

Clydesdale Homecare Housing Support Service

Council Offices
South Vennel
Lanark
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Telephone: 03031 231 008

Type of inspection:
Unannounced

Completed on:
24 May 2024

Service provided by:
South Lanarkshire Council

Service provider number:
SP2003003481

Service no:
CS2004073584

About the service

This home care service is one of four services run by South Lanarkshire Council. The service is for people who live in the Clydesdale area and covers a substantial area which is mostly rural.

The registered manager has overall responsibility for the service. There are three team leaders who have oversight of operations and line management responsibilities with the coordinators, social work assistants and the scheduling team. There are currently five coordinators who manage operations which are split into four areas within Clydesdale. These are referred to as the North, South, East and West 'worlds.' There is an additional acute team who support the other areas where needed with the aim of preventing hospital admissions. At the point of inspection there was approximately 130 home carers and around 213 people living in their own homes receiving support from the service.

The service provides assistance with personal care, mealtime preparation and support with medication. A community alarm service is also available. The service operates on a planned basis, 24 hours a day, seven days a week, throughout the year.

A key aim of this service is 'supporting individuals to maximise their independence, choice and control while remaining at home is a priority of South Lanarkshire Council and its health and social care partners.'

About the inspection

This was an unannounced full inspection which commenced on 15 May 2024 and was completed on 24 May 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 32 people using the service and 18 of their family/friends/representatives
- spoke and consulted with 47 staff and management
- observed staff visits of staff in people's homes
- reviewed documents
- consulted with two health professionals.

Key messages

- People and their families offered very positive feedback about the care and support they receive from the service.
- Staff were described as professional, kind and compassionate.
- People were generally supported by a familiar and stable staff team.
- Staff training and development was of a high standard.
- The service benefits from strong leadership throughout the team.
- The management should review the methods and tools used for self-evaluation to develop an effective improvement plan.

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 leadership?	5 - Very Good
How good is our staff team?	5 - Very Good
How well is our care and support planned?	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 found significant strengths in aspects of the care provided and how these supported positive outcomes for people, therefore we evaluated this key question as very good.

1.3 People's health and wellbeing benefits from their care and support

We undertook a series of home visits to speak to people supported by the service and observed staff conducting their duties. Through these visits we saw that relationships were warm, compassionate, and positive. The care and support that people were experiencing was right for them and based on their outcomes, rights and choices. Care was dignified and staff made the most of every opportunity to meaningfully connect with the person they supported. The support and encouragement shown through these visits also promoted the person's independence, dignity, and privacy. Everyone was very complimentary about the care staff.

People told us they were very happy with their support:

- 'the carers have been excellent from day one'
- 'I don't know what I do without them'
- 'From my first enquiry with the Home Care team the quality of advice, support and understanding has been excellent'
- 'Our experience with the home care team has been great and we cannot thank them enough for all they do and have done.'

Relatives also spoke positively about the service. They felt their loved ones had built good relationships with their supporting staff:

- 'Her package has increased gradually to this level over the last four years as her needs, mobility and frailty have increased.'
- 'The team of carers that support Mum is consistent and as a result they have got to know Mum, building up a positive relationship with her and understanding her needs very well.'
- 'Whenever I call the office she has always called me back as promised and the query has been sorted out promptly.'
- 'the care, compassion and dignity my father is shown goes way and above any expectations.'

We would expect consistent staff to support people in their homes so that a trusting relationship was established. People confirmed they had a stable team of carers who knew them well. The exception to this was when staff were off sick or on holiday. People's experience of this differed and the service could improve its communication to people when there is a change to this stable team. People felt listened to and knew who to contact if they had any issues or concerns.

Daily records of staff visits included information about how the person was feeling as well as what had happened during the visit. Staff understood their role with identifying any changes or concerns about people's health and wellbeing. Care knew how to contact community health services in the event of a change in the person's health or wellbeing.

People's health and wellbeing benefitted from safe and effective medication practices. Staff were trained in the administration of medication and observations of practice were carried out by senior staff. People could be assured that staff within the service were trained and competent in supporting their medication needs.

Improvements could be made in the care planning guidance for application of prescribed creams.

