

# North East Community Care Ltd

## Housing Support Service

Units 4 & 5  
Turriff Business Centre  
Markethill Road  
Turriff  
AB53 4AG

Telephone: 01888 567646

**Type of inspection:**  
Unannounced

**Completed on:**  
19 December 2024

**Service provided by:**  
North East Community Care Ltd

**Service provider number:**  
SP2006008067

**Service no:**  
CS2005113415

## About the service

North East Community Care Ltd (NECC) is a combined housing support and care at home service and is registered to provide support to adults. The provider is City and County Healthcare Group.

Support is provided to people living in their own homes or with family members within their own communities. The service is provided in Turriff, Cuminestown, rural communities, Huntly, Cullen and Aberdeen city.

Care packages range from one hour per day, to 24-hour packages.

## About the inspection

This was an unannounced inspection which took place on 9, 10, 11, 12, 13 and 17 December 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 eight people using the service
- spoke with six staff and two managers
- reviewed documents
- spoke with one visiting professional.

Prior to the inspection we asked the service to send surveys to people and to staff. We received 27 completed surveys from people who use the service and from 13 staff.

## Key messages

- People were very happy with the standards of care and support they received.
- People were involved in deciding who supported them.
- Positive and trusting relationships had formed with staff because there was consistency in the staff supporting people.
- Care plans were very detailed and focused on what mattered to people.
- Staff had an enablement approach to supporting people which meant that people were supported to be as independent as possible.
- Medication management was safe.
- Staff recruitment followed safe recruitment guidance.
- Staff were very happy to work in the company and said they felt valued.
- The training and development of staff was reflective of what was needed to help inform their job.
- The staff induction programme was robust and ensured that staff were confident, skilled and knowledgeable before they worked on their own.

## 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 were very positive about the quality of the service they received. They said that staff were respectful and compassionate. Many people referred to the staff as professionals but also as friends or like members of the family. This had contributed to positive, trusting relationships forming.

People had a say in which staff supported them, and these staff remained consistent. This ensured that staff got to know how best to care and support people. This contributed to the high satisfaction people had in the quality of their care and support.

One person expressed that they no longer felt defined by their disabilities. The care and support they received had helped them live well with their disabilities. They now felt empowered to be included and felt valued. This very good outcome had greatly improved the physical, emotional and social life of this person.

Care planning was recorded electronically. Staff had access to these on handheld devices and were easy to access and to find the information that was needed to inform the staff of the needs of people. People had paper copies of their care plan that they could access. People said that their care plans were informed by what they had to say and would be used to inform their care reviews. Involving people in their planned care and support ensures that people get the care and support that they need.

People who had 24 hour care packages were very detailed and person-centred. Each person was seen as an individual and their care plans were reflective of the importance of social and community engagement, as well as their physical care needs. We felt there was a very good holistic approach to the care and support of these people.

There was an enablement approach to the care and support documented and delivered. This meant that people were supported to do as much for themselves as they could, and staff could support them to gain new skills. This demonstrated that staff recognised the potential of people.

The risk assessment process was comprehensive. Assessment of environmental factors were assessed, for example, lighting, fire precautions, pets. This meant that the risks to the staff providing the service were being considered.

Where someone was prescribed an altered textured diet, a robust choking risk assessment was completed. This was informed by the recommendations by the health professional prescribing the diet. This meant that it was clear why changes were necessary in order to reduce the risk of choking.

People spoke very positively about the review process. Their input and contribution were valued and acted upon. They felt the reviews were an opportunity for them to have their say on what mattered to them.

People's medications were managed safely. There was clear records of the level of support that each person needed with their medications. Important information in relation to their medication was easy to access, for example, allergies, where medications were stored in the home. This helped staff to manage medications

safely. Managers should review the practice of having a paper copy of the medication administration records and an electronic system. This duplication could result in increased risks of missing signatures.

We felt that people who are supported with their care and support receive a service that is person-centred, compassionate and friendly. This has contributed to the very high levels of satisfaction and the very positive outcomes that people experience.

## 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 children/people, therefore we evaluated this key question as very good.

Staff were very positive about their role. They said that communication had improved and they felt included and involved in decision making. Staff said that any changes to the service were fully explained and discussed with them. This helped them accept the changes when they happened.

Staff said that managers were accessible and available at any time. They felt confident that any question or concern they had would be listened to and acted upon. This helped create an open and inclusive culture in the service.

Some managers had previously worked as support workers and staff said this meant that they understood the role and could identify with the problems that could occur. This insight was invaluable and resulted in informed decision making and solutions to resolve issues.

Managers had recently changed the rotas. This change had the potential to cause upset and anxiety. However, because staff were kept fully informed about the changes and why they were necessary, staff readily accepted these changes. They recognised the need and the benefits to their working lives.

Staff said they felt part of a team. Although much of their work was done on their own, they always felt that colleagues were accessible to them. This reduced anxiety and feelings of isolation.

The staff training was comprehensive and reflective of what people needed to know to help inform their role. Each training module was specific to the care and support needs of the people they supported. This helped ensure that staff had the necessary skills and knowledge to ensure they did their job well. Staff had the opportunity to complete face to face training in the training facility that had been created in the office. This enabled staff to use real experiences to contribute to this training.

