

# Scotia Care Support Service

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**Type of inspection:**  
Unannounced

**Completed on:**  
15 May 2024

**Service provided by:**  
Scotia Care Ltd

**Service provider number:**  
SP2020013457

**Service no:**  
CS2020378783

## About the service

Scotia Care provides a care at home support service to adults with physical and sensory needs living in their own homes in the Angus and surrounding area.

The office is based in Arbroath and at the time of the inspection the service was supporting around 300 people.

The service provides flexible packages of care and support to meet people's needs in their own homes.

## About the inspection

This was an unannounced inspection which took place on site between 7, 8, 9 and 13 May 2024. The inspection was carried out by one inspector from the Care Inspectorate on day one and two, and two inspectors on day three and four.

To prepare for the inspection we reviewed information about the 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 14 people using the service and eight people from their families
- consulted with 43 staff and management
- observed practice and daily life
- reviewed documents
- spoke with five external professionals.

**Key messages**

- Staff knew people very well and staff took every opportunity to engage with people in a meaningful way.
- People using the service told us they were always treated with dignity and respect.
- The service was very well led and organised.
- There was a robust induction period with a well supported probationary period.
- The service demonstrated a culture of continuous improvement.
- People were consulted regularly and this helped inform their care, to meet their needs.
- We received some mixed feedback about the quality of collaboration and engagement with external professionals. This needs to improve.
- The service were not notifying the Care Inspectorate in line with guidance.

**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.

There was a very high level of satisfaction among people experiencing care. People found the service to be dependable and reliable. People told us they trusted the carers and formed good relationships with them.

People using the service told us they were always treated with dignity and respect. One person shared, "I am very happy and carers are very reliable" and "the carers are wonderful - always so kind and helpful" and "staff are very chatty, the visits are always a pleasure".

People told us communication was good. One person shared, "there is always someone available on the end of the phone, its reassuring" and another shared, "I know they will fix it if I call".

People told us they felt valued. One person shared, "Staff are very patient and reassuring". We observed staff taking their time with people and people told us they received the support they wanted and required. This promoted people's dignity.

People were consulted regularly and this helped inform their care. People were offered choice at their support visits and these choices were treated with respect and dignity. For example, we observed one person being asked where they would like to eat their breakfast.

Reviews of personal care plan's were up to date and people, their representatives and the appropriate external professionals were involved in this process. We were satisfied people were receiving the care and support that met their needs, wishes and preferences.

Staff knew people very well and staff took every opportunity to engage with people in a meaningful way. We observed there was appropriate banter from staff with people experiencing care and there was an emphasis on social engagement during visits. One person shared, "it's the highlight of my day seeing the carers, without them I would be very lonely, I appreciate them so much" and "they ask me about my day, and it cheers me up".

We observed staff being friendly, professional and courteous at all times. This enriched the lives of people experiencing care.

Staff were respectful when in people's homes. For example, staff would knock before entering and leave the house clean and tidy. This promoted people's dignity. People told us they had confidence in the carers and one person shared, "I'm in good hands, I feel safe".

There were rigorous processes in place to support effective communication about changes to wellbeing. Staff recognised changing health needs and shared this information quickly and with the right people. This supports people's health and wellbeing. One family member told us, "Staff passed their concerns on instantly, and my husband got the care he needed"

We heard that the service was flexible and tried hard to accommodate changes as these arose for people using the service. For example, services were adapted to suit family visits at the weekend. This promotes people's wellbeing and supports people to feel valued.

We received some mixed feedback about the quality of collaboration and engagement with some external professionals. For example, some professionals shared they found the leadership team difficult to approach and this impacted on improving outcomes for people. The provider acknowledged there has been some difficulty maintaining good relations, at times. It was encouraging that the provider responded well to this feedback and created a plan which they committed to follow to make improvements. We are confident the provider will drive this forward. This will be followed up at our next inspection.

A medication policy and protocol were in place to support people to take their medication safely. This supports people's health and well-being.

### How good is our leadership?

**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.

The service was very well led and organised. It benefitted from a committed and experienced management team who worked well together.

The management team were visible and they promoted a friendly and professional culture within the service. One staff member told us they, "feel confident in my role as I am well supported" and "the manager is very understanding and approachable".

The manager had good oversight of the service and it was evident they were committed to supporting the team to deliver good quality care. One staff member shared, "there's an open-door policy" and "there's a real sense of community at Scotia Care". The management team were responsive during the inspection and responded timeously to any request or questions raised.

The service demonstrated a culture of continuous learning and improvement. The management team have developed a supportive and reflective culture in the service; staff are encouraged to complete reflective accounts in the event of an incident or significant event. This supports an environment where there is continuous learning and improvement is driven forward. Staff told us they really appreciate this as it helps to build on their strengths and improves outcomes for people.

