

Peaky Minders Ltd Support Service

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Type of inspection:

Unannounced

Completed on:

4 October 2024

Service provided by:

Peaky Minders Ltd

Service no:

CS2022000163

Service provider number:

SP2022000118



Inspection report

About the service

Peaky Minders Ltd is a care at home service which provides support to adults, including older people in their own homes across Aberdeen City. At the time of inspection the service was supporting 27 people.

The service provides flexible packages of care and support to meet people's needs. The range of services includes: personal care and support, support with domestic tasks and shopping.

About the inspection

This was a short notice inspection which took place between 1 and 4 October 2024. One inspector carried out the inspection.

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 throughout the inspection year.

To inform our evaluation we:

- spoke with or received feedback from 12 people and their families using the service
- spoke with staff and management
- · observed practice and daily life
- reviewed documents.

Key messages

- People were very happy with the quality of the care and support service they received.
- People said that they knew the staff who supported them and they were confident that they knew what they were doing.
- Staff were respectful of being in people's homes.
- The quality assurance systems and processes should be further developed to provide better compliance and oversight.
- Care notes and risk assessments should be updated more frequently to reflect the changes in people's support needs.
- People and families should be involved in formal care reviews.

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?	4 - Good
How good is our leadership?	3 - Adequate
How good is our staff team?	4 - Good
How well is our care and support planned?	3 - Adequate

Further details on the particular areas inspected are provided at the end of this report.

How well do we support people's wellbeing?

4 - Good

We evaluated this key question as good, where several strengths impacted positively on outcomes for people and clearly outweighed areas for improvement.

We received very positive feedback from people and their families about the service and staff. The service had been successful in assisting and supporting people to live safely in their own homes. People said, "we cannot praise the Manager and team at Peaky Minders highly enough" and "the team are respectful, polite and caring".

A major strength of the service was the flexibility and dedication from the staff team which meant that people received the care and support they needed. There was a stable core team of staff in each of the areas. This contributed to people knowing the staff team and forming positive, trusting relationships. A person said, "mum is seen as a person and not just as a house to visit, before their next scheduled stop". People were confident that staff knew how best to provide the care and support that was right for them.

Staff had access to people's care plans and risk assessments prior to supporting them. Although in practice, information or any changes in care were shared verbally or through the organisation's electronic instant messaging service. As a result, staff knew people's care and support needs, wishes and preferences. The staff and management team need to ensure that the care plans contained the most up to date information or reflected any change in people's support. This would assist in reducing any risk of inconsistent care, if people were supported by staff who are not part of their core staff team and may be unfamiliar with these changes. (See 'How good is our leadership?' and 'How well is our care and support planned?')

The length and time of visits were agreed with the person, the service and care management. People told us that the visits by staff were never rushed and staff said that they always had enough time to deliver the care and support that people needed. People said it was lovely when the staff had time for a, "cuppa and a chat". This enriched the lives of people experiencing care. Staff were friendly, professional and courteous. The staffs' awareness of their role and their responsiveness meant that people's care and support adapted to their changing needs.

Staff were competent and confident in supporting people with their medication. There was good communication between families, local pharmacies and GP practices. This ensured people received their medication as prescribed while still retaining as much control as possible and practical.

Although staff were working with the best intentions, to prevent the spread of infections. Staff and the management team were not using the most up to date best practice guidance regarding the safe use of Personal Protective Equipment (PPE). This meant that masks, gloves and aprons were not being used appropriately. (See 'How good is our leadership?')

How good is our leadership?

3 - Adequate

We evaluated this key question as adequate, where strengths only just outweighed weaknesses.

There was a stable management team who were very visible and very approachable to all. People and relatives spoke very highly of the management team. People said, "concerns, when they arise are few and I bring these up with Peaky Minders immediately and anything has always resolved satisfactorily and promptly" and "[The manager] has always been very friendly, supportive and flexible". The management team were responsive and have worked hard to make improvements.