Staff recruitment was robust and in line with safer staffing legislation. Interviews were conducted by managers and this ensured that an assessment of the appropriateness of the candidate could be completed. Recent recruits said that the induction process was very good. They were supported and were trained to ensure that they felt confident and capable before they worked on their own. People could be confident that the staff who were supporting them, regardless of experience, had the right knowledge and skills to do their role safely and well.

The supervision process was seen as a positive event by staff. They felt that the process was an opportunity to discuss any concerns they had, have feedback on their progress and to discuss their development. When an unexplained event or incident occurred, managers completed reactive supervisions. This helped develop a learning culture that supporting staff to learn from these events to prevent reoccurrence.

The provider had a very good welfare support system in place for staff. This service was free and available to all staff to access to get independent advice on concerns in and out of work. The provider had recognised their role in supporting staff wellbeing.

The provider and managers in valuing and supporting the staff group had contributed to the high levels of staff satisfaction expressed. Staff felt valued, included and respected and this contributed to the low staff turnover. This contributed to the stability in the service that people received.

## 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 should make improvements to the allocation of staff to help with consistency and ensure that people have prior knowledge of who is attending to their care and support needs.

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

'I know who provides my care and support on a day to day basis and what they are expected to do. If possible, I can have a say on who provides my care and support'. (HSCS 3.11).

**This area for improvement was made on 15 December 2021.**

#### Action taken since then

Managers had reviewed the rotas and identified that improvements could be made. Prior to changes being implemented, staff were fully informed and involved in the changes. This helped reduce confusion and discontent.

The new rotas meant that staff had the same group of people that they consistently supported. This meant that staff got to know people's care and support needs well and this contributed to consistency in the standards of care and support. People said this change had helped them get to know their carers and positive, trusting relationships had formed.

**This area for improvement has been met.**

#### Previous area for improvement 2

The service should ensure that the observation of staff practice and competencies are reflective of changes to guidance and the specific needs of people. This should include; the safe handling of laundry, the safe disposal of PPE and if the needs of individuals indicate that a face mask may be detrimental to their wellbeing.

This is 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).

**This area for improvement was made on 15 December 2021.**

#### Action taken since then

There were more robust systems in place to ensure that staff competencies were completed in timely manner. The competency assessments were appropriate to the role and work undertaken, for example, IPC, interactions, medication. Any areas of improvement identified during the competency was followed up during the supervision process. This showed a commitment to ensuring that staff practices were safe and that opportunities for staff development were acted upon.

Staff had access to personal protective equipment (PPE) and restocking of these items was easy. Staff demonstrated awareness of how to use and how to dispose of PPE appropriately.

**This area for improvement has been met.**

#### Previous area for improvement 3

The service should ensure that staff who care and support people with additional and complex needs have completed the necessary training to ensure they have the skills and knowledge to do their job.

This is to ensure that care and support is consistent with the 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 area for improvement was made on 15 December 2021.**

#### Action taken since then

The provider had a complex training plan in place for 2024. All training was related to the role the staff undertook. Specialist training was included in this programme, however, managers could add more specific training, if there was a new identified need. The provider had its own trainer who completed face-to-face training in the newly appointed training room in the Turriff offices. This made face-to-face training more accessible for staff, and staff could use real work experiences to help inform the training they received.

**This area for improvement has been met.**

## Complaints

There have been no complaints upheld since the last inspection. Details of any older upheld complaints are published at [www.careinspectorate.com](http://www.careinspectorate.com).

## 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



## To find out more

This inspection report is published by the Care Inspectorate. You can download this report and others from our website.

Care services in Scotland cannot operate unless they are registered with the Care Inspectorate. We inspect, award grades and help services to improve. We also investigate complaints about care services and can take action when things aren't good enough.

Please get in touch with us if you would like more information or have any concerns about a care service.

You can also read more about our work online at [www.careinspectorate.com](http://www.careinspectorate.com)

## Contact us

Care Inspectorate  
Compass House  
11 Riverside Drive  
Dundee  
DD1 4NY

[enquiries@careinspectorate.com](mailto:enquiries@careinspectorate.com)

0345 600 9527

Find us on Facebook

Twitter: @careinspect

## Other languages and formats

This report is available in other languages and formats on request.

Tha am foillseachadh seo ri fhaighinn ann an cruthannan is cànan eile ma nithear iartras.

অনুরোধসাপেক্ষে এই প্রকাশনাটি অন্য ফরম্যাট এবং অন্যান্য ভাষায় পাওয়া যায়।

یہ اشاعت درخواست کرنے پر دیگر شکلوں اور دیگر زبانوں میں فراہم کی جاسکتی ہے۔

ਬੇਨਤੀ 'ਤੇ ਇਹ ਪ੍ਰਕਾਸ਼ਨ ਹੋਰ ਰੂਪਾਂ ਅਤੇ ਹੋਰਨਾਂ ਭਾਸ਼ਾਵਾਂ ਵਿਚ ਉਪਲਬਧ ਹੈ।

هذه الوثيقة متوفرة بلغات ونماذج أخرى عند الطلب

本出版品有其他格式和其他語言備索。

Na życzenie niniejsza publikacja dostępna jest także w innych formatach oraz językach.