The management team attended a daily operation meeting which provided robust oversight of all areas of the service. Key areas of risk were highlighted and discussed. For example, concerns relating to staffing, performance and people's skin integrity, were shared and associated actions discussed. This helps manage risk and keep people safe.

Staff told us they felt well informed of any changes and this meant they could care for people safely. This helped prioritise people's health and manage risks to people.

There were thorough and robust policies in place with clear protocols for staff. This meant staff had the right knowledge and guidance and this helped keep people safe.

People were comfortable contacting the service if they needed to and were generally confident any issues raised would be addressed. One person told us they contacted the office with an issue and it was resolved that very day, "I felt valued as the response from Scotia was very quick, I'm very grateful for the care received".

People's experiences were regularly sought and evaluated. In a recent survey people experiencing care reported a high level of satisfaction and they felt well informed and included. The service should include this information into the existing service improvement plan to support continuous improvement.

People's reviews were up to date with very few outstanding. People's views were recorded alongside any identified actions. We were confident any identified actions were being followed up timeously. This supported good outcomes for people.

We observed a robust audit which gave the leadership an overview of review meetings and associated risk assessments required. We were satisfied people were receiving the care and support to meet their needs and preferences.

The leadership team worked well together with effective systems to plan and follow up on improvement priorities. A number of audits formed the basis of how the service assessed their own performance. For example, recent audits and staff surveys. Clear processes followed these to help bring about improvement. This worked well because they were progressed timeously with each member of the leadership team being clear about their roles and responsibilities. As a result, improvements were identified, planned and acted on timeously.

Staff were regularly consulted and they benefitted from regular team meetings. We heard the leadership team recently changed the structure of the team meetings and staff told us they had requested this and appreciated the developments. Staff were able to share their views and told us they felt part of changes and any improvements.

Complaints were well managed. We observed the complaints process was user friendly and accessible. People were made aware promptly of any outcome of any complaints and there are processes in place to implement learning from complaints.

Observations of staff practice were regularly carried out to assess learning and competence. Outcomes from these were discussed through team meetings, individual supervision and planned training, to ensure suitable levels of practice were maintained. People experiencing care benefitted from a competent and well managed staff group.

The management team had a good overview and analysis of staff training and staff training was up to date. The staff benefitted from a learning and development co-ordinator who had good oversight of staff development. People benefitted from a skilled staff group to meet their needs.

The service has governance and quality assurance processes in place for Infection Prevention and Control. There are regular observations of practice undertaken to ensure practice is at a satisfactory level.

Formal processes were clearly documented. Staff were aware of accidents and incidents to report. Whilst we saw this was the case, the service was not notifying the Care Inspectorate in line with guidance. (See Area for improvement 1 in 'What the service has done to meet any areas for improvement we made at or since the last inspection')

We observed that on one occasion following a disciplinary outcome for a member of staff, a referral to the relevant regulatory body was not made, as required. This was raised directly with the leadership team. We observed there was learning from this incident which was reflected in some of the policy documents and training plan. The management team reflected on this and used this as an opportunity to train and develop staff. This was encouraging and it upskilled staff. We are confident the provider will continue to develop this area and we will follow this up at our next inspection.

The service adhered to local adult protection guidance and worked in partnership with external agencies. This helps keep people safe.

## How good is our staff team?

## 5 - Very Good

We found significant strengths in aspects of recruitment and induction. These supported positive outcomes for people, therefore we evaluated this key question as very good.

Staff retention was good and most staff told us they enjoyed their role at Scotia Care. We observed staff had a passionate approach to enriching the lives of others and provided good quality care. One staff member shared, "I love to see my clients smile" and another shared, "the clients are the best bit about my job".

The provider supported staff wellbeing. This was evident within the staff newsletter and other supports available to staff. One staff member shared, "the provider has been really flexible with my personal circumstances and it means I can be the best version of myself to clients".

Staff recruitment was ongoing to ensure the provider could meet the demands of the service. The provider has developed a very good working relationship with the local Health and Social Care Partnership and during the inspection we heard about a careers event at a local primary school.

We were confident staff were recruited in a way that was informed by all aspects of safer recruitment guidance. All relevant checks and documentation were in place and this promoted people's wellbeing and safety. The recruitment process was well organised and this included regular audits to ensure compliance.

There was a robust induction with a probationary period. The induction process included, essential training, provider policies and guidance for the role. Staff told us they felt well equipped to do their job and shared the induction was, "very thorough" and that they felt, "well supported".

We were confident staff started work with sufficient knowledge and skills to undertake their role. New staff were given the opportunity to shadow more experienced staff and their probationary period allowed the provider to assess competence for the role and identify any training needs. We observed staff who required additional support and how this improved outcomes for people.

During the induction period, feedback was sought from people using the service and family members where appropriate. This helped support good outcomes for people and identify any issues or areas for development for staff.

