

# Inspection report

## South Ayrshire Home Care Support Service

Community Care Service Unit  
Holmston House  
3 Holmston Road  
Ayr KA7 3BA

**Inspected by:** Sue Corstorphine  
**(Care Commission Officer)**

**Type of inspection:**

**Inspection completed on:** 18 March 2009

**Service Number**

CS2004059670

**Service name**

South Ayrshire Home Care

**Service address**Community Care Service Unit  
Holmston House  
3 Holmston Road  
Ayr KA7 3BA**Provider Number**

SP2003003269

**Provider Name**

South Ayrshire Council

**Inspected By**Sue Corstorphine  
Care Commission Officer**Inspection Type****Inspection Completed**

18 March 2009

**Period since last inspection****Local Office Address**

Irvine

## **Introduction**

South Ayrshire Homecare service have their main office based in Holmston House, Ayr. The service was registered with the Care Commission on the 16 December 2004 as an integrated care at home and housing support service.

South Ayrshire Council's Homecare services note in their aims and objective statement that they "aim to provide a flexible, person centred service, delivered by skilled and motivated homecare staff in attending to your assessed needs."

Based on the findings of this inspection the service has been awarded the following grades:

Quality of Care and Support - 4 - Good

Quality of Staffing - 4 - Good

Quality of Management and Leadership - 3 - Adequate

This inspection report and grades represent the Care Commission's 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. Please refer to the care services register on the Care Commission's website ([www.carecommission.com](http://www.carecommission.com)) for the most up-to-date grades for this service.

## **Basis of Report**

The inspection plan for this service was decided after a Regulation Support Assessment (RSA) was carried out to determine the intensity of inspection necessary. The RSA is an assessment undertaken by the Care Commission Officer (CCO) which considers complaints activity, changes in the provision of the service, nature of notifications made to the Care Commission by the service (such as absence of a manager) and action taken upon requirements. The CCO will also have considered how the service responded to situations and issues as part of the RSA.

This assessment resulted in this service receiving a low RSA score and so a low intensity inspection was required. The inspection was based on the relevant Inspection Focus Areas and associated National Care Standards, recommendations and requirements from previous inspections and complaints or other regulatory activity.

During the inspection process

### **Staff at inspection**

The inspection was carried out by Care Commission Officer, Sue Corstorphine and took place over a number of days during March 2009. Meetings were held with the registered Manager of the service on 02 and 06 March during which written records and documentation were sampled.

Part of the inspection was carried out jointly with The Social Work Inspection Agency, (SWIA). This consisted of a SWIA Officer and the Care Commission Officer meeting with a group of 12 Homecare Staff, in order to ascertain their view of the service and to provide confirmation of some of the written evidence presented at the earlier meetings.

Feedback was given to the Homecare Manager on 18.03.09.

## Evidence

A range of documents, policies and procedures were examined including:

- § Adult Protection Policy
- § Complaints Policy and Procedure.
- § Quality Assurance Policy
- § Service User Questionnaires
- § Staff Training Policy and Training Records
- § Accident and Incident Records
- § 14 Service User personal plans
- § Staff Supervision Records
- § Quality Assurance Audits
- § Service User Satisfaction Questionnaires

Inspection Focus Areas and links to Quality Themes and Statements for 2008/09

Details of the inspection focus and associated Quality Themes to be used in inspecting each type of care service in 2008/09 and supporting inspection guidance, can be found at:

<http://www.carecommission.com/>

## Fire Safety Issues

The Fire (Scotland) Act 2005 introduced new regulatory arrangements in respect of fire safety, on 1 October 2006. In terms of those arrangements, responsibility for enforcing the statutory provisions in relation to fire safety now lies with the Fire and Rescue service for the area in which a care service is located. Accordingly, the Care Commission will no longer report on matters of fire safety as part of its regulatory function, but, where significant fire safety issues become apparent, will alert the relevant Fire and Rescue service to their existence in order that it may act as it considers appropriate. Further advice on your responsibilities is available at [www.infoscotland.com/firelaw](http://www.infoscotland.com/firelaw)

## Action taken on requirements since last inspection

There were no requirements or recommendations made during or since the last inspection.

## Comments on Self Assessment

The service completed a basic self assessment which highlighted areas of good practice and some areas requiring improvement. Completion of the self assessment requires to be significantly improved in order to better evidence both the strengths and planned service improvements.

## View of Service Users

62 Care Commission questionnaires were returned. Responses were mixed although generally favourable. Comments included:

- § "Previously had private sector carers and now have South Ayrshire Council Home Carers and have found a dramatic change in the service."
- § "Staff are excellent, couldn't manage without them."
- § "Most of the carers are very good but the care falls down sometimes and they have to be reminded. Also one team do a better job than the other."
- § "All the carers are so very flexible and considerate."

