

DDL Care Hub Support Service

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Type of inspection:
Unannounced

Completed on:
8 August 2024

Service provided by:
DDL Care Hub Ltd

Service provider number:
SP2023000221

Service no:
CS2023000339

About the service

DDL Care Hub is a privately run organisation providing a day service for older adults within the Scottish Borders town of Peebles.

The service caters for a maximum of 20 people per day over five days per week.

The service has its own transport. People are picked up from their own home and returned to their home at the start and the end of the day. During the day the service offers light refreshments, a lunch and activities.

Support is provided by a mix of paid staff and volunteers.

About the inspection

This was an unannounced inspection of the service which took place on 31 July 2024 between 09:30 and 15:00 and on 1 August 2024 between 09:30 and 15:30. The inspection was carried out by one inspector from the Care Inspectorate.

To prepare for the inspection we reviewed information about this service. This included registration information, information submitted by the service and intelligence gathered since registration of the service.

In making our evaluations of the service we:

- spoke with people using the service. We also gave the opportunity for health professionals and staff to complete an electronic questionnaire
- we talked with members of staff and the management teams
- observed staff practice and daily life
- reviewed a range of documents.

Key messages

- We observed positive, respectful, and natural interactions between staff and those being supported.
- People were supported by a small group of staff that they knew well.
- People could be confident that the staff who supported them to take their medication safely had the correct knowledge and training.
- We spoke with the manager about recording and developing team meeting and observation of practice records for staff.
- We discussed with the manager further developing care plans to ensure plans accurately reflect the assessed current health and care needs of people receiving care.
- As part of this inspection, we assessed the service's self-evaluation of key areas. We found that the service was not yet undertaking self-evaluation. We discussed the benefits of self-evaluation and how this approach should be adopted to support improvement in the service.

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 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 evaluated this key question as good overall where several strengths impacted positively on outcomes for people and clearly outweighed areas for improvement.

Quality Indicator: 1.3 People's health and wellbeing benefits from their care and support

We observed positive, respectful, and natural interactions between staff and those being supported. This contributed to the development of effective and supportive working relationships, helped people feel safe and secure and enhanced engagement.

Staff demonstrated a good knowledge of people's needs. This meant that people could be confident that staff supporting them were well informed and worked consistently to help them achieve the outcomes that they had identified.

Support records we sampled contained good information to guide staff, daily notes were descriptive and linked to identified outcomes. People had access to their individual support plans which promoted their rights in relation to information held about them. This is further discussed under key question five.

People told us that they looked forward to attending the centre and for some the company of staff and other service users was a significant positive outcome for them. People told us 'I have made new friends and love meeting people I now know out in the community', 'I really enjoy coming, the company is good, and the staff are all so friendly.'

It was evident that the service people received had a positive impact on their mental and physical wellbeing. This included practical support and assistance to access healthcare when required and prompts with medication. People were being supported at their own pace, helping them to feel in control.

The mealtime experience was positive, we could see that a lot of effort and planning took place to identify and provide for individual food preferences. This included people who had special requirements due to illness. We saw that people were offered help to cut up their food, choice in what to drink and choice in meal accompaniments and were treated with dignity and respect.

People supported saw the mealtime as an opportunity to chat and catch up with one another, we discussed with the manager; to further improve the meal experience, staff could dine with the service users to give an overall sense of inclusiveness.

A range of activities had been developed within the centre. Staff were very enthusiastic about their role and were aware of the positive impact meaningful activity can have on an individual's well-being. We discussed with the manager the importance of continually assessing the needs, wishes, preferences and abilities of people using the service. This would ensure people's views, and requests for activities are actioned, showing that activities, wherever possible, are member led.

The service supported people who had low levels of need around medication. Records of medication prompts were maintained. We concluded that people could be confident that the staff who supported them to take their medication safely had the correct knowledge and training.

Quality assurance processes covered several important key areas relating to the care of people using the service. This meant that people could be confident that they were being supported by a team that was well led and that there was an embedded culture of continuous improvement for people using the service.

To aid further improvements we discussed with the manager developing a continuous self-evaluation process which would highlight strengths, correct performance weaknesses, and develop unused skills and abilities. Self-evaluation enables care settings to reflect on what they are doing so they can get to know what they do well and identify what they need to do better.

How good is our staff team?

4 - Good

We evaluated this key question as good overall where several strengths impacted positively on outcomes for people and clearly outweighed areas for improvement.

Quality Indicator: 3.3 Staffing arrangements are right and staff work well together.

Staff had been recruited in a way that made sure they were safe to care for people. Recruitment practices were good, documented clearly with relevant checks being undertaken.

Members were supported by a small group of staff that they knew well. People and families found this reassuring and meant they developed trusting relationships with the staff. One person said, 'The staff are great, so attentive and welcoming, nothing is too much bother.'

People experiencing care had the opportunity to meet any new staff being introduced. This meant that staff had time to get to know the service users and learn what was important to them. Staff confirmed that they felt they had a good induction with regular ongoing support from the management team.

We saw that supervision records were completed for all staff; staff told us they could speak with a manager at any time and attended regular informal team meetings. We spoke with the manager about recording formal team meetings and observations of staff practice as the staff team expanded to ensure good evidence of discussions held, feedback on practice, reflection on any training undertaken and aspects of care they did well or found more challenging. This would aid staff development.

Morale across the service was high, staff we spoke to said they were happy at their work. Staff felt well supported by management and confident in raising concerns. This supported people to have a positive experience of their care as the staff team were enthusiastic and happy.

How well is our care and support planned?

4 - Good

We evaluated this key question as good. There were several important strengths which taken together impacted positively on outcomes for people and clearly outweighed areas for improvement.

Quality Indicator: 5.1 Assessment and personal planning reflects people's outcomes and wishes

The quality of information held within support plans about people's health and support needs was good. Support plans contained good, detailed information about people's personalities, interests and preferences which gave a real sense of what was important to the person.

We discussed with the manager further developing care plans to ensure plans accurately reflected how people like to spend their time whilst at the centre, and how staff can support people in relation to stress and distress, nutrition/weight loss and falls management. This would enable staff to identify the support required to meet the needs of the person receiving care, and the steps which should be implemented to address these needs, and mitigate any risks identified.

Reviews of people's care needs had taken place, from those sampled we could see detailed records of discussions held with identified actions clearly recorded. We discussed with the manager the importance of reviews of care taking place on a regular basis to ensure the needs of people receiving care are met and that care staff have the most up-to-date information and guidance available. (See Area for Improvement 1)

Areas for improvement

1. To ensure that the health, welfare, and safety needs of people receiving care are met in relation to care planning and risk assessments. You should ensure that all personal plans are reviewed regularly (at least once in every six-month period) and contain up-to-date information which:

accurately reflect the assessed current health and care needs of people receiving care, with particular attention being given to how people like to spend their time whilst attending the centre, stress and distress, nutrition/weight loss and falls management. This should enable staff to identify the support required to meet the needs of the person receiving care, and the steps which should be implemented to address these needs, and mitigate any risks identified.

This is to ensure care and support is consistent with Health and Social Care Standard (HSCS) which state: 'My personal plan (sometimes referred to as a care plan) is right for me because it sets out how my needs will be met, as well as my wishes and choices.' (HSCS 1.15).

Complaints

There have been no complaints upheld since the last inspection. Details of any older upheld complaints are published at www.careinspectorate.com.

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 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

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