

Gentle Hands Support Service

Office 55,
John Smith Business Park,
Kirkcaldy
KY2 6HD

Telephone: 07366614123

Type of inspection:
Announced (short notice)

Completed on:
29 January 2024

Service provided by:
Gentle Hands Healthcare Limited

Service provider number:
SP2023000001

Service no:
CS2023000003

About the service

Gentle Hands Healthcare Limited, provide care at home support to adults and older people, living in the community, across various towns in Fife. At the time of the inspection, they were supporting 51 people and employed 35 staff.

About the inspection

This was an short notice announced inspection which took place on 24 and 25 January 2024. The inspection was carried out by one inspector from the Care Inspectorate, with support from an inspection volunteer. To prepare for the inspection we reviewed information about this service. This included previous inspection findings, registration information, information submitted by the service and intelligence gathered since the last inspection.

In making our evaluations of the service we:

- spoke with seven people using the service and seven of their family members
- spoke with six staff and management
- reviewed documents.

Key messages

- People experienced a service that was consistent and from staff that they trusted.
- Care staff felt well supported.
- People benefited from a thorough assessment of their support needs.
- Care plans would benefit from being more outcomes focussed.
- Training could be enhanced by being service user needs led.

From this inspection we evaluated this service as:

In evaluating quality, we use a six point scale where 1 is unsatisfactory and 6 is excellent

How well do we support people's wellbeing?	4 - Good
How good is our leadership?	4 - Good
How good is our staff team?	4 - Good
How well is our care and support planned?	4 - Good

Further details on the particular areas inspected are provided at the end of this report.

How well do we support people's wellbeing?

4 - Good

We evaluated the service as performing at a good level in supporting people's wellbeing. An evaluation of good applies to performance where there are several important strengths which, taken together, outweigh areas for improvement.

People should experience care with dignity and compassion. People told us: "Don't have a bad word to say about them", "They can't do enough for us" and "They are fabulous". We found care that was unhurried and consistent. People told us they felt in control of how their care was delivered. This gave us confidence that care was respectful.

Feedback we gathered evidenced that people felt safe and were encouraged to be independent. Comments included: "They encourage my self-independence" and "Can't fault them". Care plans we sampled clearly recorded what people were able to do for themselves. We found care plans could be enhanced by being more detailed and reflecting people's outcomes. See area for improvement in the 'How well is my care planned' section of this report. This enhances people's health and wellbeing.

It is important that people have the opportunity to give feedback about the care that they receive. We found the service had some formal systems in place to capture people's experiences. This could be further developed by engaging people in regular and meaningful review of their experiences. This feedback should then clearly inform service development. See area for improvement in the 'How good is our leadership' section of this report. This promotes a service that enhances people's rights.

The way people receive their medication from staff should be safe. We found lack of detail in care plans and on medication administration recording sheets (MARS) regarding the application of topical medicines, for example creams and ointments. An area for improvement is made (**see area for improvement 1**). This ensures people get the right care and support.

Areas for improvement

1. To support people's wellbeing, the provider should ensure people's support plans contain sufficient information to guide staff on how to best meet their needs.

This should include accurate information on the application of topical medications including the name of medication and the exact body part it is to be applied to.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which states that: 'My personal plan (sometimes referred to as my care plan) is right for me because it sets out how my needs will be met, as well as my wishes and choices' (HSCS 1.15).

How good is our leadership?

4 - Good

We evaluated this key question as good. We identified strengths which impacted positively on outcomes for people.

Quality assurance system should be used to assess and monitor the quality of service people experience. We found the provider had systems in place to monitor standards of practice through audits of MAR sheets, care plans and observations of staff practice. It was recommended that the provider increase the frequency of these audits and ensure the outcomes of these inform improvement planning. This also helps to identify any poor practice and risks. The provider should also develop ways for people using the service, their relatives, and staff to be involved in quality assurance and the service improvement plan, in ways that are meaningful to them (**see area for improvement 1**). This keeps people's views and experiences central to service development.

People using services and their relatives should feel confident in giving feedback. We found the provider had a robust complaints procedure in place and had been responsive to concerns raised. People told us that communication was good. They felt listened to and reported regular opportunities to informally speak with leaders of the service about their care. Care staff also reported being well supported and a culture of learning and development was promoted. This gave us confidence in capacity to support continuous improvement.

