TRANSLATE

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Service provided by:

Dundee City Council

Service provider number:

SP2003004034

Care service number:

CS2011286184

Contact details for the inspector who inspected this service:

Lorna Paton

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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	5	Very Good
Quality of Management and Leadership	4	Good

What the service does well

People were supported by a professional and motivated staff team who were committed to providing a high quality service.

What the service could do better

The provider should consider if there are additional opportunities available which may raise peoples' awareness of how to make a complaint.

What the service has done since the last inspection

This was the first inspection the service had received since registration.

Conclusion

Overall, people were happy with the service they received. Support provided was person centred and delivered by a committed workforce.

Who did this inspection

Lorna Paton

1 About the service we inspected

The Care Inspectorate regulates care services in Scotland. This service was registered with the Care Inspectorate in January 2012. Information in relation to all care services is available on our website at www.careinspectorate.com.

If we are concerned about some aspect of a service, or think it needs to do more to improve, 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 based on best practice or the National Care Standards.

- A requirement is a statement which sets out what is required of a care service to comply with the Public Services Reform (Scotland) Act 2010 ("the Act") and secondary legislation made under the Act, or a condition of registration. Where there are breaches of Regulations, Orders or conditions, a requirement may be made. Requirements are legally enforceable at the discretion of the Care Inspectorate.

Support was being provided to approximately 250 people at the time of our inspection. Five teams of Social Care Workers operated across the West of Dundee City with each team led by a Social Care Organiser. The stated aims and objectives of the service were;

Locality Teams

"To provide a range of care and support tasks which are carried out in an individuals own home to meet their personal and social care needs. There are a number of teams which are based in localities across the city"

Housing with Care

"To provide a range of care and support tasks which are carried out to meet individuals personal and social care needs. Teams work closely with the accommodation provider, be this the local authority or one of the external housing providers, to provide a range of services located within the premises"

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 4 - 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 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 a short notice announced inspection of the service which was carried out by Inspector Lorna Paton. We made visits to the service on;

- Monday 11th February 2013;
- Wednesday 13th February 2013;
- Thursday 14th February 2013;
- Monday 18th February 2013;

Feedback was given to the Registered Manager and Resource Manager on Wednesday 21st February 2013.

Before our inspection we asked people using the service, relatives/carers and staff to complete a questionnaire;

- 18 were returned from people using the service;
- 14 were returned from relatives, friends and carers; and
- 13 were returned from staff

During this inspection we spoke with;

- the registered manager
- the resource manager
- four Social Care Organisers
- 17 Social Care Workers
- six people who used the service

We looked at;

- evidence from the provider's most recent self assessment
- a sample of information within peoples' personal files. This included risk assessments, personal plans and event recordings
- records of staff training
- records of staff supervision
- records of direct observations
- minutes of team meetings
- questionnaires which had been completed by people who used the service, their relatives, friends or carers
- results of staff questionnaires
- a sample number of home care surveys
- records of complaints and compliments

We accompanied four Social Care Workers whilst they visited four people. This allowed us to observe staff working and talk directly to people about their experiences. We also spoke with two people who lived at the Housing with Care service.

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: No

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 had completed this and with the relevant information they had given us for each of headings that we grade them under.

The provider identified what they thought they did well, some areas for development and any changes they had planned.

Taking the views of people using the care service into account

18 questionnaires were returned to us before our inspection from people who used the service. When asked about the overall quality of the service;

- Twelve people were very satisfied; and
- Six people were satisfied

"The service is excellent. The staff are very professional and very well trained and very supportive".

"I am so blessed to have these girls - they are marvellous"

"The carers that attend me once a week are extremely pleasant and very willing to help me with anything I require. I appreciate their help very much"

"Please could you try and ask the office for a weekly day and evening list of the carers. Sometimes at night I get scared to answer the door". We asked the service to contact this person to discuss receiving a weekly schedule of support.

Other comments people made have been included within the body of the inspection report.

