

Able Care @ Home Support Service

10 Mearns Street
Aberdeen
AB11 5AT

Telephone: 01224 634 864

Type of inspection:
Announced (short notice)

Completed on:
17 May 2024

Service provided by:
Absolute Recruitment (UK) Ltd

Service provider number:
SP2015012558

Service no:
CS2017354749

About the service

Able Care @ Home supports people who are living in their own homes and in the community. The service provides care and support for people with physical disabilities, mental health problems and those who are frail and elderly. Support ranges from a few hours per week to 24-hours per day.

At the time of inspection, the service was supporting 13 people living across Aberdeen City. The service has been registered since 2017.

About the inspection

This was a short notice announced inspection which took place on 14 May 2024 and 16 May 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 ten people using the service and seven of their family and friends
- spoke with ten staff and management
- observed practice
- reviewed documents
- spoke with visiting professionals.

Key messages

The service had made improvements around safer recruitment, care visit times and addressing concerns, which meant the previous requirement and areas for improvement were met.

People were happy with the quality of care they were receiving.

People viewed carers positively and had developed good relationships with them.

Quality assurance processes and systems were improving outcomes for people.

Staff were working well as a team and were meeting people's needs.

People were involved in reviewing their care and developing their personal plans.

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?	4 - Good
How good is our leadership?	4 - Good
How good is our staff team?	4 - Good
How well is our care and support planned?	4 - Good

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

How well do we support people's wellbeing?

4 - Good

We made an evaluation of good, for this key question. As several important strengths taken together clearly outweighed areas for improvement.

People were happy with the support they were receiving. Someone using the service said, "Able Care have been looking after me for several years, and I have no complaints. They help me to wash and dress, and there aren't any issues". This showed people's care preferences were being addressed. Furthermore, people viewed carers positively. Someone said, "staff are always kind" and another said, "Mum enjoys seeing the carers and very much values the support they give her". This demonstrated that carers were thoughtful in their approach. Staff were also polite when interacting. For example, whilst helping people to wash, they would ask if water temperature was ok and if people were comfortable. This meant support was dignified and respectful. Overall, people's satisfaction with care visits was positive.

Staff were supporting people to take their medication. A carer was observed asking someone if they were ready to take their tablets from a locked medication safe. They said they were not and the carer tended to something else. The carer asked again later and the medication was provided. This meant the person still had some choice, even though protective measures were in place. Staff were aware of protocols and guidance, and were proficiently administering and recording. Due to this, people's health was improved as they were taking their medication as prescribed.

People spoke positively about staff helping them to move and walk. Someone was assisted using a ceiling hoist from bed to wheelchair. Another person was supported to walk with a frame. Carers provided constant reassurance and did not rush. Staff helped people safely and in accordance with moving and handling guidance. This meant people were comfortable moving around their homes, whilst reducing the risk of falls.

The service had useful links with other professionals in the community. For example, carers were in regular contact with community nurses to ensure they were correctly assisting with a wound. Nursing staff spoke highly of carers and expressed having faith in them. This evidenced the good standard of support that was being provided. Through joint-working, people were supported by carers who were informed around best practice. This enhanced the quality of care being provided.

How good is our leadership?

4 - Good

We made an evaluation of good, for this key question. As several important strengths taken together clearly outweighed areas for improvement.

Management were viewed positively by staff. A carer said, "we can ask them anything at any time" whilst another said, "my manager has been superb". This meant management were approachable and that staff felt supported. This added to staff satisfaction around their caring roles. People were therefore experiencing better quality care, due to staff feeling valued at work.

Quality assurance processes were supporting better outcomes for people. Management were observing staff and giving feedback on their practice. This meant managers had good oversight of the care that was being provided. Monitoring systems were in place for medication records, daily notes, staff training, supervisions, spot checks and care reviews. Furthermore, weekly handovers of the service were checked by senior management. Due to the provider regularly auditing and self-evaluating, it was evident they were seeking to develop how they perform moving forwards. Due to this, people's care and support was continually improving.

