

# Caley Home Care Support Service

38 Merchiston Avenue  
Edinburgh  
EH10 4NZ

Telephone: 01316 230 163

**Type of inspection:**  
Unannounced

**Completed on:**  
17 June 2024

**Service provided by:**  
Caley Home Care Ltd

**Service provider number:**  
SP2015012490

**Service no:**  
CS2015337333

## About the service

Caley Home Care provides care and support for older people with learning disabilities, physical disabilities and people living with dementia to enable them to live as independently as possible in their own homes.

The service originated to support people living in Blairgowrie and surrounding towns and villages. A second branch of the service provides services for people living in Edinburgh. The registered office is based in Edinburgh.

286 people were using the service at the time of our inspection.

## About the inspection

This was an unannounced inspection which took place between the period of the 4 and 17 June 2024. We visited the registered office on 4 June and visited people in their own homes on 6 and 10 June 2024. We provided feedback to the manager on 17th June 2024.

The inspection was carried out by two inspectors 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 29 people and 12 of their relatives.
- Received comments from 16 relatives through our online survey.
- Spoke with 12 staff and management. Plus, a further 39 from our online survey.
- Three professionals provided us with their views of the service they worked closely with.
- Observed staff practice and daily life.
- Reviewed a range of documents.

## Key messages

- People praised the quality of the staff who supported them.
- We observed positive, respectful, and natural interactions between staff and those being supported. This was achieved through ensuring high levels of staff consistency.
- Staff displayed a strong sense of duty of care towards people.
- People's personal plans were of a good quality and personalised to their individual needs.
- We were of the view that there was a degree of under reporting and recording of accidents and incidents.

## 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?	4 - 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 made an evaluation of very good for this key question. There were very few areas for improvement. Those that did exist had minimal adverse impact on people's experiences and outcomes.

We visited people at their home addresses and observed positive, respectful, and natural interactions by the staff team. People were supported by a small group of staff they knew well. People and families found this reassuring and meant they developed trusting relationships with the staff. One relative told us "My parents love the continuity of staff they get from Caley home care which is really important to them."

Visiting times were also consistent which enabled people to plan their day well. People described good communication from staff, who typically contacted them to advise of changes to who was visiting or if they were running late. This meant there was less need for people to contact the office for information, which they valued.

A few people told us that their visit times did not fully meet their expectations, especially around mealtimes. The service strived to try and accommodate everyone's needs and changes were agreed with people wherever possible.

Likewise, some told us that they felt their visits were a little rushed at times. This was mainly due to the carers travel time between visits, especially in the Edinburgh area. The manager was aware of this and monitoring it.

Staff demonstrated a good knowledge of people's needs, through detailed agreed personal plans and support guidance which was current and reflected people's health and wellbeing needs. This meant people could be confident staff supporting them were well informed and worked consistently to help them achieve the outcomes they had identified.

Overall, people were happy with the quality of care they received from the service. Comments from people we spoke with included: "The carers know what they're doing", "very, very reliable. They always phone if they're running a bit late" and "The main two carers are very good. One (male carer) is exceptionally good"

## How good is our leadership?

4 - Good

We evaluated this key question as good. While strengths had a significant positive impact, improvements are needed to ensure that people consistently have experiences and outcomes which are as positive as possible.

Staff described leadership as supportive and enabled them to ask questions, share ideas and explore ways to promote resilience. Staff knew their contribution was valued and recognised by the management of the service. This helped keep people motivated, remain adaptable and to focus on how best to provide care and support.

Some people told us that they would like more opportunities to support the improvement and development of the service. Although their views were captured at their regular review meetings, some felt having a questionnaire style approach would be of benefit. This would enable the manager to collectively gather people's views and draw information to feed into the ongoing improvement and development plan.

We suggested to the manager perhaps a self-evaluation on the performance of the service in meeting people's care needs could be completed. This would enhance the quality assurance systems already in place and provide a benchmarking exercise to support continuous improvement and development opportunities.

We sampled accident and incident records. The recording and reporting of these had been an area for improvement at our last inspection. We noted that very few had been recorded, which we were surprised to find, especially given the size of the service the level of vulnerability of people, including their mobility and risk of falls. The manager should continue to remind staff what constitutes an accident or incident and how this should be reported. We did not gather evidence to suggest anyone was at risk due to any potential under reporting at this inspection. (Please see area for improvement one)

At our previous inspection, we identified that the Care Inspectorate was not informed of all notifiable events in line with Care Inspectorate guidance. At this inspection, we identified some occurrences when this guidance for a registered service was not followed. (Please see area for improvement two).

As the service continues to grow, both in the Edinburgh and Perth regions, we discussed with the manager the need to review the current management structure to ensure it continues to meet the care needs of people.

During this inspection, we experienced some issues with the ability to access documents in a timely manner. This highlighted to us that the service was not inspection ready, recognising that inspections can take place at any time and are usually unannounced. The management team should learn from this experience. The manager gave assurance this would be actioned.

### Areas for improvement

1. The manager should make improvements to demonstrate that written information about accidents or incidents involving people who use the service is recorded, accurate and up to date. They should also ensure that staff are aware of their responsibility in both reporting and recording of any such accidents and incidents.

