

Cera Care - Dumfries and Galloway Housing Support Service

Unit 7
Holmpark Industrial Estate
Minnigaff
Newton Stewart
DG8 6AW

Telephone: 01671407209

Type of inspection:

Unannounced

Completed on:

9 August 2024

Service provided by:

CERA Care Operations (Scotland)
Limited

Service provider number:

SP2009010680

Service no:

CS2017361941

About the service

Cera Care - Dumfries and Galloway is registered to provide housing support and care at home to older adults, adults with learning/physical disabilities and adults with mental health support needs. The provider is CERA care operations (Scotland) Limited.

At the time of inspection, 60 adults were being supported by the service. Support ranged from 15 minutes to five hours per day. The service is provided to people living in Newton Stewart, Stranraer, Kirkcudbright, and Castle Douglas.

The registered manager works from the main office base in Newton Stewart and is responsible for coordinating the overall running of the service. A care coordinator and field care supervisors manage the staff teams who provide direct support to people.

About the inspection

This was an unannounced inspection which took place on 07 and 08 August 2024. 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, 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 from 19 people using the service and four relatives
- spoke with staff and members of the management team
- observed practice
- visited 10 people in their own home
- reviewed documentation

Key messages

- People were respected and treated with dignity.
- Person centred care planning had taken place to ensure that the care people received, met their needs.
- Staff were well supported which improved the care experience for people.
- People were supported by staff they knew and provided continuity of care.
- 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 staff team?	5 - Very 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 found significant strengths in aspects of the care provided and how these supported positive outcomes for people, therefore we evaluated this key question as very good.

People told us that staff interacted warmly and respectfully with them. Staff had conversations with people, were interested in their lives and people felt listened to and enjoyed the company of the care staff. This supported people to have a strong sense of their own identity and wellbeing. People did not feel rushed by staff when being supported. Care and support were carried out in a dignified way with personal preferences respected.

Feedback was positive about the quality of care and support people received. Comments included "the carers are all kind and know me very well," and "I am very lucky to have such a great care team." Relatives' comments included "carers are efficient, friendly and a good support," and "I am very happy with the quality of care provided."

To meet people's medical needs, the service had a safe, well-managed medication system. Staff had received training, and had clear guidance, to support this task safely. There was oversight of medication management which included reporting of errors and actions recorded. At the time of inspection, we discussed how to strengthen medication care plans. This included further detail about recording of 'when required' medicines.

The staff were regular and knew people well. Late or missed visits were not an issue; the office would call if care staff were running late. People got schedules ahead of their care visits so knew who would be delivering their care and at what time. People we spoke to were satisfied with the quality of the care and support received in their homes. This ensured people were informed and aware in advance of who is scheduled to support them.

People were fully involved in decisions about their care and support through regular face-to-face reviews. People benefited from clear personal plans which set out what they can expect from their service and their support. This supported people to be involved and valued. Where people's needs were changing, care staff were proactive in communicating actual or potential adverse outcomes with office staff. Any necessary action was communicated quickly to social work or relevant health professional. This meant that people felt safe and well supported.

There was a good supply of personal protective equipment (PPE) such as gloves and aprons for staff. We observed and people told us that staff used PPE appropriately. Staff cleaned and tidied up after themselves. These measures aided the continued protection of people and staff from harm.

How good is our staff team?

5 - Very Good

We found significant strengths in aspects of the care provided and how these supported positive outcomes for people, therefore we evaluated this key question as very good.

The staff team were valued by people experiencing care, this was representative of feedback from people receiving care, relatives, and stakeholders. We observed kind and caring interactions between staff and

people, and saw laughter, encouragement and inclusion being supported. Some comments we received included: "The staff are always friendly and do their best to help me live well," and "the staff like to have a laugh with me, and I look forward to them visiting." This assured us that the staff team were caring and considerate in their practice.

The management team monitored the staffing arrangements required to safely meet peoples' needs. A review of rotas evidenced that there was consistency in staffing, and people were supported by staff who were familiar to them. People were cared for by the right number of people at the right time, promoting effective care and meaningful relationships. Rotas were planned in advance taking into consideration staff and people using the service.