Taking carers' views into account

14 questionnaires were returned to us before our inspection from relatives, friends or carers. When asked about the overall quality of the service

- eight people were very satisfied; and
- six people were satisfied

"We as a family have no complaints about the service my Mum gets as we are very happy with this"

"From the introduction of increased care, all decisions taken have been discussed with (my relative), myself and family members who are instrumental in assisting with (my relative) when professionals are not involved"

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

Before our inspection we asked the service to complete a self assessment to tell us how they involved people using the service in assessing and improving quality. We sampled some of this information as part of our inspection.

We found the service had developed very good opportunities for people to be involved in assessing and improving quality. These included;

- People using the service or someone significant in their life had been asked to complete a questionnaire during 2012. This asked people for their views in a range of areas. People had been asked; "if you could improve anything about the service, what would it be?" The results had been gathered, collated and analysed in detail by the service. Feedback had been provided to people using the service by letter. This detailed the results of the survey and additional comments people had made. There was very good evidence of how suggestions had been acted upon and shared with people. Staff we spoke with were aware of the results of the survey and how this had driven service improvement.

- Focus groups for people using the service and their relatives/carers had been held in early 2012. One of these groups had been chaired by a Senior Officer and a representative from "Celebrate Age Network". This allowed people the opportunity to express their views to someone independent from the service they receive. The Team Manager newly in post planned to further develop focus groups with future dates planned and being prepared for. It was recognised that the turnout for these groups had been low. Consideration was being given as to how best to support people in participating in future groups.
- A "User Involvement" policy had been developed by Dundee City Council. Staff we spoke to were aware of this policy and demonstrated a commitment to listening to what people said to make improvements to the service. Recently, steps had been taken to provide people using the service with a copy of this policy. This should be highlighted as good practice.
- A written agreement was in use and had recently been updated. Staff were in the process of making sure each person had an updated version to sign. This provided people with details of the service they would receive. The provider had demonstrated a commitment to listening to peoples' comments and suggestions and encouraged people to make their views known. Details of how to complain to both the Care Inspectorate and Dundee City Council was included within this agreement.
- Home care surveys were in use to gather peoples' views of the quality of the service during their six monthly reviews. Any concerns which were raised through these surveys were addressed immediately by the Social Care Organiser.
- We looked at a sample number of personal files during our inspection visit. We found peoples' needs had been regularly reviewed. Records of these reviews provided very good evidence that peoples' views and that of their relatives, friends or carers were listened to and acted upon.

One person told us;

"From the introduction of increased care, all decisions taken have been discussed with (my relative), myself and family members who are instrumental in assisting with (my relative) when professionals are not involved"

Areas for improvement

In questionnaires we asked people to complete before our inspection we asked if people were aware of how to complain to the service and to the Care Inspectorate;

- eight of 18 service users and four of 14 carers/relatives were not aware of the service complaint procedure; and
- ten of 18 service users and four of 14 carers were not aware of their right to make a complaint to the Care Inspectorate

Whilst it was recognised that the service had taken steps to inform people of their right to complain, results from our questionnaire suggested a number of people remained unaware of this right. The provider should consider if there are alternative methods of raising increased awareness (see recommendation 1).

Greater clarity in the use and collation of home care surveys would further support the service in assuring the overall quality of the service. This was discussed with the management team during our feedback.

Grade awarded for this statement: 5 - Very Good

Number of requirements: 0

Number of recommendations: 1

Recommendations

1. The provider should consider alternative methods of raising awareness of both the service and Care Inspectorate complaint procedures.

National Care Standards - Care at Home, Standard 11 - Expressing Your View

Statement 3

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

Service strengths

Before our inspection we asked the service to complete a self assessment to tell us how they ensured peoples' health and wellbeing needs were met. We sampled some of this information as part of our inspection.

During our inspection we looked at a number of personal files. We found;

- Information within peoples' personal plans was very detailed. This included information about the support people needed and how they preferred this support to be given.
- Personal plans had been updated whenever there was a change to the support a person needed.
- Good evidence of joint working with other professionals such as District Nurses and Care Managers.
- People had received a review of their support needs within the last six months.

- Clear assessments and guidance to staff detailing what they needed to do to keep people safe. This might include details of where to place a person's community alarm pendant or equipment they need to move safely.
- Good evidence of how staff supported people to stay as independent as possible.