The improvement plan required updating. Management were able to tell us how they plan to develop the service. This included seeking input from people and their families. This would ensure people's views and opinions were shaping the service. Moving forwards, we trust the provider will document planned changes in their improvement plan. Having an active improvement plan will support a culture of continuous improvement, which should benefit people's care and support. We will inspect the plan at future inspections.

Management had new systems in place for dealing with any complaints and concerns. A new policy had been written which clearly met the aims and objectives of Able Care. The provider was developing a user-friendly version which people will be provided with. Furthermore, people were aware of the complaints process and said any issues were correctly dealt with. Overall, the process had been streamlined to address future concerns appropriately. This should benefit people's experiences and outcomes.

Staff were safely recruited and registered. Staff who should be, were registered with the Scottish Social Services Council (SSSC). Management were overseeing registration and supporting staff to meet any required conditions. This meant staff and management remained accountable for practice and that professional codes were being followed. A safer recruitment policy was in place along with a recruitment flowchart. Management were also undertaking recruitment audits. The provider is going to improve this by developing a tracker for chasing required documents. The service had worked hard to improve their recruitment processes and procedures. As a result, documentation and checks for new staff were accurate. This provided safeguarding to people who were using the service and met legal requirements.

How good is our staff team?

4 - Good

We made an evaluation of good, for this key question. As several important strengths taken together clearly outweighed areas for improvement.

Staffing levels were meeting people's needs. Rotas were completed in advance of visits, so people knew who was coming and when. People said care visits were not missed or cancelled. No concerns were raised by people around timings, delays or lateness. People also said they were kept up to date around any changes. Someone told us, "I am always informed of any delay or alterations to care, and we always get our visits". This meant people were receiving their assessed support. Due to this, care needs were fulfilled. However, the electronic system carers were using to log in and out of visits was unreliable. The provider is currently in the process of purchasing a new system for staff to use. This should provide a reliable method of logging visits, which management can oversee. This will result in better oversight that people's visits have been completed.

People were being supported by a regular group of carers. Someone said, "I appreciate having the same small selection of carers". People knew staff well and enjoyed having them in their homes. This showed consistency, which was benefitting people as they could get to know staff.

Staff were working well together. Two carers were observed supporting someone to wash and dress. They worked productively and were efficient. Someone said, "the two carers come in and they just get things done without any fuss". This meant people's needs were met through good organisational skills. Staff spoke positively about each other and said they liked working together. This provided a positive experience for people, due to competent staff who worked well with each other. Staff were also communicating well as a team. Carers said they spoke to each other regularly. This meant staff were aware of the most recent changes to support and had the most up to date information. People's experiences of care were therefore improved.

Staff felt supported by management. Carers spoke about regular one to one supervision time with their managers. This provided time for them to develop in their roles. Team meetings were also taking place. This provided opportunity for shared learning. This showed open and transparent communication between staff and management. Carers said office staff were always helpful and would provide them with any information they needed. Due to this, staff had the knowledge they needed to care for people correctly.

Staff were trained to support people. Management were keeping track of training requirements to ensure they were up to date. Carers were knowledgeable in a range of topics including, moving and handling, medication and adult support and protection. This meant staff were aware of the best ways to care for people and how to keep them safe. Consequently, carers were well equipped to meet people's needs. As a result, people were experiencing a good quality of care.

How well is our care and support planned?

4 - Good

We made an evaluation of good, for this key question. As several important strengths taken together clearly outweighed areas for improvement.

Everyone using the service had a personal plan which documented their care and support. Copies were kept in the office and in people's houses; this meant plans were easily accessible. Consequently, staff and people were aware of what should happen at each care visit.

Personal plans provided clear information on how to care for people. They detailed aspects of support including, washing and dressing, mobility and medication. Carers felt plans provided clear instructions; whilst people stated their needs had been documented correctly. This meant plans provided clear guidance and were useful as a reminder for carers or for when new staff start. Furthermore, people had been involved in developing their plans with their personal thoughts noted. Plans were therefore person-centred and based around people's preferences. Due to this, people were being cared for by their favoured methods of support.

