

# Seasoned Hands Care Support Service

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**Type of inspection:**  
Unannounced

**Completed on:**  
12 August 2024

**Service provided by:**  
Graceguard Services Ltd

**Service provider number:**  
SP2016012686

**Service no:**  
CS2017360594

## About the service

Seasoned Hands Care provides a care at home service to people living in Edinburgh and the Lothians. The service provider is Graceguard Services Ltd.

The service provides packages of care with a minimum one-hour visits. Sixty one people were using the service at the time of this inspection.

## About the inspection

This was an unannounced inspection which took place on 12 August 2024 between 09.00 and 13.00. The inspection was carried out by two inspectors from the Care Inspectorate.

This inspection was undertaken to follow up on two requirements identified at the previous inspection undertaken on 21 May 2024. This report should be read in conjunction with the report dated 30 May 2024. We did not reassess gradings at this inspection.

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:

- we talked with members of staff and the management team
- reviewed a range of documents.

## Key messages

- Improvements had been made to meet our previous requirements.
- We observed improvements and we had confidence in the provider that the improvements would continue to develop and support positive outcomes for people receiving support.

## How good is our leadership?

At the inspection in May 2024, a requirement was made in relation to quality assurance. Findings from this inspection are as follows:

The management team had worked hard to ensure a comprehensive suite of quality assurance tools were in place. There were systems in place to audit a range of areas including analysis of accidents and incidents, staff training needs, medication, and reviewing care plans. This helped staff to identify trends and take prompt action to prevent reoccurrence of events that put people at risk.

The manager was using data collected from quality audits to complete a monthly report. This ensured effective management oversight and leadership to drive forward improvements identified.

The manager was yet to develop an overall improvement plan. We discussed with the manager that information analysed from audit reports completed be included within continuous improvement plans. We advised the manager to include timeframes for outcomes to be met and to regularly refer to the plan, to update on progress and to add new areas to improve when identified.

The management team had invested in office-based staff training, providing clear guidance to staff that are involved in quality assurance processes. This ensured staff possessed the right skills and felt supported.

Quality of care was checked through a weekly feedback telephone call with service users and scheduled reviews of care; concerns or issues raised were logged to ensure appropriate action were identified and completed. We suggested that information analysed from service user feedback be included within continuous improvement plans.

The manager demonstrated an understanding about what was working and what improvements were still needed. There was a commitment to development and improvement, taking feedback from the inspection forward, and ensuring that people receive a good standard of care.

The provider had made sufficient progress to meet our previous requirement and improve outcomes for people. We have revised this requirement to a new area for improvement to ensure further sustained improvements. (See Area for Improvement 1).

## Areas for improvement

1. To support the provider's improvement agenda the manager should develop an on-going improvement plan.

This is consistent with the Health and Social Care Standards (HSCS) which state: "I benefit from a culture of continuous improvement, with the organisation having robust and transparent quality assurance processes"(HSCS 4.19), "I use a service and organisation that is well led and managed"(HSCS 4.23).

## How well is our care and support planned?

At the inspection in May 2023, a requirement was made in relation to care planning. Findings from this inspection are as follows:

The manager had reviewed previous documentation and implemented a new support plan protocol template following the last inspection. The management team was in the process of updating individuals' records to include care protocols.

We observed that the quality of information held within support plans about people's health and support needs was improved. We discussed with the manager further improvements to include individualised detailed information within appropriate risk assessments. 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.

The manager had commenced undertaking reviews of people's personal plans, with the review minutes capturing discussions held, and any actions agreed. These reviews were now taking place on a six-monthly basis or when a person's health needs changed. Reviews were evaluative and had a focus on outcomes derived from support.

The provider had made sufficient progress to meet our previous requirement and improve outcomes for people. We have revised this requirement to a new area for improvement to ensure further sustained improvements. (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. 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).

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

### Requirements

#### Requirement 1

By 31 July 2024, to ensure that people are confident that the care they receive is well led and managed, the provider must include, but is not limited to:

- carry out assessment of the service's performance through effective audits,
- develop action plans which include specific and measurable actions designed to lead to continuous improvements,
- detailed timescales for completion/review,
- align systems to good-practice guidance,
- include the view and opinions of key stakeholders,
- ensuring staff who undertake quality assurance roles are trained and supported,
- ensure affective management oversight and leadership to drive forward the improvements needed,
- develop a comprehensive improvement plan reflecting the outcomes of quality assurance processes.

This is in order to comply with Regulation 4(1)(a) – Welfare of users of The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/210)

This is to ensure the care and support is consistent with the Health and Social Care Standards (HSCS) which state: "I benefit from a culture of continuous improvement, with the organisation having comprehensive and transparent quality assurance processes" (HSCS 4.19) and "I use a service and organisation that are well led and managed" (HSCS 4.23).

**This requirement was made on 30 May 2024.**

#### Action taken on previous requirement

Information relating to this requirement being met can be found under key question two of this report 'How good is our leadership'.

**Met - within timescales**

#### Requirement 2

By 31 July 2024, the provider must demonstrate that personal plans record all risk, health, welfare and safety needs in a coherent manner which identifies how needs are met. In order to do this the provider must:

- Undertake a full assessment of people's needs.
- Ensure that documentation and records are accurate, sufficiently detailed and reflect the care planned or provided.
- Where there is a risk identified there is appropriate risk reduction or preventative measures recorded to provide guidance to staff.
- Ensure care plans are reviewed and updated when people's needs change.

- Ensure that there is effective case recording, with appropriate evaluation to determine if actions are required.
- Ensure staff have undertaken training with regard to care planning and care recording appropriate to their role.
- Implement an effective auditing system to review care plans and take action when concerns arise.

This is in order to comply with: Regulation 5(1) of The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/210)

This is to ensure care and support is consistent with Health and Social Care Standard (HSCS): "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)

**This requirement was made on 30 May 2024.**

### Action taken on previous requirement

Information relating to this requirement being met can be found under key question five of this report 'How well is our care and support planned'

**Met - within timescales**

## 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).

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