The provider is committed to support internal career progression and leadership qualifications to upskill staff. Currently there are a number of staff working towards this qualification. One staff member told us, "A real benefit of working at Scotia Care is the excellent career progression and training". People experiencing care benefitted from staff who were skilled and knowledgeable.

There was a robust training matrix in place and at a glance we could observe what was completed or outstanding for each staff member. Staff had a tailored training plan to meet their needs. Staff benefitted from a training coordinator who had a good oversight of training needs and this was filtered through supervision sessions to develop and maintain good practice.

We observed staff had regular supervision and an annual appraisal. Staff were very well supported. There was a well organised supervision planner and alert system to the leadership team.

We observed an open-door policy at the office and staff were encouraged to attend the office anytime to discuss concerns or issues they may have. This ensured people were well cared for and staff had the necessary skill and competence to carry out their role.

There were clear policies, processes and protocols in place for staff to follow. There was an adult protection policy and procedure that evidences how people were kept safe. Staff were trained in adult protection and were confident to make referrals. This promotes people's safety and well-being.

## How well is our care and support planned?

**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.

Everyone benefitted from a personalised and comprehensive care plan which clearly outlined their care and support required to meet people's needs. We observed that people, their family members and appropriate representatives had been involved in personal planning.

Care plans were regularly audited. We observed these audits led to developments and better outcomes for people. For example, this ensured people had the most up to date information to meet their needs safely.

We observed good information about how people like aspects of their care and support delivered. For example, people's preferences were included. Risk assessments and safety plans were in place and this promoted people's safety and wellbeing.

Care plans were arranged around the tasks that people required to be performed in order to be safe and comfortable within their own homes. They were clear for staff to follow, respectfully written and specific to each person.

Some care plans had more 'about me' information than others. We did not observe this impacted on people's outcomes. Staff knew people well and this was evidenced by the supportive and trustworthy relationships developed with people experiencing care. However, this was raised with the provider as a area for development and they have a plan to drive this forward.

The service held good information regarding people's health needs as they related to people's care. The care plans were clear, respectfully written and personalised. This provided carers with good levels of information to care for people safely and keep them comfortable.

People and their families told us they felt included and that their voice was heard. Reviews were up to date and included contributions from all relevant people. Reviews were robust and recorded with any identified actions. We were satisfied any actions were followed up timeously and this supported good outcomes for people.

The service used an online care planning and recording system that could be updated quickly, as needs changed. The staff used handheld devices in the community but there were also paper copies in people's homes. One family member shared, "I can log onto the app to see how my loved one has been, it keeps us involved and part of their care".

## 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

The provider should ensure that all notifiable incidents are reported to the Care Inspectorate as per the guidance 'Records all services (except Childminders) must keep and notification reporting guidance'.

This is to ensure care and support is consistent with the Health and Social Care Standard (HSCS) which states: 'any treatment or intervention that I experience is safe and effective' (HSCS 1.24).

In order to comply with Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations, Scottish Statutory Instruments 2011 No 210 Regulation 4 (1) (a) a provider must make proper provision for the health and welfare of people.

**This area for improvement was made on 20 October 2021.**

#### Action taken since then

On reviewing the accidents and incidents reports, we observed two accidents that were not reported to the Care Inspectorate as expected. The non reporting had no adverse effects and did not lead to poor outcomes for people.

This was raised with the manager and the guidance was shared and discussed. We are confident the manager will take this on board and drive this improvement forward. This will be followed up at our next inspection.

**This area for improvement has not been met and has been restated.**

#### Previous area for improvement 2

The provider should ensure that up to date records are maintained in respect of people who represent those accessing support such as, Guardians and Power of Attorney including, any powers that they hold.

This is to ensure that care and support is consistent with the Health and Social Care Standard (HSCS) which states: 'If I am unable to make my own decisions at any time, the views of those who know my wishes such as, my carer, independent advocate, formal or informal representative, are sought and taken into account' (HSCS 2.12).

**This area for improvement was made on 20 October 2021.**

## Action taken since then

We observed the provider held up to date records for people who represent those accessing support. People who had representatives, for example, Power of Attorney were clearly recorded in care plans. This reassured us that the right people would be contacted and included in any appropriate decision, if required. This upheld people's rights and ensured their voice was heard.

**This area for improvement has been met.**

## Complaints

There have been no complaints upheld since the last inspection. Details of any older upheld complaints are published at [www.careinspectorate.com](http://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 leadership?	5 - Very Good
2.2 Quality assurance and improvement is led well	5 - Very Good
How good is our staff team?	5 - Very Good
3.2 Staff have the right knowledge, competence and development to care for and support people	5 - Very Good
How well is our care and support planned?	5 - Very Good
5.1 Assessment and personal planning reflects people's outcomes and wishes	5 - Very Good

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