

DUNDEE CITY COUNCIL

REPORT TO: SOCIAL WORK AND HEALTH COMMITTEE – 23RD FEBRUARY 2015

REPORT ON: OUTCOME OF CARE INSPECTORATE INSPECTION – HOMECARE SOCIAL CARE RESPONSE SERVICE

REPORT BY: DIRECTOR OF SOCIAL WORK

REPORT NO: 74-2015

1.0 PURPOSE OF REPORT

The purpose of this report is to advise the Committee of the outcome of the Care Inspectorate inspection of the Homecare Social Care Response Service, which was carried out on 14 November 2014. The report outlines the findings of the Care Inspectorate and gives a summary of the grades achieved.

2.0 RECOMMENDATIONS

It is recommended that the Social Work and Health Committee:

- Notes the contents of this report and the continued improvements made to the service which are detailed in paragraph 4.4, and
- Notes the improvement in the grades awarded to the service.

3.0 FINANCIAL IMPLICATIONS

None

4.0 MAIN TEXT

4.1 Background Information

4.1.1 The Social Care Response Service offers a call response service to approx. 3000 people between 7.30am and 4.00 pm rising to 6000 people between 4pm and 7.30am. The service also provides a night care service.

4.1.2 The annual inspection by the Care Inspectorate took place during time period 10 – 14 November 2014. The inspection was a low intensity inspection.

4.1.3 The following evidence was used in order to grade the service:

- Self Evaluation
- Interviews with 10 staff
- Interviews with 20 service users
- Correspondence with 4 related health professionals
- Interviews with manager and senior staff
- Inspection of personal plans
- Inspection of records
- Inspection of policies and procedures
- Observation of staff practice within the control room

4.1.4 The Care Inspectorate Annual Report outlines the findings of the Inspection, and gives a summary of the grades achieved.

4.2 Findings of the Inspection

4.2.1 The inspection was extremely positive, and an overall grade 5 (Very Good) was awarded to the service.

4.2.2 The summary of the Inspection Report stated that *'this is a high quality service that provides social care response and night time care visits in an efficient and effective way. It enables staff to prioritise visits according to need and incorporates use of smart tele care technologies to improve care for service users. Those who were interviewed who use this service professed to high levels of satisfaction.'*

4.2.3 All the recommendations made by the Care Inspectorate at the December 2013 inspection had been actioned and met within timescales.

4.2.4 The service was inspected on three quality themes; Quality of Care and Support, Quality of Staffing, and Quality of Leadership and Management. The Care Inspectorate made some very favourable comments regarding each of the quality themes.

4.2.5 Here are examples of some of the comments made by the Care Inspectorate:

- *'The service had used focus groups of service users to look at its provisions and improve them. Issues that were raised were fed back to all service users via Newsletter. Recent groups looked at recruitment and the qualities a worker should have as well as outlining exactly what the role of the response team was'*
- *'The service used an organiser to assess for and install all tele care equipment. This ensured that the variety of monitoring and alarm equipment available was efficiently and quickly installed according to the persons needs'*
- *'The inspector was impressed with the high levels of training and supports the staff got and how this impacted on staff morale-which was high. The use of tele-care technology and its quick installation were now imbedded in what the team did and were having positive impact on people in the community'*
- *'The inspector felt this was a very well-managed service with good systems in place for assuring its quality. The thing that was most impressive was the culture of flexibility and commitment that was fostered within the service and meant that the support that people received was of the highest quality and attention to detail'*

4.2.6 **Some views from service users about service**

- *'I was given the best care from everyone who attended to me'*
- *'I have used the services of community alarm team on several occasions and been appreciative of the rapid response service'*
- *'Excellent service!'*
- *'Staff treat me with dignity and respect'*

4.2.7 **Some views from Carers about service are**

- *'They are prompt, the staff are marvellous and treat us with respect and are warm and friendly. Couldn't do this without them'*
- *'I feel as though we mean something to the staff – they are very caring'*

4.2.8 **Views from service professionals that work alongside SCRS**

- *'Myself and my team have worked very closely with community alarm they have attended multi – disciplinary meetings to support us in addressing systems that are required to meet a particular that are required to meet a particular individual needs within the service. This is also supporting this individual to remain in his own home which is his wish, and is meeting safety concerns (Trips and Falls)'*
- *'When we experienced issues with some of the technology they have been very helpful and prompt addressing the issues. The professional relationship that I have with community alarm team is invaluable. They have educated me and the rest of the team regarding what technology is available and provide regular updates when new systems have become available'*

4.3 Summary of Grades

4.3.1 The Care Inspectorate can award one of six grades for each of the Quality Themes:

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

4.3.2 The Care Inspectorate can inspect a service against 4 Quality Themes: Quality of Care and Support, Quality of Environment, Quality of Staffing and Quality of Management. As the service is provided in a service users' own home, Quality of Environment does not apply. Each quality theme contains a number of quality statements as part of the inspection. Each quality statement will be awarded an individual grade, which is then aggregated up to an overall grade for each quality theme.

