

Concept Homecare Ltd Support Service

Office No: 13
Merryfield Business Centre
Macmerry Industrial Estate, East Lothian
Tranent
EH33 1ET

Telephone: 07747130617

Type of inspection:
Announced (short notice)

Completed on:
7 May 2024

Service provided by:
Concept Homecare Ltd

Service provider number:
SP2022000160

Service no:
CS2022000235

About the service

Concept Homecare Ltd provides a Care at Home service for adults in Edinburgh, the main office is located in MacMerry. The small team consists of the manager, care co-ordinator and carers, with some bank staff. At the time of this inspection, twenty two people were being supported across East, Mid and West Lothian areas in their own homes

About the inspection

This was an inspection to follow up on one requirement and took place on the 7th May 2024. The inspection was carried out by one inspector from the Care Inspectorate.

To prepare for the inspection we reviewed information about the service. This included previous inspection findings, information submitted by the service, complaints and intelligence gathered since the last inspection. In making our evaluations of the service we reviewed documents.

Key messages

- The provider had safe recruitment processes in place.
- Quality assurance and audits to monitor the service had improved.
- Staff training processes were in place including supervision and observations of practice.

What the service has done to meet any requirements we made at or since the last inspection

Requirements

Requirement 1

By 25th March 2024, the provider must demonstrate safer staff recruitment and selection procedures to safeguard people who use the service and meet legal requirements. In order to do this, you must:

- Implement and follow a clear policy and procedures that ensures staff consistently verify all supplied references.
- Ensure that information obtained in references are sufficiently verified
- Ensure each staff member has a personnel file fully completed surrounding the recruitment process.
- Record and store safely all information for staff employed relating to membership, renewal or any conditions in place of professional bodies staff are members of.
- Be able to monitor and clearly identify when memberships are due for renewal.
- Ensure that systems are audited regularly to improve practice.

This is in order to comply with: The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations, Scottish Statutory Instruments 2011 No 210: 6(1) & regulation 7(1) & regulation 9(1) and regulation 9(2)(a) - requirement about fitness of provider, manager and employees.

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

4.24 I am confident that people who support and care for me have been appropriately and safely recruited

This requirement was made on 7 February 2024.

Action taken on previous requirement

This requirement was set following an inspection of the service 7th February 2024. The provider submitted an action plan which detailed how the requirement would be met to ensure positive outcomes for people experiencing care.

We visited the service and reviewed the processes in place for recruitment. We observed that the service had reviewed and updated its recruitment policy, taking into account the Care Inspectorate safer recruitment guidance. A checklist had been introduced to verify staff references which both managers checked and countersigned. We saw evidence of this in newly employed staff files. We found the employee files to be completed and contained relevant recruitment information.

In addition each file contained information with regard to the status of staff membership with the relevant regulatory body and renewal dates. The service undertook monthly audits of these and maintained a matrix electronically. We were assured that safer recruitment processes were now in place. It's important that these processes and improvements continue to embed in the service to support ongoing improvement.

Met - outwith timescales

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 ensure people experience safe care and support the provider should have oversight and monitor the quality assurance systems. This should include, but is not limited to;

- a) The quality assurance system enables areas for improvement to be identified promptly and action plans if required be developed.
- b) That the outcomes of audits are clearly recorded.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which states 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 7 February 2024.

Action taken since then

The service has developed a comprehensive quality assurance policy and plan. Monthly quality assurance and staff meetings were being held. We observed quality assurance audits had taken place monthly and there was further developments to move these to a digital platform. Where areas for improvement were identified actions were in place. The service had oversight of the monthly activity in the form of an electronic matrix and were able to produce reports. This area for improvement has been met.

Previous area for improvement 2

The provider should ensure that essential staff training has been completed by all staff and is repeated regularly. In order to achieve this the service should undertake the following:

a) A detailed staff training plan be organised, it should include but not be limited to;

- Medication administration
- Moving and handling
- Food hygiene
- Adult protection
- Fire awareness
- Data Protection and confidentiality

b) Care staff to complete the annual refresher training for moving and handling people as well as medication administration training.

c) Develop a system to monitor staff training and when annual refreshers are due.

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

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

This area for improvement was made on 7 February 2024.

Action taken since then

We observed that management had oversight of staff training and when updates were due, all staff training was up to date. A staff induction programme was in place. A training matrix was held electronically and checked regularly. We observed staff had received direct observations of practice and supervision to support their learning and development. The service had accessed a trainer to support the vocational training for staff to complete their SVQ. Monthly staff meetings were in place. 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.

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Care Inspectorate
Compass House
11 Riverside Drive
Dundee
DD1 4NY

enquiries@careinspectorate.com

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