

Newlands Care Angus Support Service

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Type of inspection:

Unannounced

Completed on:

20 September 2024

Service provided by:

Newlands Care Angus Limited

Service provider number:

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Service no: CS2017359103



Inspection report

About the service

Newlands Care Angus is registered as a care at home support service to provide a service to adults living in their own home, covering south-east Angus and the Glens.

Newlands Care Angus aim is to strive to provide the highest quality of care to people using their service whilst respecting their right to independence, choice, privacy and dignity.

About the inspection

This was an unannounced follow up inspection which took place on 19 September and 20 September 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:

- * spoke with seven people using the service
- * spoke with two of their family members
- * reviewed documents
- * spoke with two visiting professionals.

Key messages

- * There was an improvement with the way staff were recruited.
- * The provider had reviewed and updated their recruitment policy and procedures.
- * The leadership team have implemented a system to quality assure recruitment procedures.
- * Some leaders demonstrated an improved knowledge and understanding of recruitment procedures.
- * All staff had received safeguarding training at a level that suited their role, and this was an improvement.
- * Although there was some improvement, there remains a gap in knowledge and understanding of safeguarding among some leaders of the service, and this must improve.
- * Leaders failed to demonstrate they have a robust knowledge of the processes and thresholds to ensure all referrals to any regulatory bodies are made timeously.
- * People experiencing care we spoke to told us they have confidence the provider would act timeously.

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

Requirements

Requirement 1

By 26 August 2024, the provider must ensure that people's health, safety and wellbeing needs are being accurately assessed and met, to protect them from harm.

In order to achieve this the provider must:

- a) ensure any Adult Support and Protection incidents are appropriately investigated and reported timeously to the Care Inspectorate and the Health and Social Care Partnership.
- b) ensure that all staff are trained in Adult Support and Protection at a level that suits their role.
- c) ensure that all referrals to any regulatory bodies are made timeously. Leaders should be able to demonstrate they have a robust knowledge of the processes and thresholds.

This is to comply with Regulation 4(1)(a) of the Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/210).

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This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that: 'I am confident that people respond promptly, including when I ask for help' (HSCS 3.17).

This requirement was made on 19 July 2024.

Action taken on previous requirement

All staff had received safeguarding training at a level that suited their role, and this was an improvement. It was encouraging to hear some staff's learning had improved their knowledge and confidence. This helped to shape improvement for people experiencing care. For example, one leader told us the safeguarding training had developed their understanding of how to better protect people and, as a result, improved their assessment of risk.

Although some improvement noted, there remains a gap in knowledge and understanding of safeguarding with some leaders of the service. The service needs to improve how it recognises and reports any incidents of potential harm to people. Leaders in the service failed to identify and report two Adult Support and Protection concerns to the lead agency responsible for the protection of people. Although the leaders did take other actions to protect people, it was concerning there was a clear gap in the leaders' knowledge and understanding of safeguarding processes. We have discussed the expectations with the provider and it is positive the Health and Social Care Partnership (HSCP) will be delivering some specific training to support this learning need.

Leaders failed to demonstrate they have a robust knowledge of the processes and thresholds to ensure all referrals to any regulatory bodies are made timeously. From records reviewed, we saw that where things had gone wrong, leaders investigated and documented incidents. However, the correct actions and referrals weren't always made. For example, during a formal investigation, a referral to the relevant regulatory body was not made, as required. The correct actions were not taken to protect people, and this placed people at significant risk of harm. This was echoed by a professional we spoke to who shared "the leaders are responsive and good at keeping me in the loop, however, they can lack confidence about the correct actions to take at times and this can sometimes cause a delay for people."

It was positive people experiencing care told us that they felt well supported and at ease with the staff at Newlands Care Angus. One person shared "the office staff acted very quickly to my query, and put my mind at rest."

People told us they felt comfortable and safe with the staff: "The staff are wonderful, I have no complaints." One person shared "New staff always get supported on a shadow shift, so I get introduced to them."

People experiencing care and their families knew who to contact in the event they felt unsafe or worried about any aspect of their care: "I can contact the office at any time." People we spoke to had confidence the provider would act timeously.

This requirement has not been met and we have agreed an extension until 1 November 2024.

Not met

Requirement 2

By 26 August 2024, the provider must ensure that people are kept safe by ensuring people are supported by staff who have been recruited in line with 'Safer Recruitment Through Better Recruitment' 2017 guidance.

In order to achieve this, the provider must at a minimum:

- a) demonstrate that all staff are being recruited in line with best practice guidance in order to meet legal and regulatory requirements
- b) review recruitment procedures, ensuring it complies with 'Safer Recruitment through Better Recruitment' (2017)
- c) implement a system to quality assure recruitment, to ensure managers have a robust overview.

This is in order to comply with The Social Care and Social Work Improvement Scotland (Requirements for Care Services Regulations 2011, (SSI/2011/210) Regulation 9.

This is to ensure care and support is consistent with the Health and Social Care Standards (HSCS) which state: '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 requirement was made on 19 July 2024.

Action taken on previous requirement

The provider had reviewed and updated their recruitment policy and procedures. We were satisfied they complied with 'Safer Recruitment through Better Recruitment' (2017) and there was evidence this was being followed in the recruitment process for the two most recent staff members.

There was an improvement in the way staff were recruited. We observed relevant checks and documentation were in place. This promoted people's wellbeing and safety.

Some leaders demonstrated an improved understanding of the importance of adhering to their recruitment policy. One leader shared "we have a much better overview, and this helps us get it right." This developed understanding helps reduce the risk of harm to people.

The leadership team had implemented a system to quality assure recruitment procedures. This ensured all relevant background checks were completed timeously and reduces the risk of anything being missed. This reassured us that the leadership team had an overview of recruitment, and any gaps in the process identified timeously.

This requirement has been met within timescales.

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 promote people's safety and wellbeing the provider should ensure all equipment is cleaned after each use. This should include but is not limited to, moving and handling equipment.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which states that: 'My environment is safe and secure' (HSCS 5.17).

This area for improvement was made on 19 July 2024.

Action taken since then

The provider has increased 'spot checks' of staff practice. This includes checking equipment used by people experiencing care was clean and well maintained. This was an improvement.

People experiencing care and an external professional were satisfied with the maintenance of moving and handling equipment. They told us they had no concerns about equipment being dirty.

This Area for Improvement has been met.

Previous area for improvement 2

To support people's wellbeing and safety, the provider should ensure people's care plans are reflective of the care and support they require to meet their needs.

This should include but is not limited to:

- a) implement a quality assurance system, to ensure care plans are regularly audited and information is complete and up to date
- b) ensure risk assessments are personalised to reflect each person's needs.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that: 'I experience a service that is right for me' (HSCS 5.5).

This area for improvement was made on 19 July 2024.

Action taken since then

We observed the provider has started to implement a new care plan system. This includes a quality assurance system and updating risk assessments. This has been completed for one person experiencing care and the process is in its infancy. We will follow this up at out next inspection.

This Area for Improvement has not been met and remains in place.

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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