

Care1 Professional Services Ltd Support Service

Pavilion 3, Candymill Lane Bothwell Bridge Business Park Hamilton Glasgow ML3 OFD

Telephone: 01698 515000

Type of inspection:

Unannounced

Completed on:

29 October 2024

Service provided by:

Care1 Professional Services Ltd

Service provider number:

SP2016012749

Service no:

CS2018370582



Inspection report

About the service

Care1 Professional Services Ltd is registered with the Care Inspectorate to provide a care at home service to children and adults living in their own homes. The service has office bases in Hamilton and Livingston and provides care and support to people living in North and South Lanarkshire, West Lothian, Fife and Inverclyde.

At the time of the inspection, the service was providing care and support to approximately 212 people. The service had not been providing care to children.

The majority of people receiving a service were living in Lanarkshire and West Lothian.

About the inspection

This was an unannounced inspection which took place on 29 October 2024 between 09:30 and 17:00. The inspection was carried out by two inspectors from the Care Inspectorate. To prepare for the inspection we reviewed information about this service.

In making our evaluations of the service we:

- · spoke with management
- · reviewed documents.

Key messages

Improvement was evident within care plans and medication profiles. As a result, the service now had enough evidence to meet the requirement and one out of two areas for improvement made from last inspection.

To ensure information about people was accurate, more attention to detail was needed to ensure that updates to people's care and support was reflected throughout care plan documentation.

The service now had a SMART (specific, measurable, achievable, relevant and time-bound) focussed service improvement plan in place. They needed time to fully complete identified actions which would enhance the care and support they provided to people.

The service needed time to sustain the improvements they had made and evidence that their service improvement plan and associated action plans had made the desired effects.

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

Requirements

Requirement 1

By 23 September 2024, the provider must ensure that each person's care plan contains details about how their health, welfare and safety needs will be met in line with their needs. To do this the provider must at a minimum, ensure:

- 1. they accurately reflect the assessed current health and wellbeing needs of the person in care plans, which includes people's preferences and wishes about how their care should be supported.
- 2. where there has been any significant changes in the person's health, this has been documented with updated support guidance. This includes but is not limited to continence care and skin integrity.

This is to comply with Regulation 5(1) and (2) (a) and (b) (Personal Plans) of the Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/210).

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that:

'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 3 June 2024.

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Action taken on previous requirement

People now benefitted from care plans that were regularly reviewed and included their individual preferences and wishes. Updates to people's changing needs with guidance had been written within visit schedules and daily notes evidenced this. However, some care plans did not include updates to care and support which meant there was a potential risk that people may not receive the support and care intended. This was discussed with the management team who were in the process of implementing systems to further enhance their quality assurance of care plans.

We felt assured that the service would action the areas we identified.

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

The provider should ensure that they keep people safe and healthy by ensuring that medication is administered in line with best practice guidelines. To do this, the provider should:

- a) ensure that people's medication needs and the reason why this is important, is documented within care plans
- b) Include 'as required' guidance for people who can make decisions and 'as required' protocols for people who lack capacity (these protocols should be agreed by health prescriber)
- c) detail support strategies within care plans to ensure that people receive the right medication at the right time.

This is to ensure care and support is consistent with the Health and Social Care Standards (HSCS) which state that:

'I experience high quality care and support based on relevant evidence, guidance and best practice'. (HSCS 4.11).

This area for improvement was made on 3 June 2024.

Action taken since then

People were receiving the right medication or treatment at the right time. The service had worked hard to ensure that people who required full assistance had medication profiles in place which outlined their medication needs with support guidance. The service used EMARs (electronic medication administration records) which mirrored people's medication needs. People's wishes had also been recorded as to how they wanted to be supported with medication needs. All changes to medication had been updated within visit schedules and EMARs. Not all changes had been updated within the care plan.

This was discussed with the management team and we were encouraged that the implementation of new quality assurance systems would ensure that updates required to people's information would be translated across all records that connect to medication records such as risk assessments and care plans.

This area for improvement has been met.

Previous area for improvement 2

To ensure that continual improvement is sustained, the provider should ensure all audits have associated action plans which are SMART (specific, measurable, achievable, relevant and time-bound) focussed. They should also ensure that action plans are reviewed including an evaluation of progress made and updated until completion with clear links to the service improvement plan.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that:

'I benefit from a culture of continuous improvement, with the organisation having robust and transparent quality assurance systems' (HSCS 4.19).

This area for improvement was made on 3 June 2024.

Action taken since then

The service now had a SMART (specific, measurable, achievable, relevant and time-bound) focussed service improvement plan in place. They were working towards achieving identified actions generated from their audit sources which were identified on the plan. We did not assess this area for improvement as the service needed time to fully complete identified actions.

This area for improvement has not been assessed 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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