The service had made further improvements to their quality assurance system. Where auditing processes were in place these were well maintained. Appropriate action and learning had been implemented when concerns were identified. There remained a lack of oversight or formal monitoring of some processes which would assist in safeguarding both people who use the service and staff. For example, staff's registration with the SSSC (Scottish Social Services Council), the right to work documentation and recording and formally responding to complaints or concerns. Not all of the service's policies and procedures were reflective of best practice, specifically in relation to infection prevention and control and supporting people with their finances. This meant that staff practice was not up to date. The management team were responsive to our concerns and appropriate actions were taken promptly. We shared best practice information and guidance with the management team.

A formal improvement plan was in place. This should be further developed using self-evaluation, feedback from people and staff as well as the findings from the quality assurance processes. We discussed the benefits of this being used as a working document to support the service and staff with improvements and future developments. Having a working improvement or development plan will support a culture of continuous improvement within the service.

Overall the quality assurance systems and processes should be further developed to provide better compliance and oversight. This would ensure people and staff are safeguarded and that a culture of continuous improvement is embedded into practice. (See Area for improvement 1)

Areas for improvement

1. To ensure people benefit from a culture of continuous improvement, the provider should develop an effective quality assurance process that provides better compliance and oversight and improves the outcomes and experiences for people.

To do this the provider should, at a minimum:

- a) develop a service improvement plan based on self-evaluation
- b) maintain appropriate records and documentation to safeguard and support best practice.

This is to ensure 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 processes' (HSCS 4.19).

How good is our staff team?

4 - Good

We evaluated this key question as good, where several strengths impacted positively on outcomes for people and clearly outweighed areas for improvement.

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We received very positive feedback about the staff. People named specific staff as having, "exceptional standards and often go beyond expectations". A relative said they were impressed with the staff's knowledge and skills. This meant that people's experience of care was positive.

The training and induction program consisted of a mix of eLearning and practical training. Staff said that they enjoyed working for the company, the training was appropriate and that they felt well supported. The training records, induction program and one to one supervision, should be further developed to formally reflect the developmental training and support provided to staff. Documentation should be maintained to support staff competencies, specifically in relation to induction and any additional roles that the staff may have to undertake. For example, the use of insulin pens. This was discussed in detail with the manager. The manager needs to ensure that staff continue to be formally monitored to confirm that all staff maintain their skills, knowledge and understanding. (See 'How good is our Leadership?')

Many of the staffing decisions were made using professional discretion and Judgement. Staff were matched with people based on the staff member's skills, knowledge and experience. This assisted in ensuring people had the best chance of experiencing good care and support. The management team should consider how they will formally evidence the decisions on staffing and how the service is staffed, to ensure they remain open and transparent to all. This should take into account the views of staff and people who use the service and The Health and Care (Staffing) (Scotland) Act 2019 - 'Having the right people, in the right place, with the right skills, at the right time'.

How well is our care and support planned?

3 - Adequate

We evaluated this key question as adequate, where strengths only just outweighed weaknesses.

The service were due to implement a new digital care planning system. We acknowledge the work and the challenges the management team and staff have working with multiple systems. However, the standard and quality of documentation within people's personal plans was very inconsistent. People's plans did not contain all the relevant information and guidance. This meant there was an increased risk of the care and support being inconsistent and people not receiving the care that was right for them.

People told us that they were involved in their care and support. However, this was not reflected within people's personal plans. Formal care reviews were not taking place or being recorded. This meant that people may not experience care and support consistent with their current needs and wishes. (See Area for improvement 1 and 'How good is our leadership?')

Areas for improvement

1. The provider should ensure people receive support in line with their agreed needs, wishes and preferences. This should include but is not limited to, ensuring people and those important to them are fully involved in planning and reviewing their support plans on a formal basis.

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); and

'I am fully involved in developing and reviewing my personal plan, which is always available to me' (HSCS 2.17).

Complaints

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

Detailed evaluations

How well do we support people's wellbeing?	4 - Good
1.3 People's health and wellbeing benefits from their care and support	4 - Good
How good is our leadership?	3 - Adequate
2.2 Quality assurance and improvement is led well	3 - Adequate
How good is our staff team?	4 - Good
3.3 Staffing arrangements are right and staff work well together	4 - Good
How well is our care and support planned?	3 - Adequate
5.1 Assessment and personal planning reflects people's outcomes and wishes	3 - Adequate

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