This is to ensure care and support is consistent with the Health and Social Care Standards which state: "I experience high quality care and support based on relevant evidence, guidance and best practice." HSCS 4:11

2. The manager should familiarise themselves with the guidance on notifying the Care Inspectorate of any accidents and incidents which impact people receiving support from the provider, and ensure that to be completed within parameters as detailed in the said guidance.

This is to ensure care and support is consistent with the Health and Social Care Standards which state: "I experience high quality care and support based on relevant evidence, guidance and best practice." HSCS 4:11

### How good is our staff team?

**5 - Very Good**

We made an evaluation of very good for this key question. There were very few areas for improvement. Those that did exist had minimal adverse impact on people's experiences and outcomes.

Staff felt supported in their role and had confidence in management should they have to raise any concerns. One carer told us: "They [the management] always have the interests of both clients and staff at heart. Always on call to assist in any way and very approachable if you need extra training and support."

Through our observations of staff practice, we concluded that they were well-meaning in their actions and clearly wanted to take care of people. It was evident staff were an asset to the service, contributing significantly to its effectiveness.

Staff completed a range of online and face to face training courses. Competency based training was also delivered and included administering medication and supporting people with their moving and handling. This gives people confidence their care and support are delivered by competent staff.

Observations of staff practice were also undertaken on a regular basis. This included how staff interacted with people, how people's care needs were met and the identification of any reflective practice discussions and training needs. Records were maintained well.

## How well is our care and support planned?

**5 - Very Good**

We made an evaluation of very good for this key question. There were very few areas for improvement. Those that did exist had minimal adverse impact on people's experiences and outcomes.

Personal plans were electronic which enabled carers to have quick access to information to guide them on how best to support a person. Additionally, people and their relatives could also access this system, and read their care related documentation. This ensures people feel inclusive of their packages of care.

We sampled 28 personal plans and a further 39 review meetings that had been held with people and their relatives. They provided staff with clear direction about how to deliver each person's care and support. The sample of care documentation viewed provided a good overview of the person's life history, what was important to them, their choices, wishes and preferences. This ensures the care and support delivered to people were person centred and meaningful to them.

Regular reviews were held and provided an overview of care being delivered and captured the discussion held and actions agreed. File audits were also completed to ensure the support guidance for staff was kept up to date and reflected people's care needs.

There were a small number of personal plans we sampled that contained conflicting information and greater clarity was required. We provided feedback to the manager to make the minor improvements needed.

## 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 manager should make improvements to demonstrate that written information about accidents or incidents involving people who use the service is recorded, accurate and up to date. They should also ensure

that staff are aware of their responsibility in both reporting and recording of any such accidents and incidents.

This is to ensure care and support is consistent with the health and Social care Standards which state: "I experience high quality care and support based on relevant evidence, guidance and best practice." HSCS 4:11.

**This area for improvement was made on 22 November 2022.**

#### Action taken since then

We identified there to be a degree of under reporting of accidents and incidents occurring within the service. We have commented on this more under Key Question 2.

#### Previous area for improvement 2

The manager should familiarise themselves with the guidance on notifying the Care Inspectorate of any accidents and incidents which impact people receiving support from the provider, and ensure that to be completed within parameters as detailed in the said guidance.

This is to ensure care and support is consistent with the health and Social care Standards which state: "I experience high quality care and support based on relevant evidence, guidance and best practice." HSCS 4:11.

**This area for improvement was made on 22 November 2022.**

#### Action taken since then

We identified that further improvement was needed with regards to notifications to the Care Inspectorate. We have reported on this more under Key Question 2.

## 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?	4 - Good
2.2 Quality assurance and improvement is led well	4 - 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



## To find out more

This inspection report is published by the Care Inspectorate. You can download this report and others from our website.

Care services in Scotland cannot operate unless they are registered with the Care Inspectorate. We inspect, award grades and help services to improve. We also investigate complaints about care services and can take action when things aren't good enough.

Please get in touch with us if you would like more information or have any concerns about a care service.

You can also read more about our work online at [www.careinspectorate.com](http://www.careinspectorate.com)

## Contact us

Care Inspectorate  
Compass House  
11 Riverside Drive  
Dundee  
DD1 4NY

[enquiries@careinspectorate.com](mailto:enquiries@careinspectorate.com)

0345 600 9527

Find us on Facebook

Twitter: @careinspect

## Other languages and formats

This report is available in other languages and formats on request.

Tha am foillseachadh seo ri fhaighinn ann an cruthannan is cànan eile ma nithear iartras.

অনুরোধসাপেক্ষে এই প্রকাশনাটি অন্য ফরম্যাট এবং অন্যান্য ভাষায় পাওয়া যায়।

یہ اشاعت درخواست کرنے پر دیگر شکلوں اور دیگر زبانوں میں فراہم کی جاسکتی ہے۔

ਬੇਨਤੀ 'ਤੇ ਇਹ ਪ੍ਰਕਾਸ਼ਨ ਹੋਰ ਰੂਪਾਂ ਅਤੇ ਹੋਰਨਾਂ ਭਾਸ਼ਾਵਾਂ ਵਿਚ ਉਪਲਬਧ ਹੈ।

هذه الوثيقة متوفرة بلغات ونماذج أخرى عند الطلب

本出版品有其他格式和其他語言備索。

Na życzenie niniejsza publikacja dostępna jest także w innych formatach oraz językach.