

Marie Curie Care at Home Scotland South and East Support Service

Marie Curie Hospice -Edinburgh
45 Frogston Road West
EDINBURGH
EH10 7DR

Telephone: 0131 470 2201

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Announced (short notice)

Completed on:
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Service provided by:
Marie Curie

Service provider number:
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Service no:
CS2005109316

About the service

Marie Curie provides a care at home service to adults with life limiting conditions in their own home. The service is provided in the east and south areas of Scotland. It covers 12 local authority areas, spreading from the Scottish Borders, Edinburgh and the Lothians, to Fife, Lanarkshire, Stirling and Dundee.

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

About the inspection

This was a short notice announced inspection which took place between 23 and 26 July 2024. We spent time speaking with the management team and some of the support staff. We also viewed evidence remotely and sought the feedback from health professionals who have regular involvement with the service.

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:

- Received feedback via our online questionnaire from 12 people who use the service or their relatives.
- Received feedback from 35 support staff.
- Sought the views of 10 health professionals.
- Reviewed documents.

Key messages

- People and their relatives described the service as a lifeline, providing them with valuable care and support by a caring and knowledgeable group of staff.
- People's health benefited from comprehensive assessments and effective communication with other external health professionals.
- Staff felt supported through regular supervision and were confident in their roles.
- The management team had a positive culture of continuous learning, improvement and development through robust and comprehensive quality assurance measures.
- As part of this inspection, we assessed the service's self-evaluation of key areas. We found that the service had an effective and well completed self-evaluation that was reflective of our findings.

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?	6 - Excellent
How good is our staff team?	5 - Very 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?

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.

During this inspection, we did not get the opportunity to speak to people directly who use the service due to their life limiting conditions. We did however seek their views through our online survey, in conjunction with the 'Patient experience surveys' undertaken by the service.

People told us that they found the support staff to be very kind and polite. Through the positive working relationships established, people told us they felt treated with dignity, respect, and compassion, demonstrating the principles of the Health and Social Care Standards.

People felt respected and listened to because their wishes and preferences were used to shape how they were supported, including if they wished to decline an aspect of their care.

They had confidence in the staff who cared for them. One person told us "I am very secure in the knowledge I will be well cared for when my Marie Curie carer is here." Through the knowledge, training and experience, staff were able to recognise any change in someone's health and act, accordingly, working closely in conjunction with other health professionals including district nurses and general practitioners.

Staff demonstrated a good knowledge of people's needs, through detailed agreed personal plans and support guidance which were 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.

Health professionals also told us they too felt the quality of care to people receiving end of life care was very good. Comments included "The service provides a person-centred approach, focusing on the patient's individual needs, values and provides dignity to patients and families at all times." Another said "The overnight service has been outstanding with patients, providing personal care and allowing respite for families. I am overwhelmed by the professionalism shown from all staff."

Overall, people were happy with the quality of care they received from the service. Comments we received included: "I cannot thank the Marie Curie Service enough for their input to during this period. We are truly thankful." Another said "The people who look after us are incredible. Their empathy and support are invaluable considering the very difficult job they do. They advise and help us so much and for that we are truly grateful."

How good is our leadership?

6 - Excellent

We made an evaluation of excellent for this key question. Sector leading practices supported positive experiences and outcomes for people which were of a high quality. There was a track record of innovative and effective practice.

A variety of comprehensive quality assurance processes were in place which enabled the management team to have excellent oversight of the care delivered to people. This ensured people had confidence that their care was being managed effectively and responded to appropriately.

Supported people, relative and staff satisfaction surveys were undertaken along with a self-evaluation tool which was based on the Care Inspectorate's framework, underpinned by the Health & Social Care Standards. All the above contributed to a well written improvement and development plan.

Leadership was supportive, responsive, and visible, which enabled staff to voice their concerns, share ideas and explore ways to promote resilience. Staff knew that 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.

A health professional told us the following; "The leadership team are very responsive and communicate with the team when required regarding complex patients."

There was a positive culture within the service of aiming to continuously improve and develop from learning from any complaints, incidents and involving people and staff as much as possible. This has been reflected in our evaluation for this key question.

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.

Staffing arrangements for the service were determined by a process of continuous assessment. The service used a prioritisation tool to accurately prioritise how staff were allocated and work to a 'demand and supply model' - based on respective need. This took account of matching staff to people along with consideration of compatibility and continuity of care. We found there was effective management oversight to monitor unmet demands and a commitment to regularly review the effectiveness of the prioritisation tool.

Staff expressed that the management team were knowledgeable and supportive of their work. They demonstrated an understanding of the nature and challenges associated with supporting individuals they cared for. Additionally, they described managers as open and approachable, fostering a supportive and collaborative work environment. One member of staff told us: "The support I have from my managers is fantastic, this needs to be recognised as without them I would not be able to carry out this sad role, they are always here for us to talk to if needing support, no matter when it is."

Regular supervision was used constructively and supported staff's personal and professional development. There were clear records of learning being undertaken and planned, which informed learning for each member of staff. The manager monitored the frequency of supervision meetings to ensure they were consistent for all staff.

Staff knew that 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.

There was a range of approaches to suit different learning styles, and it was evident that all staff had access to relevant training to meet the ongoing care and support needs of people. A training matrix was monitored by the manager to ensure staff training was up to date and reflected best practice.

Their competence was regularly assessed to ensure that learning and development supported better

outcomes for people. This meant that people were being cared for by staff who understood and were sensitive to their needs and wishes because there were several learning and support measures in place.

How well is our care and support planned?

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.

Due to the nature of the care and support needs of people; receiving end of life care, care planning was fluid and adaptable as their circumstances changed. Care staff worked very closely with District Nurses who shared their care planning and risk assessment documents.

Whilst Marie Curie staff utilised this information well, there was recognition from the service to further enhance their own documentation. This would continue to give people confidence that staff know how to meet people's care needs, clearly document the care delivered and enable them to improve the approach to evaluating the service was meeting people's needs. New documentation was about to be rolled out to be used following a period of staff training.

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?	5 - Very Good
1.3 People's health and wellbeing benefits from their care and support	5 - Very Good
How good is our leadership?	6 - Excellent
2.2 Quality assurance and improvement is led well	6 - Excellent
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?	4 - Good
5.1 Assessment and personal planning reflects people's outcomes and wishes	4 - Good

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