Plans were being reviewed and updated. People and their loved ones were involved in review meetings to discuss their care. Information was then used to update plans and ensure information was current. This meant plans were unique to each person and that carers had the most up to date information. This enhanced care provisions, due to plans being current and based around personal choice. People's quality of care was therefore improved.

Plans documented how to keep people safe and reduce risks. For example, a moving and handling plan had been updated following someone experiencing a fall. New guidance informed carers how to support, whilst decreasing the likelihood of falls. As a result, the person was less likely to fall and injure themselves. Plans also documented people's future wishes around their care. This meant the provider was aware of how people wanted to be looked after should their needs or abilities change. People will therefore benefit from receiving the right care at the right time.

Carers were completing daily notes at each care visit. Notes provided clear detail around the support people had received. People and their families could access these records. This meant people felt the service was being open and transparent. This added to people's satisfaction with the provider and carers.

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

Requirements

Requirement 1

By 2 May 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, the provider must:

- a) Implement a clear policy about which level of staff can sign off references on behalf of the organisation.
- b) Ensure that information obtained in references is compared with the application form for accuracy.
- c) Demonstrate a robust system to follow-up references or PVG applications which are not satisfactory.
- d) Ensure that any gaps in employment are discussed with the applicant at interview stage.
- e) Provide training for staff involved in recruitment and selection to ensure practice is in line with policy.
- f) Ensure that applicants and staff know the organisation's recruitment policy and procedure.
- g) Ensure that audits are undertaken regularly to support improved practice.

To be completed by: 02 May 2024

This is in order to comply with:

Health and Social Care Standard 4.24: 'I am confident that people who support and care for me have been appropriately and safely recruited'.

Regulation 9(1) of The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011 No. 210 Social Care).

This requirement was made on 29 February 2024.

Action taken on previous requirement

The provider was ensuring staff were recruited and registered safely. This included a safer recruitment policy and improved processes and procedures. People were therefore being protected, as staff were recruited in accordance with legal requirements. (See 'How good is our leadership?')

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

The service should ensure that care and support is provided at the agreed times and in such a way that meets the identified needs of the service user as recorded in the agreed support plan.

This is in order to comply with: Health and Social Care Standard 4.14: 'My care and support is provided in a planned and safe way, including if there is an emergency or unexpected event'.

This area for improvement was made on 29 February 2024.

Action taken since then

People's assessed needs were being met as staff were attending scheduled support visits. There were no concerns raised around visits being cancelled or missed. People's care needs were being fulfilled due to this. (See 'How good is our staff team?')

This area for improvement has been met.

Previous area for improvement 2

The service should ensure that complaints and concerns made about the service are investigated and addressed appropriately.

In doing this the service should;

Ensure that clients, their representatives, stakeholders and staff are aware of the provider's complaints policy.

Ensure that complaints are investigated and responded to in line with the provider's complaints policy. The management team should be able to access complaints information easily.

This is in order to comply 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 29 February 2024.

Action taken since then

Systems were in place to deal with concerns and complaints. People were aware of the complaints process and felt that they were listened to. The overall process had been improved to ensure concerns are dealt with correctly. This will benefit people's future experiences with Able Care. (See 'How good is our leadership?')

This area for improvement has been met.

Complaints

Please see Care Inspectorate website (www.careinspectorate.com) for details of complaints about the service which have been upheld.

Detailed evaluations

How well do we support people's wellbeing?	4 - Good
1.3 People's health and wellbeing benefits from their care and support	4 - 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?	4 - Good
3.3 Staffing arrangements are right and staff work well together	4 - Good
How well is our care and support planned?	4 - Good
5.1 Assessment and personal planning reflects people's outcomes and wishes	4 - 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

Contact us

Care Inspectorate
Compass House
11 Riverside Drive
Dundee
DD1 4NY

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.