Table 1 shows the grades awarded to each quality statement and the overall grade awarded to each quality theme.

Table 1

Quality of Care and Support	5 – Very Good
Statement 1 – We ensure that service users and carers participate in assessing and improving the quality of care and support provided by the service.	5 – Very Good
Statement 3 – We ensure that service users' health and wellbeing needs are met.	5 – Very Good
Quality of Staffing	5 – Very Good
Statement 1 – We ensure that service users and carers participate in assessing and improving the quality of staffing in the service.	5- Very Good
Statement 3 – We have a professional, trained and motivated workforce which operates to National Care Standards, legislation and best practice.	5 - Excellent
Quality of Management and Leadership	5 – Very 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.	5 – Very Good
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.	5 – Very Good

4.3.3 Table 2 below details the grades awarded for each Quality Theme at the 2013 and 2014 inspections

Table 2

Quality Theme	Grade December 2013	Grade November 2014
Quality of Care and Support	4	5
Quality of Staffing	4	5
Quality of Management and Leadership	4	5

4.4 Service Improvements

4.4.1 The continuous commitment from both the managers of the service and the front line staff to improve the quality of the service, has resulted in the further improvement of the Care Inspectorate grades. The service is to be commended for achieving such high grades, given the number of service users who are supported by the service and the nature of the service provided.

4.4.2 The plan for 2014 was to make changes to the roles of the social care staff. Previously, staff carried out the roles of Control Room Operator, and Social Care Responder. However it was felt that staff were not able to build up the expertise in the role of the control room operator, due to the shorter time periods that they spent undertaking this role. Staff are now working largely in one or other of the roles, allowing particular types of training and experience to be gained within the relevant areas. This has resulted in a more confident and skilled staff group, and an improved service provision.

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 is attached to this report.

6.0 CONSULTATIONS

The Chief Executive, Director of Corporate Services and Head of Democratic and Legal Services were consulted in the preparation of this report.

7.0 BACKGROUND PAPERS

Care Inspection Report – 14 November 2014

JENNIFER G TOCHER
DIRECTOR OF SOCIAL WORK

DATE: 30 January 2015

DUNDEE CITY COUNCIL

Equality Impact Assessment Tool

Part 1 Description / Consultation

Is this a Rapid Equality Impact Assessment (RIAT) ?	YES
Is this a Full Equality Impact Assessment (EQIA)?	NO
Date of assessment 19/01/2015	Title of document being assessed Outcome of Care Inspectorate Inspection of Social Care Response Service
Committee report number	
1) This is a new policy, procedure, strategy or practice being assessed	This is an existing service (If yes please tick box) <input type="checkbox"/> Care Inspection Report
2) Please give a brief description of the policy, procedure, strategy or practice being assessed.	The committee report advises the Social Work and Health Committee of the Care Inspectorate Inspection of November 2014
3) What is the intended outcome of this policy, procedure, strategy or practice?	To advise of the outcome of the inspection and improvements made to the service
4) Please list any existing documents which have been used to inform this Equality and Diversity Impact Assessment.	None
5) Has any consultation, involvement or research with protected characteristic communities informed this assessment? If yes please give details.	No
6) Please give details of council officer involvement in this assessment. (E.g. names of officers consulted, dates of meetings etc)	N/A
7) Is there a need to collect further evidence or to involve or consult protected characteristics communities on the impact of the proposed policy? (Example: if the impact on a community is not known what will you do to gather the information needed and when will you do this?)	Feedback on the service will sought from service users by the service and will also be collected by the Care inspectorate at the time of the next Care inspectorate inspection.

Part 2 Protected Characteristics

Which protected characteristics communities will be positively or negatively affected by this policy, procedure or strategy?

NB Please place an X in the box which best describes the "overall" impact. It is possible for an assessment to identify that a positive policy can have some negative impacts and visa versa. When this is the case please identify both positive and negative impacts in Part 3 of this form.

