

Assisted Services Fife Ltd Support Service

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Type of inspection:
Announced (short notice)

Completed on:
6 November 2024

Service provided by:
Williamina Burnett trading as Assisted
Services

Service provider number:
SP2016987961

Service no:
CS2016346581

About the service

Assisted Services is a privately owned care at home provider working in central Fife. They provide care and support to people with a range of needs in their own homes.

About the inspection

This was a short notice announced follow up inspection which took place on 5 November. 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.

Key messages

The service was not compliant with its legal responsibilities and was advised to take urgent action

Some progress had been made towards training staff

Improved oversight of quality assurance processes is necessary to support improvement

Managers need more time to make the necessary improvements

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

Requirements

Requirement 1

By 1 November 2024, the provider must ensure they understand their roles and responsibilities in making required notifications to relevant bodies. This must include but is not limited to:

- a) ensuring appropriate and timely referrals and notifications are made to relevant agencies and individuals. This must include, but not be limited to, adult protection referrals, health and social care partnership, police, and Care Inspectorate.
- b) a clear system to ensure notifications are submitted within timescales, when the registered manager is not present and or during out of hours.

This is in order to comply with regulations 4(1)(a)(Welfare of Service Users) and 15(b)(i)(Staffing) of The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/210).

This is in order to ensure that care and support is consistent with Health and Social Care Standards (HSCS) which state that: 'I am protected from harm, neglect, abuse, bullying and exploitation by people who have a clear understanding of their responsibilities' (HSCS 3.20) and 'I benefit from a culture of continuous improvement, with the organisation having robust and transparent quality assurance processes' (HSCS 4.19)

This requirement was made on 30 August 2024.

Action taken on previous requirement

Since the last inspection the service reported making one notification to the local authority. This notification included appropriate information and was completed using the appropriate format.

The service had however not yet made appropriate notifications to the Care Inspectorate. We discussed this with the service. Managers assured us notifications would be made in a timely manner following this inspection.

As a result this requirement was not met. We have extended the timescale until 31st January 2025.

Not met

Requirement 2

By 1 November 2024 the provider must ensure that they have clear, legible policies and procedures in place which are informed by best practice guidance and relevant legislation. The provider must familiarise themselves with these policies and ensure they are consistently implemented in practice. The provider should pay particular attention to their recruitment policy and practices.

This is in order to comply with regulations 4(1)(a)(Welfare of Service Users) and 9(1)(Fitness of employees) of The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations (SSI 2011/210).

This is in order to ensure that 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) and 'I am protected from harm, neglect, abuse, bullying and exploitation by people who have a clear understanding of their responsibilities (HSCS 3.20).

This requirement was made on 30 August 2024.

Action taken on previous requirement

We sampled service policies. These had not been updated since the last inspection. We discussed policy and practice with the manager, who was unable to demonstrate oversight of the policies in place or how these related to current practice.

We asked the service to review its policies to ensure they reflect current good practice guidance.

As a result this requirement was not met. We have extended the timescale until 31st January 2025.

Not met

Requirement 3

By 1 November 2024 the provider must ensure that people receiving care experience a service with well trained staff. In particular, you must ensure that all relevant staff receive and record completion of training in relation to: moving and handling and other relevant training, including refreshers where it is appropriate to the role performed by the staff member to meet the assessed care and support needs of people receiving care.

This is in order to comply with regulations 4(1)(a)(Welfare of Service Users) and 15(b)(i)(Staffing) of The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/210).

This is in order to ensure that care and support is consistent with Health and Social Care Standards

(HSCS) which state that: '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 30 August 2024.

Action taken on previous requirement

We sampled staff training records and found significant gaps in training. Records showed staff had not received any training for over a year. We discussed oversight of staff training with the manager and reviewed documents used to support this. We found a significant number of staff did not have up to date moving and handling training.

The service had taken steps to book training for staff, however this had not yet taken place. At the time of inspection the service did not clearly demonstrate which staff would be attending booked training sessions and whether this would significantly reduce the number of staff with out of date training.

As a result this requirement was not met. We have extended the timescale until 31st January 2025.