During our inspection we spoke with a District Nurse who worked jointly with the service in supporting one person. They told us they had no concerns over how staff worked and praised the positive relationship staff had with the person. They told us communication was good with staff promptly raising any concerns they might have.

Staff communicated well with each other to ensure information was shared with their colleagues. The use of mobile phones, texts and memo's were some of the methods used to communicate amongst the teams. This made sure that staff were fully informed of any changes with people they supported.

Staff we spoke with felt well trained to carry out their job. They told us that, if there was anything they were unsure of, they were confident their Social Care Organiser would arrange for further training. This might include awareness training from other health professionals. People who use the service told us they were confident in the skills and knowledge of the staff who supported them.

During our inspection we accompanied four Social Care Workers whilst they visited four people who used the service. We also visited the Housing with Care service where staff were on duty from 7.30am to 10.00pm. We observed first class practice from staff who worked with people in a way which promoted respect and privacy. Staff knew peoples' needs very well and delivered their care with kindness and dignity. We observed staff encouraging people to retain the skills they had by supporting them to be as independent as possible. People we spoke with told us they were very happy with the support they received from the staff. They told us it was usually the same team of staff who supported them unless in exceptional circumstances. One person told us that, during a very difficult period in their life, staff who worked with them went "above and beyond their call of duty". They told us; "I was simply overwhelmed by the support given to me. I can't tell you how much that meant to me".

Two other people spoke of staff commitment in reaching them during recent bad weather. One person told us; "I was worried that they wouldn't come during the bad weather as my friend wasn't able to get to me. However, they were here four times a day without fail, walking to make sure I got the help".

Other comments we received from people we spoke with and from questionnaires we received included;

"The staff are very reliable. They turn up on time and never miss a visit. They treat me with dignity and listen to how I prefer my care to be given. I wouldn't be able to live in my home without them".

"The team of carers I have are first class people. They know their job and I feel comfortable with every one of them"

"They are a great bunch of females whom I would be lost without their exceptional care and friendliness. Being housebound their visits are a joy to look forward to"

"The staff that do my care are very knowledgeable and thorough. They treat me with respect"

"I found caring staff who gave me confidence. They took time to explain about aids and how to use them. I can't thank them enough"

"The care plan has been structured to meet the needs of (my relative) with the needs of user and carers being taken into consideration. The prime objective being a standard of care that meets the need of the user"

"The staff have shown respect, professionalism, empathy, adaptability and attempt to be flexible in order to allow me to remain as independent as possible"

Areas for improvement

The Team Manager was working with all staff in considering changes to staff rotas and placements. This was with the goal of increasing flexibility of support and efficiency of time within the service.

In the self assessment completed by the provider, they told us a training programme devised by Physiotherapists was in the process of being delivered to staff teams.

Grade awarded for this statement: 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 1

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

Service strengths

The grade awarded for Quality Theme 1, Statement 1 was accepted for this statement.

Areas for improvement

The grade awarded for Quality Theme 1, Statement 1 was accepted for this statement.

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

Before our inspection we asked the service to complete a self assessment to tell us how they ensured they had a professional, trained and motivated workforce. We sampled some of this information as part of our inspection.

Staff we spoke with throughout our inspection were committed to providing a high quality service. Staff were aware of the National Care Standards and Scottish Social Services Council (SSSC) Codes of Practice. These codes and standards detail what is expected of social care staff as they carry out their daily work. Minutes of meetings showed these, along with the Care Inspectorate Quality Themes, had been discussed at some team meetings.

We were informed that staff meetings took place on a regular basis. We looked at a sample of minutes of these meetings. They provided a good opportunity for staff to be updated on any changes to practice and make suggestions for improvement.

A system was in place for one to one staff supervision. The Team Manager told us that it would be her expectation that staff received this once every six months or more frequently if this was needed. We looked at a sample of staff supervision records. These meetings provided an opportunity for staff to reflect upon their practice, identify training needs and plan future development opportunities.