If the impact on a protected characteristic communities are not known please state how you will gather evidence of any potential negative impacts in box Part 1 section 7 above.

	Positively	Negatively	No Impact	Not Known
Ethnic Minority Communities including Gypsies and Travellers	<input type="checkbox"/>	<input type="checkbox"/>	x	<input type="checkbox"/>
Gender	<input type="checkbox"/>	<input type="checkbox"/>	x	<input type="checkbox"/>
Gender Reassignment	<input type="checkbox"/>	<input type="checkbox"/>	x	<input type="checkbox"/>
Religion or Belief	<input type="checkbox"/>	<input type="checkbox"/>	x	<input type="checkbox"/>
People with a disability	x	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Age	x	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Lesbian, Gay and Bisexual	<input type="checkbox"/>	<input type="checkbox"/>	x	<input type="checkbox"/>
Socio-economic	<input type="checkbox"/>	<input type="checkbox"/>	x	<input type="checkbox"/>
Pregnancy & Maternity	<input type="checkbox"/>	<input type="checkbox"/>	x	<input type="checkbox"/>
Other (please state)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Part 3 Impacts / Monitoring

<p>1) Have any positive impacts been identified? (We must ensure at this stage that we are not achieving equality for one strand of equality at the expense of another)</p>	<p>The Care Inspectorate had identified good practice within the service and as a result of improvements made to the service has awarded a higher grade to the service.</p>
<p>2) Have any negative impacts been identified? (Based on direct knowledge, published research, community involvement, customer feedback etc. If unsure seek advice from your departmental Equality Champion.)</p>	<p>No</p>
<p>3) What action is proposed to overcome any negative impacts? E.g. involving community groups in the development or delivery of the policy or practice, providing information in community languages etc. see Good Practice on DCC equalities web page</p>	<p>N/A</p>
<p>4) Is there a justification for continuing with this policy even if it cannot be amended or changed to end or reduce inequality without compromising its intended outcome? (If the policy that shows actual or potential unlawful discrimination you must stop and seek legal advice)</p>	<p>The inspection of registered care services is determined by the Care Inspectorate and the right to inspect care services is set in statute.</p>
<p>5) Has a 'Full' Equality Impact Assessment been recommended? (If the policy is a major one or is likely to have a major impact on protected characteristics communities a Full Equality Impact Assessment may be required) Seek advice from your departmental Equality lead.</p>	<p>N/A</p>
<p>6) How will the policy be monitored? (How will you know it is doing what it is intended to do? e.g. data collection, customer survey etc.</p>	<p>Care Inspectorate Inspections take place on an annual basis.</p>

Part 4 Contact information

Name of Department or Partnership: Social Work

Type of Document

Human Resource Policy	<input type="checkbox"/>
General Policy	<input type="checkbox"/>
Strategy/Service	<input type="checkbox"/>
Change Papers/Local Procedure	<input type="checkbox"/>
Guidelines and Protocols	<input type="checkbox"/>
Other	x

Contact Information

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Signature of author of the policy: Lindsey Gibson

Date 19/01/2015

Signature of Head of Service area: Diane McCulloch

Date 19/01/2015

Name of Director / Head of Service Diane McCulloch

Date of next policy review:

At next inspection

Care service inspection report

Dundee City Council - Homecare - Social Care Response Service Housing Support Service

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Dundee
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Type of inspection: Announced (Short Notice)

Inspection completed on: 14 November 2014



HAPPY TO TRANSLATE

Contents

	Page No
Summary	3
1 About the service we inspected	5
2 How we inspected this service	6
3 The inspection	11
4 Other information	21
5 Summary of grades	22
6 Inspection and grading history	22

Service provided by:

Dundee City Council

Service provider number:

SP2003004034

Care service number:

CS2011286191

If you wish to contact the Care Inspectorate about this inspection report, please call us on 0845 600 9527 or email us at 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 Support	5	Very Good
Quality of Staffing	5	Very Good
Quality of Management and Leadership	5	Very Good

What the service does well

This is a high quality service that provides social care response and night time care visits in an efficient and effective way. It enables staff to prioritise visits according to need and incorporates use of smart telecare technologies to improve care for service users. Those who were interviewed who use this service professed to high levels of satisfaction.

What the service could do better

The service now has a development plan and maps out its own areas for improvement. This inspection found that the service needs to ensure that long standing and new service users are aware of how to contact the service should issues arise.