Areas for improvement

1. To support a culture of responsive and continuous improvement, which meets the health and wellbeing needs of supported people, the provider should ensure that people's views, suggestions, and choices are gathered on a regular basis and that this information is used to improve people's outcomes, inform improvement planning and support staff development.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS), which state that:

'I am supported to give regular feedback on how I experience my care and support and the organisation uses learning from this to improve' (HSCS 4.8).

How good is our staff team?

4 - Good

We evaluated this key question as good. There were significant strengths which impacted positively on outcomes for people.

It is essential that staff have the right skills and knowledge, to support good outcomes for people. We found Gentle Hands had a structured induction and clearly set expectations around core training that must be undertaken prior to commencing work with service users. They evidenced regular observations of practice taking place to support development. This promotes care that is safe and effective.

Training and development should be tailored to the learning needs of care staff. Additionally, training opportunities made available should support in meeting service users' individual needs. We saw the provider had a range of e-learning available to care staff and a system in place to track completion and any essential refresher training. Improvements could be made to opportunities for service user led training. The service should also consider how it formally delivers service user specific training, for example, stoma care or catheter care and then how they then assess care staff competency post training (**see area for improvement 1**). This ensures development is focussed on service user outcomes.

Supervisions and team meetings were evidenced as being available to care staff. Staff told us they felt supported and there was a positive culture for asking for help and support. Supervision should be done regularly and used as a tool in assessing learning needs, development, and competency. We discussed with the provider ways in which they could enhance their supervision format to include service user input and encourage reflective practice. This strong focus on learning and development enhances outcomes for people receiving care.

Areas for improvement

1. To support good outcomes for people the provider should ensure staff access training opportunities appropriate to their role, their learning needs, and the needs of service users. The provider should then regularly monitor practice to evidence how the training received is being implemented, taking into account current best practice guidance.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which states that:

'I have confidence in people because they are trained, competent and skilled, are able to reflect on their practice and follow their professional and organisational codes' (HSCS 3.14).

How well is our care and support planned?

4 - Good

We evaluated this key question as good. There were significant strengths which impacted positively on outcomes for people.

Care plans should be used to deliver effective care, following best practice guidance. Care plans we sampled evidenced a thorough assessment. Narrative highlighted people's independent skills and key support needs. We found a good system for reviewing and changing care plans, as people's needs and wishes changed. Care plans would benefit from being more outcomes focussed, with clearer guidance for staff in supporting people to achieve these goals. They should also highlight best practice guidance (**see area for improvement 1**). This promotes care that is dynamic, and person centred.

It is essential that people are involved in leading and directing care, in ways that are meaningful to them. People we spoke with, and their relatives told us they had regular opportunities to speak with service leaders and adapt care as needed. The electronic care planning system used by the provider allowed service users and relatives to access and be involved in care planning, as they wished. People we spoke with had limited information on how to do this. The provider detailed their plans to increase information about this system. This increases people's opportunities to be involved in decisions about their care and support needs.

Areas for improvement

1. To promote responsive care and ensure that people have the right care at the right time, the service provider should ensure that people have person-centred care plans in place. They should offer clear information to support staff, that reflects best practice guidance. In addition, people should have easy access to their care plans and be able to contribute to them.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that:

'My personal plan (sometimes referred to as a care plan) is right for me because it sets out how my needs will be met, as well as my wishes and choices' (HSCS 1.15) and 'I am fully involved in developing and reviewing my personal plan, which is always available to me' (HSCS 2.17).

Complaints

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

Detailed evaluations

How well do we support people's wellbeing?	4 - Good
1.1 People experience compassion, dignity and respect	4 - Good
1.2 People get the most out of life	4 - Good
1.3 People's health and wellbeing benefits from their care and support	4 - Good

How good is our leadership?	4 - Good
2.2 Quality assurance and improvement is led well	4 - Good

How good is our staff team?	4 - Good
3.2 Staff have the right knowledge, competence and development to care for and support people	4 - Good

How well is our care and support planned?	4 - Good
5.1 Assessment and personal planning reflects people's outcomes and wishes	4 - Good

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