Staff were encouraged and motivated in their roles. There was evidence of effective communication for staff including team meetings, supervisions, and annual appraisals. This ensured the staffing arrangements were right, and staff worked well together.

The staff we spoke with were confident in discussing how they supported people in an outcome focused way and how this helped make a difference to their lives. This included increasing confidence and independence, maintaining relationships, and dealing with stressful situations in more positive ways.

Staff were kept advised of organisational and social care updates through an electronic newsletter. This had helped support staff in their role as well as keeping them informed about local news and surveys.

Cera Care shared staff success and compliments received from people using the service and their families. By promoting a positive working environment where staff feel supported, and their achievements were recognised, there were high levels of morale and performance. This ensured that people were supported by a motivated and dynamic staff team to meet their needs, wishes, and outcomes.

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 provider must ensure staff who require to be registered with SSSC do this within timescales set and monitor this effectively to ensure any failure to comply with registration requirements are addressed.

This is to ensure care and support is consistent with the Health and Social Care Standards which states: "I have confidence in people because they are trained, competent and skilled, are able to reflect on their practice and follow their professional and organisational codes" (HSCS 3.14).

This area for improvement was made on 6 March 2020.

Action taken since then

The service had oversight of all staff SSSC registrations and monitored this to ensure staff were registered and registrations were kept current up to date. The tracking system allowed the manager to highlight any concerns and discussed this with staff when necessary. The manager was clear on actions to take if staff had not registered.

This area for improvement had been met.

Previous area for improvement 2

Staff members must ensure they are registered with the SSSC within timescales set and comply with conditions of registration.

This is to ensure care and support is consistent with the Health and Social Care Standards which states: "I have confidence in people because they are trained, competent and skilled, are able to reflect on their practice and follow their professional and organisational codes" (HSCS 3.14).

This area for improvement was made on 6 March 2020.

Action taken since then

Staff SSSC checks were carried out during the inspection, all staff were found to be registered appropriately which aligned with the managers information recorded on the service tracker. Staff were reminded of their duty to keep registered through newsletters, supervisions, and team meetings.

This area for improvement had been met.

Previous area for improvement 3

To ensure individuals experience support in accordance with their assessed needs and care plan, the care provider should ensure care staff effectively monitor and accurately record the support provided.

This is to ensure care and support is consistent with Health and Social Care Standard 1.19: My care and support meets my needs and is right for me.

This area for improvement was made on 13 December 2023.

Action taken since then

Daily records of support provided were seen during inspection. Staff recorded care carried out and observations during their visits. Managers had access to this throughout the day and audited records to monitor care and support. The system used had been reviewed and updated to ensure people's needs were highlighted as part of the recording system. This ensured specific care tasks were not missed.

This area for improvement had been met.

Previous area for improvement 4

To ensure the health, safety and wellbeing of individuals the care provider should ensure any concerns raised regarding individual's care and support needs relating to their personal care and infection prevention control practices are fully investigated and acted upon by service management.

This is to ensure care and support is consistent with Health and Social Care Standard 4.21: If I have a concern or complaint, this will be discussed with me and acted on without negative consequences for me.

This area for improvement was made on 13 December 2023.

Action taken since then

The service complaints log was available and documented any concerns raised with the service. Records showed to follow the complaints policy and procedure in place which included investigation details, communication and actions taken as a result.

This area for improvement had been met.

Previous area for improvement 5

To ensure individuals and their families have confidence in the service provided the care provider should ensure they follow a process when ending a care package that is inclusive, respectful and responsive to the needs of individuals in receipt of the service.

This is to ensure care and support is consistent with Health and Social Care Standard 4.22: If the care and support that I need is not available or delayed, people explain the reasons for this and help me to find a suitable alternative.

This area for improvement was made on 13 December 2023.

Action taken since then

The service provided a copy of the letter which is now in place as part of a new process to communicate ending a care package. The manager also confirmed this is also discussed with the person where possible.

This area for improvement had 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?	5 - Very Good
1.3 People's health and wellbeing benefits from their care and support	5 - Very Good
How good is our staff team?	5 - Very Good
3.3 Staffing arrangements are right and staff work well together	5 - Very Good

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