What the service has done since the last inspection

The service has continued to develop since the last inspection. Here are some examples of what they have been working on:

- The pilot scheme for installing telecare and community alarms has been successful and the use of dedicated staff for this function has been formalised. The scheme is hoping to expand to more than one worker.
- The service has undertaken a publicity drive to inform other providers about what it does so that services it works alongside know how it functions and what its role is.
- Telecare has continued to develop and the service has broadened out the equipment it can give people access to - such as falls pendants.
- The services' participation strategy has been developed to include service user participation in recruitment.

Conclusion

This service has continued to improve since the last inspection. This has resulted in a better quality of service outcome for the people who use it.

1 About the service we inspected

The Care Inspectorate regulates care services in Scotland. This service was registered with the Care Inspectorate on 10th 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.

The Social Care Response service offered a call response service to approximately 3000 people between 7.30am and 4.00pm rising to approximately 6000 people between 4.00pm and 7.30am at the time of our inspection. This service was developed in October 2011 following a merger of the Community Alarm service and Interval Night Care. This service provided a call handling and response service to people living at home. A planned night service was also provided to people who may require support and care overnight.

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 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 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

We wrote this report after an announced inspection which took place on 10 - 14 November 2014.

As requested by us, the service sent us an annual return. The Care Inspectorate wrote to the service to request completion of the self assessment form which was duly completed.

40 questionnaires were sent to the service to distribute to service users and staff - 16 were returned.

In this inspection we gathered evidence from the following sources:-

- Interviews with 10 staff.
- Interviews with 20 service users and carers.
- Correspondence with 4 related health professionals.
- Interviews with manager and senior staff.
- Inspection of personal plans.
- Inspection of records.
- Inspection of policies and procedures.
- Observation of staff practice.

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

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

The service has now implemented a system for the annual appraisal of staff skills and development needs. The service now has an action plan outlining how the service plans to develop.

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 an extensively detailed and fully completed self assessment document from the service provider. We were very impressed with the way this had been completed and with the information they had provided under each theme that we were inspecting.

Taking the views of people using the care service into account

20 service users were spoken with during the inspection. The views expressed were very positive about the service. Here are some of the things people said:-

- I was given the best of care from everyone who attended me.
- I have used the services of the community alarm team on several occasions and been appreciative of the rapid response times.
- Excellent service!
- Staff treat me with dignity and respect.
- This is a very good service, I get test calls every month - it's good to know they are there in an emergency.
- Staff are polite and friendly and always wear gloves and aprons when giving me personal care.

- We had a review meeting last week.
- Nothing is too much trouble.
- I was involved in staff recruitment - I spoke with candidates and had free rein to question them.
- response times are usually pretty quick - if they are delayed for an emergency they ring but it hasn't happened that often.

Taking carers' views into account

2 carers were interviewed about the service as part of this inspection as were 4 external service professionals who interact with the service. They were all very positive. Here are some of the things they said:-

Carers:

- They are prompt, the staff are marvelous and they treat us with respect and are warm and friendly. Couldn't do this without them.
- I have never had cause to complain.
- I feel as though we mean something to the staff - they are very caring.

Service professionals that work alongside SCRS:

- Myself and my team have worked very closely with community alarm they have attended multi-disciplinary meetings to support us in addressing the systems that are required to meet a particular individual needs within the service. This is also supporting this individual to remain in his own home which is his wish, and is meeting any safety concerns (trips/falls). When we have experienced issues with some of the technology they have been very helpful and prompt in addressing these issues. The professional relationship that I have with the community alarm team is invaluable. They have educated me and the rest of the staff team regarding what technology is available and provide regular updates when new systems have become available.

- The current working relationship that we have with Social Care Response in Dundee is a very active, effective and well-developed one. This has been going now for some 3-4 years and has been tweaked along the way. The current format that we use, is that we deliver training in the form of hazard identification in the home in relation to fire, where the active workers are given guidance on what to look out for during their visit into homes, and if risks are found either to give advice or to refer to the Fire Service. Training is also given on how to refer to us and also knowledge on the other services that we provide. Overall the relationship works well in which both parties have clear communication lines for points of contact and referrals, training is looked at annually with the social care team responders and as well as the call handlers.
- SCRS have always been very obliging when the sheltered service has asked for assistance to support our tenants and I confirm that our services work extremely well together.
- Over the last few months some of our residents have become prone to falling, due to increasing frailty. In an effort to help minimise the risk of falling or certainly minimise the length of time between a resident falling and the time they are attended to. The Social Care Response Team have been a tremendous support to us by providing and programming specialist equipment.

