

Edinburgh Homecare T/A Meloosha Homecare Edinburgh Housing Support Service

Edinburgh Homecare T/A Meloosha Homecare Edinburgh 69 North Gyle Terrace Edinburgh EH12 8jy

Telephone: 0131 5412365

Type of inspection:

Announced (short notice)

Completed on:

26 November 2024

Service provided by:

Edinburgh Homecare Ltd T/A Meloosha Homecare Edinburgh

JN

Service provider number:

SP2015012633

Service no:

CS2022000387



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About the service

Edinburgh Homecare, trading as Meloosha Homecare Edinburgh, provides a care at home and housing support service to adults with physical disabilities, mental health support needs and older people in their own homes. The service is managed from an office in the Gyle area of Edinburgh. At the time of inspection, a service was being provided to approximately 142 people throughout Edinburgh.

About the inspection

This was a virtual follow up inspection which took place on 26 November at 9am. 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 management
- · reviewed documents.

Key messages

People's care and support plans had been reviewed, updated and were outcome focused and person-centred.

People's risk assessments had been reviewed and updated to reflect people's changing needs. People's family and or representatives, if appropriate, were involved in care plan reviews. People's care plan reviews considered people's needs and preferences and care plans were updated accordingly.

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

Requirements

Requirement 1

By 25 November 2024, the provider must improve the quality of recording within care plans to ensure that people receive the right support at the right time. To do this, the provider must, at a minimum, ensure:

- a) each person receiving care has a detailed personal plan which reflects a person-centred and outcome focused approach
- b) personal plans contain accurate and up-to-date information which directs staff on how to meet people's care and support needs
- c) personal plans contain accurate and up-to-date risk assessments which direct staff on current/potential risks and risk management strategies to minimise risks identified -
- d) personal plans are regularly reviewed and updated with involvement from relatives and advocates.
- e) detailed six monthly care reviews are undertaken which reflect people's care needs and preferences.

This requirement was made on 19 September 2024.

Action taken on previous requirement

This requirement was made following a visit to the service in relation to a complaint investigation which took place on 5 September 2024. The provider submitted an action plan which detailed how the requirement would be met to ensure positive outcomes for people.

There was evidence that quality assurance systems were in place to review people's care and support plans and ensure that plans contained detailed information about people's support needs and outcomes. The service had completed an audit of all care and support plans and individual audits continued to be completed on a weekly basis with the quality assurance officer and staff.

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There was evidence that people's care and support plans contained accurate and up to date information and provided staff with guidance on how to meet people's needs. The service introduced a 'care planning improvement plan' so management and staff were aware of their roles and responsibilities in relation to care and support planning. The improvement plan showed that appropriate action was taken by management and staff to address any concerns and ensure that people's care and support plans were up to date.

There was evidence that people's risk assessments had been reviewed and updated to reflect their changing support needs and outcomes. The completed risk assessments provided staff with information of potential risks and the risk reduction measures in place to keep people safe. Some people's care and support plans could have provided staff with further guidance on strategies to implement when risks were identified. However, the care and support plan audits also identified this, and we were assured that appropriate action would be taken to ensure that people's risk assessments would be updated to include this information.

There was evidence that people's care and support plans were regularly reviewed and there was involvement from people's family and or representatives. People were also provided with the option to have their regular support worker present for the care plan review, if appropriate.

There was evidence that people's care and support plans were reviewed within the 6-month timeframe, and when they experienced changes to their health and wellbeing. There were also quality assurance systems in place to monitor people's care and support plan reviews. There was evidence that people's needs and preferences were considered during the care plan review and subsequently peoples plans were updated to reflect changes, if required.

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 support positive outcomes for people experiencing care, the provider should ensure they discuss with people, and/or their representatives, their preferred day and time to receive support. This should include, but is not limited to, ensuring that a record of the initial visit is completed, and any actions and discussions are recorded and acted upon if required.

This area for improvement was made on 19 September 2024.

Action taken since then

This was a focused inspection and this area for improvement was not reviewed.

Previous area for improvement 2

To support positive outcomes for people experiencing care, the provider should ensure that people receive support in line with their assessed needs. This should include but is not limited to, ensuring that people receive support for their allocated time frame.

This area for improvement was made on 19 September 2024.

Action taken since then

This was a focused inspection and this area for improvement was not reviewed.

Previous area for improvement 3

To support positive outcomes for people experiencing care, the provider should ensure they effectively communicate with people, their representatives and other professionals involved in their care and support. This should include, but is not limited to, ensuring that people's emergency contacts are recorded within their care plans and ensuring that when people or their representatives contact the service, the service acknowledges receipt of communication, and the contents of the communication is recorded and responded to appropriately.

This area for improvement was made on 19 September 2024.

Action taken since then

This was a focused inspection and this area for improvement was not reviewed.

Previous area for improvement 4

To ensure people who experience stress and distress can be confident that care and support staff consistently understand and respond to their needs, the provider should ensure:

- a) all staff are trained in relation to supporting people who experience stress and distress;
- b) personal plans clearly set out interventions to support people who experience stress and distress; and
- c) managers regularly assess staff competencies in supporting people who experience stress and distress.

This area for improvement was made on 6 June 2023.

Action taken since then

This was a focused inspection and this area for improvement was not reviewed

Previous area for improvement 5

To ensure people are confident that staff have sufficient information to support them to meet their outcomes safely, the provider should further develop care plans and reviews.

This should include, but is not limited to, ensuring that:

- a) managers regularly monitor and improve information in plans to ensure a consistently high standard for all people;
- b) appropriate risk assessments and plans to enable risk are in place reflective of people's care identified care needs; and
- c) support plans are regularly reviewed with people and/or their family/friends/carers as appropriate. Reviews should capture discussions held and evaluate how well support is meeting individual needs and outcomes.

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This area for improvement was made on 6 June 2023.

Action taken since then

This area for improvement was met as a result of the follow up virtual inspection. Please see previous section for details on action taken for requirement.

Complaints

Please see Care Inspectorate website (www.careinspectorate.com) for details of complaints about the service which have been upheld.

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Care Inspectorate Compass House 11 Riverside Drive Dundee DD1 4NY

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