Staff we spoke with told us they found their Social Care Organisers to be approachable and supportive. Following a recent change to the service base, Social Care Organisers were considering how best to make themselves accessible to staff.

It was recognised that the service had undergone a great deal of change during 2012. A new Team Manager had been in post for eight weeks at the time of our inspection. Although this was a very short period of time, staff we spoke with told us they felt supported by having a permanent Manager in place. Staff told us the Manager had a strong vision for the future direction of the service and that they felt fully involved in embarking on this journey.

Areas for improvement

During our inspection, a small number of staff told us it had been more difficult for them to access training during 2012. Due to staff sickness, training had been cancelled to make sure people using the service received the support they needed. This had been identified by the service and additional staff resources were being pursued for this team.

Due to the current systems of recording staff training, it was difficult for us to see an overview of the training staff had attended. This had been identified by the Team Manager who was considering improved methods of recording training.

Grade awarded for this statement: 5 - Very Good

Number of requirements: 0

Number of recommendations: 0

Quality Theme 4: Quality of Management and Leadership

Grade awarded for this theme: 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

The grade awarded for Quality Theme 1, Statement 1 was accepted for this statement.

Areas for improvement

The grade awarded for Quality Theme 1, Statement 1 was accepted for this statement.

Grade awarded for this statement: 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

Before our inspection we asked the service to complete a self assessment to tell us how they used quality assurance systems and processes which involved service users, carers, staff and stakeholders to assess the quality of the service they provided.

As detailed within Quality Theme 1, Statement 1 the service had developed very good opportunities for people to be involved in assessing and improving quality. The information from this previous statement has been considered when awarding this grade.

We looked at records of complaints which had been received. We found these had been responded to and, where necessary, improvements made as a result of the findings.

Staff we spoke with told us they felt their Social Care Organiser was approachable and would listen to and act upon any concerns they had. Regular methods of support such as team meetings and one to one supervision provided a forum for staff to raise any concerns.

Staff also told us that they had been asked to complete postal questionnaires within the past year. These asked staff for their views on their work such as job satisfaction, levels of support and training.

Systems were in place for assuring the quality of personal plans. Social Care Organisers regularly checked the "contact sheets" which were returned. This allowed organisers to check the support people received was in line with their needs. In addition, the Team Manager carried out an audit of, at least, two personal files every month. This allowed any issues to be highlighted and addressed.

The Team Manager was in the process of arranging staff focus groups. This would allow staff a forum for discussing the quality of the service.

Areas for improvement

In the self assessment completed by the service prior to our inspection they told us they planned to explore and develop other methods of evaluation and quality assurance.

Some staff had not received a recent direct observation of their practice. Given the lone working element of the service, we would consider such observations to be an essential part of assuring the quality of staffing. Social Care Organisers told us this had been raised by the new Team Manager who expected such observations to be undertaken a minimum of once yearly. Staff were now clear of this expectation and were taking step to address this. We will look at this again during future inspections.

At the time of our inspection, no opportunities were available for stakeholders such as District Nurses, Occupational Therapists, GPs and Physiotherapists to participate in assessing and improving the quality of the service. We would consider this a positive addition to current quality assurance processes. This was discussed with the management team during our feedback.

As detailed within Quality Theme 1, Statement 1 we have recommended the provider consider if alternative methods could raise increased awareness of how to complain about the service.

Most staff we spoke with were not aware of the results and resulting improvements which were made as a result of staff questionnaires. Staff told us that they felt it was important to receive this feedback to be reassured that their views were listened to.

We spoke with the management team about this during our feedback.

During our feedback with the management team, we discussed the development of a quality assurance framework. This would outline the standards people can expect to receive from the service and how the service was measuring these standards. The management team was keen to explore this further.

Grade awarded for this statement: 4 - Good

Number of requirements: 0

Number of recommendations: 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

None.

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	5 - Very Good
Quality of Staffing - 5 - Very Good	
Statement 1	5 - Very Good
Statement 3	5 - Very Good
Quality of Management and Leadership - 4 - Good	
Statement 1	5 - Very Good
Statement 4	4 - Good

6 Inspection and grading history

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

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