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

This service provides a very good level of participation for service users who were routinely involved in assessing and improving care and support within the setting. Here are some of the service's strengths in this area:-

- The service had used focus groups of service users to look at its provisions and improve them. Issues that were raised were fed back to all service users via a newsletter. This newsletter reported back what had been done. Recent groups looked at recruitment and the qualities a worker should have as well as outlining exactly what the response team's role was. Two service users who had attended the focus groups confirmed this.
- Service users who were interviewed confirmed that the service listened to any issues they raised on an informal basis and were good at finding solutions. They felt they had a good working relationship with organisers.
- The service sent out 6 monthly questionnaires to service users and stakeholders which gathered their views. These were then assessed and the service replied in person to people who had raised issues. Otherwise any common themes were addressed by the service.

- Those people who receive planned care had their case reviewed every 6 months by the service. Those who only used the response service had their details reviewed annually in line with guidance from their senior management who had received guidance from the Care Inspectorate in relation to being proportionate in relation to regulations relating to reviews. At these meetings service user's views on quality of provision were asked for and recorded. The inspector met two staff who had just returned from doing reviews and they showed him written evidence of this view gathering.
- The service had a complaints procedure which was given, along with a leaflet on the Care Inspectorate's complaints procedure, to service users when they commenced the service.
- The service now includes service users in their recruitment process. Prior to formal interviews service users talk to candidates about their own care needs and ask them questions. Their feedback is gathered by the service and used to inform recruitment decisions.
- Staff also commented on the way the management listened to their views about how to improve the service and then acted on them. An example of this was given in relation to making controller and responder into largely separate roles.

The inspector was very impressed with the way the service had a culture of participation embedded in what they did. They had actively developed engagement with people and staff and the service had improved as a result.

Areas for improvement

The service should continue to seek ways of engaging with service users. When interviewed most people felt that they were unaware of any information pack they had been given by the service. Perhaps this should be revisited with people who had been getting the service for any length of time.

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

The service had a good level of care provision for service users within the remit of what it provides. Here are some examples of the strengths:-

- Service users commented on how staff were good at supporting them in their given task, this might be assistance with getting up after a fall, accessing toilet facilities or offering reassurance and advice. Staff were seen as good at their job, professional in the use of moving and handling techniques and always correct in their use of personal protection equipment such as gloves and aprons. One service user said 'they treat me with respect, know my name and are always caring'.
- Where planned care took place at night - the service had clear guidance from the commissioning service on what care to provide. Support plans were in place which were regularly reviewed.
- Where staff identify that service users have needs which are outwith their remit they pass this on to their organisers who liaise with GP's, care managers, district nurses and other services which might benefit the person. This helps promote a full package of care for those that need it. The service uses an event recording system which, at point of recording, is used to highlight significant occurrences to others, such as care managers or the falls team, via use of email communication. Observation by the inspector in the control room saw staff recording events and where protocol dictated emailing relevant health professionals such as the relevant care manager for that person.
- The service used an organiser to assess for and install all telecare equipment. This ensured that the variety of monitoring and alarm equipment available was efficiently and quickly installed according to the person's needs. Other stakeholders we contacted about the use of technology by the inspector. Here is what one of them said:- 'The equipment that they have been able to supply to us is as follows:
 - * Falls pendant that is worn by the resident and self activates as soon as there is a fall.
 - * Pressure pad for a bed, which activates as soon as the resident gets out of bed. Staff are immediately alerted and are able just to check that the service user is ok.
 - * Handsets that are immediately activated if a resident needs assistance.Any time that we have needed a particular piece of equipment, it is brought to us and programmed the same day as requested'.

- The system in use in the control room allows operators to track calls from recipient of call to response to finish of visit. This allows monitoring of individual calls and responses which has improved response time and overview by management of where any shortfalls in response might be. Calls were also prioritised so that staff attend the most urgent first - such as a call activation where the person has not responded when contacted.

The service has developed alongside the advances in available telecare and has maintained a high level of satisfaction from service users. They are to be commended for their commitment to improvement.

Areas for improvement

There is still room for ensuring that people's details are up-to-date between reviews - the service should look at systems to ensure this happens. For example if a person's medication is changed.

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

Please see Quality Theme 1 statement 1 for information in relation to this statement.