Not met

Requirement 4

By 1 November 2024 the provider must ensure staff are being recruited safely. The provider should ensure they have followed good practice guidance for safe recruitment at all times.

This is in order to comply with regulations 9(1)(Fitness of employees) of The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/210).

This is in order to ensure that care and support is consistent with Health and Social Care Standards (HSCS) which state that: 'I am confident that people who support and care for me have been appropriately and safely recruited' (HSCS 4.24)

This requirement was made on 30 August 2024.

Action taken on previous requirement

The service had not recruited any new staff since the last inspection, therefore we were unable to review a recent example of recruitment.

We sampled the service recruitment policy which had not been updated since the last inspection. Managers were unable to demonstrate a clear oversight of safe recruitment in line with 'safer recruitment' guidance. We asked managers to discuss how they would mitigate risks in exceptional circumstances where two references could not be sought. However managers were unable to demonstrate the steps they would take to assess risk and promote safety of people using the service.

As a result this requirement was not met. We have extended the timescale until 31st January 2025.

Not met

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

Staff should receive regular supervision and appraisals to ensure their learning and development needs are assessed, reviewed, and addressed. Alongside this, the service should develop systems to support oversight of when supervision and appraisals have taken place and when they should be undertaken again.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which states that: '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 30 August 2024.

Action taken since then

We sampled staff files and found a significant number of staff who had not received formal supervision for over a year. The service had documentation in place to support oversight of staff supervision and appraisals however this was not always completed.

As a result this area for improvement was not met.

Previous area for improvement 2

The provider should ensure that audit processes are effective and fully utilised to support the identification of areas for improvement. The provider should then take action to ensure improvements are made within a timely manner, to support positive outcomes for people.

This is to ensure that care and support is consistent with 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)

This area for improvement was made on 30 August 2024.

Action taken since then

We did not assess the area for improvement at this inspection. This area for improvement remains.

Previous area for improvement 3

In order to reduce the risk of harm to people and staff the service should ensure identified risks are consistently documented, assessed and plans put in place to minimise the risk of future harm.

This is in order to ensure that care and support is consistent with Health and Social Care Standards (HSCS) which state that: 'My care and support meets my needs and is right for me' (1.19)

This area for improvement was made on 30 August 2024.

Action taken since then

We did not assess the area for improvement at this inspection. This area for improvement remains.

Previous area for improvement 4

The service provider should ensure that they develop an improvement plan which is informed by the views of people consulted. Identified improvements should follow SMART (specific, measurable, achievable, realistic, time-bound) principles by detailing which individuals have been tasked to take forward, reflect clear timescales for achievement and have a process of regular review and evaluation.

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)

This area for improvement was made on 16 May 2023.

This area for improvement was made on 16 May 2023.

Action taken since then

We did not assess this area for improvement at this inspection. This area for improvement remains.

Previous area for improvement 5

As an area for improvement the service could further develop the contingency plan. To maintain a record to ensure that people who use the service and or their relative/representative are being notified in advance of any changes to their care schedule. To maintain a record to ensure that up-to-date essential information is being shared with the provider who will be visiting.

This is in order to comply with: Health and Social Care Standard 2.11: My views will always be sought and my choices respected, including when I have reduced capacity to fully make my own decisions.

This area for improvement was made on 6 November 2023.

This area for improvement was made on 6 November 2023.

Action taken since then

We did not assess this area for improvement at this inspection. This area for improvement remains.

Previous area for improvement 6

To help keep people safe the provider should ensure that last employer references are received. If this is not possible the reason for this should be recorded on file and alternative references sought.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) that states: 'I am confident that people who support and care for me have been appropriately and safely recruited'. (HSCS 4.24)

This area for improvement was made on 16 May 2023

This area for improvement was made on 16 May 2023.

Action taken since then

We discussed recruitment practices with the manager at this inspection. The service had not employed any new staff since the last inspection. However the service was unable to demonstrate steps they would take where last employer references were not sought. We asked the service to review its recruitment policy and practices.

As a result this area for improvement was not met.

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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