There were robust systems in place to protect people from harm. People were safe and protected from harm because the service was operating legally with the appropriate insurance in place. All accidents and incidents had been recorded and reported in line with legislation. All complaints had also been managed well and there was a clear process to track and monitor any referrals made under Adult Support and Protection legislation.

The provider is developing the use of digital technology in monitoring people's health and care needs. Exploring innovative methods of supporting people to remain as independent as possible in their own homes.

How good is our leadership? **5 - Very Good**

We found significant strengths in the leadership within the service therefore we evaluated this key question as very good.

2.2 Quality assurance and improvement is led well

We would expect the service and organisation to be well led and managed. People using the service, families, and staff told us that the service was managed well. Management were seen as inclusive, proactive, and had achieved a balance of being professional and approachable. Leaders' vision and values influenced practice positively and there was a supportive, caring culture within the staff team. Leadership being recognised at every level within the operational team.

We would expect the Quality Assurance and improvement to be well led. The service was keen to gather feedback from people and their families and had distributed questionnaires to find out how well the service was doing. The last responses gathered had been positive which means that people were happy with their care and support. People had also been encouraged to comment on what they thought the service could do better. Information gathered from areas that could be improved upon should inform the service improvement plan, demonstrating a commitment to making improvements that would benefit people's care experience.

The management team had a good understanding of what worked well and what improvements were needed across the service. There was good involvement with people using the service and their families with regular reviews and the use of questionnaires. The service would benefit from this being more transparent by developing the improvement plan and methods for self-evaluation plan. These should be specific, measurable, achievable, realistic and timely (SMART) focussed and evaluated regularly. This would demonstrate that the management showed the service wanted to continually improve to further enhance the care experienced by people.

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

We found significant strengths in the staffing of the service and how they supported positive outcomes for people, therefore we evaluated this key question as very good.

3.3 Staffing arrangements are right and staff work well together.

We would expect that all staff have been trained, are competent and skilled to undertake their roles. That the staffing arrangements were right and staff worked well together. We found that staff training had been completed either face-to-face or online. Each staff member had an individual training record and this was regularly monitored which meant that there was a minimal risk that training events would be missed. We directed the management to explore how best to support staff to access the training opportunities and digital apps available on the Scottish Social Services Council website.

Staff had attended regular supervision and had been observed in practice. Periodic spot checks were carried out on care staff and discussed with staff at their appraisals. These provided the staff member the opportunity to reflect on their practice and develop in their competency and confidence. We encouraged the management to review the infection prevention and control observation of practice, to ensure that it was in line with standard protocols and procedures for minimising the risks of cross infection.

As the service had a dispersed staff team, not all staff knew each other. Team meetings and carer patch meetings were held regularly which increased the opportunity for staff to get together to share knowledge and discuss best practice guidance. Staff shared that they felt supported within their roles.

Staff understood their responsibility to protect people from harm, neglect, abuse and exploitation. People were kept safe from the risk of infection as staff had the necessary skills, training and competence in infection prevention and control.

As outlined in key question one, the feedback from people receiving the service and their families was very positive. People and their families also shared their experiences of contacting the coordinators in the office. They highlighted that when they had called about an issue, this was a positive experience and issues were actioned and communication respectful.

How well is our care and support planned?

5 - Very Good

We found significant strengths in the personal planning and involvement of people and their families in developing these, therefore we evaluated this key question as very good.

5.1 Assessment and personal planning reflects people's outcomes and wishes.

We would expect that personal plans accurately set out how the individuals' needs would be met. We would also expect people and their families to be fully involved in the development of these plans and have access to them. We found plans in everyone's home that we visited. These were regularly reviewed and updated and offered some good information about people's health and support needs. People and their families were fully involved in developing their personal plans.

These could be improved by offering more detail and information about the person's life history and routine. In the event of an unknown member of staff having to provide care, they would have the information required to provide the same quality and consistent care to the person as their regular staff. This would be particularly helpful where this is a cognitive and/or sensory impairment. Also, the assessment and review of the personal plans should include clarifying and recording the powers held under Adults with Incapacity legislation.

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

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How good is our leadership?	5 - Very Good
2.2 Quality assurance and improvement is led well	5 - Very Good
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3.3 Staffing arrangements are right and staff work well together	5 - Very Good
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