

Connected Care Services Limited Support Service

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Type of inspection:

Announced (short notice)

Completed on:

26 April 2024

Service provided by:

Connected Care Services Limited

Service provider number:

SP2019013382

Service no: CS2019377291



Inspection report

About the service

The service is provided by Connected Care Services Limited, an independent provider of home care. The service operates from an office in Lochgelly.

The service provides a care at home service to adults in Fife. At the time of inspection the service was supporting around 100 people in their homes and had a team of around 60 staff.

The aim of the service is "to provide a safe and professional service tailored to you" Connected Care Services will do this by offering personal, social and domestic care to meet the assessed needs of the people they support.

About the inspection

This was a short notice announced inspection which took place between 23 - 26 April 2024. The inspection was carried out by one inspector from the Care Inspectorate.

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 fourteen people using the service and seven of their family
- · spoke with eighteen staff and management
- observed practice
- reviewed documents

Key messages

- People enjoyed very good care and support.
- · People had confidence in the company and staff.
- · The service was very well organised.
- There was good communication and quality assurance.
- Very good staffing meant a high degree of consistency and continuity.
- Records were well maintained.

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?	5 - Very Good
How good is our staff team?	5 - Very Good

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

How well do we support people's wellbeing?

5 - Very Good

We evaluated the service as performing at a very good level in supporting people's wellbeing. An evaluation of very good applies to performance that demonstrates major strengths in supporting positive outcomes for people and few areas for improvement.

It is important that people experience warm, nurturing relationships with the staff who support them. We observed kind, compassionate and warm interactions which meant people were treated with care and respect. Staff understood their role and responsibilities in ensuring appropriate support from family and healthcare professionals was sought when needed. People were fully involved in making decisions about the the support being provided.

Discussions with people who use the service and their relatives were very positive. People said staff were excellent and they had a good rapport and relationship with them. People told us that they felt respected and their views were valued. Comments included: "I am very independent, they step in when needed" and "They notice when something is not right and will act if I ask them".

People told us that they were involved in reviewing their personal plan. We found that the plans contained detailed information on people's abilities and needs. Clear information on how to support individual's needs formed part of their personal plan which promoted consistency of care and good outcomes for people. Risk assessments were detailed and updated when there was a change in circumstances which meant people were kept safe. Plans also contained very good guidance regarding the management of medication, medical conditions and equipment to inform staff knowledge and practice. As a result, people would receive care and support that they needed. People said that they had confidence in the skills and abilities of staff. Comments included "They do what we hope would be done" and "The service is great, couldn't ask for better".

We spoke with staff about keeping people safe. They were able to demonstrate a very good working knowledge of what might mean people were at risk, and how and who they would report any concerns to. We found very good management of feedback from service users and their families, accidents, incidents and complaints which meant management had good oversight and could direct changes and improvements based on outcomes for people.

Staff confirmed, personal protective equipment was readily available and people told us they experienced good staff practice. As a result infection prevention and control was in place and people could be kept safe.

It was evident from our observations and discussions with service users, families and staff, that staff and management know service users, very well and that this helped inform staff deployment, mitigate the risk of a breakdown in communication, and provide the desired care and support.

How good is our staff team?

5 - Very Good

At this inspection we examined staff recruitment as part of our core assurances and focused on assessing staffing arrangements.

We evaluated this key question as very good. We found people were supported by the right number of staff who had the right level of skill to meet people's assessed needs and in a way that meant they could remain at home.

There were effective systems in place to plan and manage calls which meant there was good communication and a high level of continuity within staff teams. People described the benefits of having regular staff and how on the office kept them up to date. One family described consistency as being reassuring and meant their loved one experienced "safe care" Office based staff and supervisors understood their role and contribution to the overall quality of the service and how they play an important part in building the staff team.

We found people using the service were protected by safer recruitment checks carried out before staff took up post. Staff were confident and had been supported through induction. One family member commented: "They must be a good judge of character because they employ the right staff".

Staff described feeling supported and listened to, describing management as available and responsive. They had regular supervision and spot checks which meant they were confident in working with any colleagues as "we all work the same way". They understood their role and responsibility describing how they would respond to changing situations whether for an individual or where planned absence meant changes to deployment.

Support plans set out how each person's needs should be met as well as their choices and wishes. These were reviewed routinely and in response to change. They also contained good reference and policy information. As a result records could guide and support staff practice.

What the service has done to meet any areas for improvement we made at or since the last inspection

Areas for improvement

Previous area for improvement 1

To support good practice, the manager should ensure that a robust investigation is carried out following any missed visit. This is to ensure that learning and improvement can take place.

This is to ensure care and support is consistent with Health and Social Care Standard 4.19: I benefit from a culture of continuous improvement, with the organisation having robust and transparent quality assurance processes.

This area for improvement was made on 8 December 2022.

Action taken since then

No missed visits reported since our last inspection. However new systems have been introduced to investigate any complaints which would support appropriate action should there be any need.

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Previous area for improvement 2

To support a culture of continuous improvement, the provider should ensure that audit processes are effective in identifying areas for improvement. Where areas for improvement are identified, they should contribute to a development/improvement plan for the service. To do this, the provider should:

- a) Continue to review and update audit tools and processes; and
- b) implement a development/improvement plan that identifies who is responsible for the improvement and timescales for that work to be undertaken.

This is to ensure that care and support is consistent with Health and Social Care Standards (HSCS) which state that: 'I benefit from a culture of continuous improvement, with the organisation having robust and transparent quality assurance processes.' (HSCS 4.19)

This area for improvement was made on 2 February 2023.

Action taken since then

The manager had used individual reviews and feedback to initiate an improvement action plan and support desired improvements on a very individual basis. This in turn could provide information about any trends or themes which need to be considered service wide. It was reassuring to see the introduction of formal recording but improvement planning was at an early stage. We discussed the strength in their current approach to measuring service user satisfaction as good evidence of participation and an ideal starting point for self-evaluation and quality assurance. Feedback from service users, their families and staff verified they had confidence in the service and felt listened to, involved, value and respected. We suggested working toward an annual report to provide a measure of service development and improvement.

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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?	5 - Very Good
1.3 People's health and wellbeing benefits from their care and support	5 - Very Good

How good is our staff team?	5 - Very Good
3.3 Staffing arrangements are right and staff work well together	5 - Very Good

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