

Quality Care Scotland Limited Support Service

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Type of inspection:
Unannounced

Completed on:
6 August 2024

Service provided by:
Quality Care Scotland Limited

Service provider number:
SP2018013146

Service no:
CS2018367887

About the service

Quality Care Scotland is registered to provide a care at home service for adults and older people living in Argyll and Bute. The provider is Quality Care Scotland Limited. There were 35 people using the service at the time of inspection.

The service supports people in their own home with daily living needs including personal care, medication, meal preparation, and other duties that are important to them. People who use the service have varied needs such as dementia, mobility issues, physical disabilities, and mental health issues.

About the inspection

This was an unannounced, follow up inspection which took place on 06 August 2024. The inspection was carried out by an inspector from the Care Inspectorate to follow up on 1 requirement that was made earlier in the year as a result of complaint investigation findings.

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

In making our evaluations of the service we reviewed documents and spoke with the management team.

Key messages

In March 2024, an upheld complaint resulted in the service being issued with one requirement and six areas for improvement.

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

Requirements

Requirement 1

By 30 June 2024, the provider must ensure that personal plans are fully completed and identify all risk, health, welfare, and safety needs, in a coherent manner. In addition, the personal plan must document how the person's needs are met in accordance with their individual wishes and choices.

To do this, the provider must, at a minimum:

- a) undertake a full assessment of individual's needs, wishes and choices, this should include their views and that of significant others, as appropriate
- b) ensure that documentation, risk assessments and records are accurate, sufficiently detailed and reflect current care needs
- c) ensure personal plan documents are signed
- d) ensure personal plans record whether consent has been given to store information
- e) ensure that managers complete regular audits of care records.

This requirement was made on 27 March 2024.

Action taken on previous requirement

We viewed a sample of personal plans for people experiencing care. We could see action had been taken to improve the detail of information recorded in the personal plans to ensure they are reflective of current care needs. We found the personal plans included the views of the person and/or their significant other where appropriate and were more holistic in nature. This gave us confidence that people were actively involved in the planning of their care and the service valued people's views and preferences. We identified that not all risk assessments were fully up to date, however we were confident of the service's approach to improvement and their plan to continue to progress with this.

We were told the service had introduced an instant messaging function on their electronic recording system. All staff receive an alert when there has been changes to planned care and support. The management team gave us a demonstration of the function and we could see this provides them with a record of when individual staff have read the information. This means all staff now have access to the most up to date and accurate information when supporting people experiencing care.

We found the service had introduced an improved consent form, to include people's preference for viewing their personal plans and consent to store their information. The forms are signed by the person and / or their representative. At present, the form is not able to be uploaded to the electronic recording system, however the management team record these in a centralised folder. We could see there was a completed form for every person receiving care. This demonstrated that all people are now included in their personal planning and are being offered transparent access to their personal plan, if this is their preference, in a way that suits them.

We viewed records that evidenced the management team were tracking care when care reviews were due for all people who use the service. We saw reviews were being carried out six monthly in line with the organisation's procedures. In addition, we found many were carried out more frequently, when a person's needs had changed, to ensure records were kept accurate and up to date.

Overall, we saw significant improvements in how the service approached personal planning and felt confident the management team had quality assurance oversight to the process. The personal plans were accurate, contained sufficient detail and reflected current care needs, therefore this requirement has been met.

Met - within 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

To ensure people using the service have an understanding of the agreed plan of support, the manager should promote access to the care plans and provide a timely response when requests for access are made. Where there may be barriers to accessing technology alternative methods should be considered.

This area for improvement was made on 27 March 2024.

Action taken since then

This area for improvement was not assessed at this follow up inspection.

Previous area for improvement 2

To ensure people experiencing care are supported by staff who are skilled and competent with infection prevention and control measures, the management team should complete regular, documented supervisions and regular, detailed field observations. In addition, all staff should have a clear understanding of what is expected in terms of supervisions, field observation and the service's training programme.

This area for improvement was made on 27 March 2024.

Action taken since then

This area for improvement was not assessed at this follow up inspection.

Previous area for improvement 3

People experiencing care should be informed, in advance, who is providing their care and support. The management team should communicate any changes accordingly.

This area for improvement was made on 27 March 2024.

Action taken since then

This area for improvement was not assessed at this follow up inspection.

Previous area for improvement 4

The service should ensure they have an effective system in place to record information accurately about any communication with people supported and their families/legal representatives.

This area for improvement was made on 27 March 2024.

Action taken since then

This area for improvement was not assessed at this follow up inspection.

Previous area for improvement 5

To ensure people experiencing care, and the service, have clear expectations of the process of care being terminated, the manager should implement a termination of care policy. This should also be included in the service user guide that is shared with people when care commences.

This area for improvement was made on 27 March 2024.

Action taken since then

This area for improvement was not assessed at this follow up inspection.

Previous area for improvement 6

The service must improve internal communication systems to ensure personal information is shared securely and respectfully. This includes the sole use of secure, internal email addresses.

This area for improvement was made on 27 March 2024.

Action taken since then

This area for improvement was not assessed at this follow up inspection.

Complaints

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

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