Areas for improvement

Please see Quality Theme 1 statement 1 for information in relation to 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

The service had a good level of support for staff resulting in a professional and motivated workforce. Here are some of their strengths:-

- Staff at the service had a high level of training. Training records and staff interviews confirmed that all staff had been through an induction programme when they began work and that they had received core training such as moving and handling, adult protection and infection control, equality and diversity. Staff also received training that they had identified as being useful for them such as palliative care training, dementia and MS. The service also provided vocational awards such as SVQ. Staff interviewed felt that if they identified a training need it would be addressed if it benefited their work role. Talks were often arranged for staff on work related subjects. Staff in the control room get their own additional training in use of the call answering system.
- Interviews with staff showed that they were all aware of the National Care Standards and could apply them to their work role. All spoken with confirmed they had been given SSSC codes of practice. The service had a comprehensive set of policies and procedures which laid out expectations of good practice for staff.
- All staff receive 6 monthly supervision and are formally observed doing their job in the community by their line managers. This feeds back into the supervision process. The manager stated she had begun to introduce annual appraisals for staff. At interview staff felt supervision was a supportive process and some had been through the new appraisal and had found it useful.
- Staff all stated that they felt they were supported to do their job and their ideas were valued by management. All felt they were part of a team that was supportive. They felt they had the proper equipment to carry out care tasks and enough time to do their allotted jobs. There was enough time for handover of information when they came on shift and there were team meetings. Service users and carers who were interviewed were also very enthusiastic about the staff and highlighted their sensitivity, support and friendliness.
- Staff felt that under the current manager their views were listened to and that solutions were found to operational issues. They stated that the new split between the specific roles of controller and responder were ensuring that they could be more effective in response.

The inspector was impressed with the high levels of training and support the staff got and how this impacted on staff morale - which was high. The use of tele-care technology and its quick installation were now imbedded in what the team did and were having a positive impact on people in the community.

Areas for improvement

The service should continue to roll out the appraisal system they have adopted and to ensure that staff were supported to meet the demands of an ever-changing care environment.

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: 5 - Very 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

Please see Quality Theme 1 statement 1 for information in relation to this statement.

Areas for improvement

Please see Quality Theme 1 statement 1 for information in relation to 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

The service had a very good quality assurance system supported by its external provider and from within the service itself. Here are some of the strengths identified:-

- It is clear that the health and wellbeing of service users was at the core of what this service does with its person centred and detailed approach. (The information for this can be found in Quality Theme 1 statement 3).
- The service had a high level of participation whereby service users, staff and other stakeholders can have an input into what the service delivers. (The information for this can be found in Quality Theme 1 statement 1).
- The service had effective systems in place to support staff, to develop their skills via training and supervision - they also involve staff in developing the service. (The information for this can be found in Quality Theme 3 statement 3).
- The manager of the service attends their own regular meetings as well as a weekly diary meeting and wider network meetings held by the provider Dundee City Council. These allow managers to keep up-to-date with wider developments in care. The service also liaise with other care providers in their sector to ensure effective joint working and understanding of roles. The inspector asked several 'partners' to give their comments on the service and their responses were all very positive: (these are outlined in the section on views of people who use the service).
- The manager, or her representative, also attend wider forums related to response services. The national response service STFG forum and attend meetings with ambulance service, fire service and social care providers in the area.
- All staff have a dedicated email address which allows the provider to keep them up-to-date with any practice or legislation changes.
- All staff interviewed expressed the improvements to the service brought about by the work of the management team had made the service more effective.
- The service is continually planning its development and this was evidenced in its action plan. This outlined how the service was going to develop and who was responsible for achieving this. The 2014 plan included telecare development, new controller post, reviews and focus groups.

This is a very well-managed service with good systems in place for assuring its quality. The thing the inspector was most impressed with was the culture of flexibility and commitment that was fostered within the service and meant that the support that people received was of the highest quality and attention to detail.

Areas for improvement

The service has a large number of service users and this is a challenge in terms of quality assurance. It should continue to put resources into monitoring and improving all areas of what it provides.

Grade awarded for this statement: 5 - Very 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 noted.

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 the Care Inspectorate re-grading a Quality Statement within the Quality of Management and Leadership Theme (or for childminders, Quality of Staffing Theme) as unsatisfactory (1). This will result in the Quality Theme 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 - 5 - Very Good	
Statement 1	5 - Very Good
Statement 4	5 - Very Good

6 Inspection and grading history

Date	Type	Gradings
15 Nov 2013	Announced (Short Notice)	Care and support 4 - Good Staffing 4 - Good Management and Leadership 4 - Good
4 Dec 2012	Unannounced	Care and support 2 - Weak Staffing 3 - Adequate Management and Leadership 2 - Weak

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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