## **View of Carers**

Around half of the returned questionnaires had been completed by carers and relatives.

Respondents were complimentary about the service provided. Comments included:

§ “The staff of South Ayrshire Council Homecare are competent, friendly and trustworthy and carry out their duties impeccably.”

§ “An excellent service.”

§ “I am very happy with the service.”

§ “The service responded well to changes in my relative’s circumstances and have provided extra support when necessary. I have found the staff to be professional and observant, thus keeping me informed of any changes in health/care needs.”

§ “The care my relative receives from staff is of the highest standard and is very much appreciated by all the family.”

§ “Staff are all very friendly, very supportive, reliable and keep me informed of any changes, e.g. due to illness holidays etc.”

§ “My relative was always a very private person and didn’t like the idea of strangers helping with personal care. Staff recognised this and addressed the issue very quickly.”

## **Quality Theme 1: Quality of Care and Support**

**Overall CCO Theme Grading: 4 - 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**

During the inspection the Officer sampled 12 Personal Plans. These had all been signed by service users and most showed that these had been updated within the last 12 months.

Staff spoken with commented that Personal Plans were adjusted as frequently as required and that they spoke through any required changes with service users. An "Update of Personal Plan Request Form" was available, to allow Care Staff to alert Homecare Co-ordinators of required changes.

A service user participation strategy was in place and satisfaction questionnaires had been sent out to 2,500 service users and/or their carers. The Manager had collated the responses to these questionnaires and had developed an Action Plan to address issues raised.

The Manager identified within the self assessment that service users were provided with a "Suggestions and Ideas Postcard" which was left in service users homes.

Most service users responding to the Care Commission Questionnaire indicated that they were aware of the service's Complaints Procedure and would feel comfortable in raising a concern should it become necessary.

### **Areas for Development**

Although service users Personal Plans had been updated there was no system to ensure that regular reviews of all service users' Personal Plans took place. The Manager stated that a corporate decision had been taken that the responsibility for the reviewing of care packages would remain with the Social Work Area Teams. In some cases no minutes of these reviews were available and Homecare staff and Co-ordinators stated that they were not always invited to attend reviews held by Area Teams. There was therefore no consistent evidence that service users were consulted regarding the care they received or any changes they might require. (See requirement 1)

Although the service had a Participation Strategy in place, service users spoken with had no real awareness of this. (See recommendation 1)

### **CCO Grading**

4 - Good

### **Number of Requirements**

1

### **Number of Recommendations**

**Statement 3: We ensure that service user's health and wellbeing needs are met.****Service Strengths**

Within the Personal Plans and Transfer of Information Records sampled, there was clear evidence that staff routinely referred service users to and took advice from, appropriate primary healthcare agencies.

The quality of Personal Plans sampled varied greatly, however some offered staff clear guidance on the needs service users and how these should be met.

Staff training records and those staff spoken with confirmed that they are provided with regular Moving and Handling Training and training related to Food Hygiene and Nutrition.

Some risk assessments were in place within Personal Plans sampled.

Service users and carers who responded to the Care Commission questionnaire and those spoken with stated that staff are supportive and helpful in assisting them to meet their health and wellbeing needs.

**Areas for Development**

Most staff spoken with demonstrated a good awareness of the Medication Policy and Procedures; however there was some confusion over the detail of this. Some staff had not received up to date Medication Administration Training. (See Requirement 2)

Medication records contained within Personal Plans sampled were not adequately completed. (See Requirement 3)

Although some risk assessments were in evidence amongst the personal plans sampled these should be completed routinely for all service users with specific needs. (See Recommendation 2)

**CCO Grading**

4 - Good

**Number of Requirements**

2

**Number of Recommendations**

1

**Quality Theme 2: Quality of Environment**

**Overall CCO Theme Grading:**



### **Quality Theme 3: Quality of Staffing**

**Overall CCO Theme Grading: 4 - Good**

**Statement 1: We ensure that service users and carers participate in assessing and improving the quality of staffing in the service.**

#### **Service Strengths**

The satisfaction sent out by the service did give service users the opportunity to comment on the quality of staffing provided. Issues raised had been addressed by the Manager and Homecare Co-ordinators.

A team of Senior Homecare Workers visited service users regularly to ensure that personal plans were up to date and that service users were happy with the service provided by staff.

Service users responding to the Care Commission Questionnaire indicated that they were aware of the service's Complaint Procedure.

Some of the Personal Plans sampled indicated that the service had responded and made changes to staffing where issues had been raised by service users. Where service users had specific care needs, the service could evidence that they had provided training to staff in order to meet their needs.

#### **Areas for Development**

The Manager indicated within the self assessment that steps were being planned to involve service users in the recruitment and induction of staff. Progress in relation to this will be reviewed at the next inspection.

#### **CCO Grading**

4 - Good

#### **Number of Requirements**

0

#### **Number of Recommendations**

0

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

#### **Service Strengths**

Staff spoken with and training records confirmed that there is an ongoing programme of training which takes into account all mandatory training and specialist training to meet the needs of service users.

Staff reported receiving regular supervision individual and group supervision. Supervision

records sampled indicated that practice issues were discussed and training needs identified. Team Meetings were held monthly, with every second month being devoted to training topics.

Staff participated in a programme of Continuous Professional Development which identified training needs and planned how these would be met.

A robust programme of induction was in place for new staff and this was records indicated that this was completed before staff were allowed to work with service users unsupervised.

Staff spoken with were highly motivated and expressed their commitment to delivering a high quality of care.

### **Areas for Development**

The Manager informed that discussions regarding the delivery of training which would allow staff to register with the Scottish Social Services Council, (SSSC) were ongoing. It was envisaged that it would be some time before staff would be appropriately qualified for registration. Although this issue had been addressed previously, little progress had been made in planning the delivery of this training. (See Requirement 4)

### **CCO Grading**

4 - Good

### **Number of Requirements**

1

### **Number of Recommendations**

0

## **Quality Theme 4: Quality of Management and Leadership**

**Overall CCO Theme Grading: 3 - Adequate**

**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**

Service users and carers were given the opportunity to comment on issues of management and leadership of the service during care reviews and during visits by Senior Homecare Workers.

"Suggestions and Ideas Postcard" were distributed to service users' homes and the satisfaction questionnaires distributed by the service also gave opportunities to comment on how the service was managed.

### **Areas for Development**

Opportunities to comment on leadership and management were less explicit and this is an area which should be given further consideration during the development of the service's Participation Strategy. (See recommendation 1)

### **CCO Grading**

3 - Adequate

### **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 Manager was fully aware of her responsibilities in relation to notifying SSSC and the Care Commission of issues relating to misconduct and theft. Appropriate notifications had been made.

The Manager had put in place a range of quality assurance measures including the distribution of 2,500 satisfaction questionnaires, visits to service users' homes by both Senior Home Care Workers and Home Care Co-ordinators. Responses had been audited and appropriate actions taken.

The Manager had implemented a system to assist with the regular auditing of Personal Plans and staff training needs had been audited to enable a programme of training to be developed.

## **Areas for Development**

The Manager should consider how Quality Assurance Systems can be further developed and use the information received to develop a service improvement plan.

## **CCO Grading**

4 - Good

## **Number of Requirements**

0

## **Number of Recommendations**

0

**Regulations / Principles**

**National Care Standards**

## **Enforcement**

There has been no enforcement action against this service since the last inspection.

## **Other Information**

The Manager of the service was fully aware of some of the shortcomings of the reporting and recording systems within the service and was taking active steps to address these. Performance in relation to some issues such as the quality, frequency and recording of care reviews was inconsistent and sometimes dependent on the area team involved. It was not within the Manager's scope to resolve some of these issues; however she discussed how changes to the processes might be negotiated. Progress will be reviewed at future inspections.

## **Requirements**

1. The Provider must ensure that the care and support provided by Homecare to service users is reviewed at least annually and evidence that service users are being regularly consulted regarding how and when their care needs are met.

This is in order to comply with SSI 2002/114 Regulation 5 (1A)(b) - a regulation which requires the review of personal plans within each 12 months.

Timescale: Within 6 months of the publication of this report.

2. The Provider must ensure that all staff receive up to date Medication Training to ensure best practice and enhance the safety of service users.

This is in order to comply with SSI 2002/114 Regulation - A requirement regarding the training of staff.

Timescale: Within 6 months of the publication of this report.

3. The Provider must ensure that all medications administered to service users are recorded appropriately in line with best practice guidance.

This is in order to comply with SSI 2002/224 Regulation - A requirement regarding records.

Timescale:- With immediate effect

4. The Provider must prioritise the delivery of a programme of training which will allow staff to gain the appropriate qualifications to support registration with SSSC.

This is in order to comply with SSI 2002/114 Regulation 13(C)(i)(ii) - a requirement that Providers must provide training to staff appropriate to the work they are to perform.

Timescale - To begin within 6 months of the publication of this report.

## **Recommendations**

1. The service should continue to develop the Participation Strategy and ensure that it includes all stakeholders accessing. Development of the Strategy should include methods by which service users and carers will be made aware of its content.

National Care Standards: Housing Support Services: Standard 8: Expressing your views.

2. The service should put in place a system of individual risk assessment for all service users with specific needs such as moving and handling, special dietary needs, physical or mental impairment. These risk assessments must include any methods or restraint which are utilised.

**Sue Corstorphine**

**Care Commission Officer**