

Kerr Home Care Support Service

Darluith Business Centre
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Type of inspection:
Announced (short notice)

Completed on:
17 December 2024

Service provided by:
Anne Kerr trading as Kerr Home Care

Service provider number:
SP2015986657

Service no:
CS2015334913

About the service

Kerr Home Care is a registered care service providing care at home support. The service is a family run organisation providing support to adults living in Erskine, Houston, Bridge of Weir and Kilbarchan areas of Renfrewshire.

The service operates from their office in Linwood, where the management team are based.

At the time of the inspection 22 people were being supported. The registered manager was supported by a depute manager and seven care staff.

About the inspection

This was a short notice announced inspection which took place over 10, 11, 12, 13 & 16 December 2024. The inspection was carried out by one inspector and an inspection volunteer from the Care Inspectorate.

To prepare for the inspection we reviewed information about this service. This included previous inspection findings, information submitted by the service and intelligence gathered since the last inspection.

In making our evaluations of the service we:

- spoke with four people using the service and seven of their relatives
- spoke with six staff and management
- observed practice and daily life
- reviewed documents
- had contact with visiting professionals

Key messages

- Management and staff were very good at developing meaningful relationships with people and their families.
- Staff were highly motivated and committed to wanting to provide the best support to people.
- Support from small staff teams meant people could build positive, trusting and caring relationships with their carers.
- Support plans and risk assessments did not always guide staff on peoples' current support needs. This meant there was a potential of support provided not being consistent.
- Quality assurance systems should be improved to give the management team clear overview of key areas to drive service improvements forward.

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 leadership?	4 - Good
How good is our staff team?	4 - Good
How well is our care and support planned?	4 - 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's needs should be met by the right number of people. Support was provided by regular staff, enabling them to get to know people, their health and wellbeing needs and develop relationships. Staff, relatives and people supported shared with us the difference this made and the confidence they had in support being provided. A person supported shared with us "Can't speak highly enough of the staff who provide support, don't know what I would do without them. They all know me really well and I enjoy the time I get to spend with them while they are supporting me".

Staff interactions with people using the service were warm, genuine and respectful. We observed staff supporting people in a calm and reassuring manner, which had a positive impact on their emotional wellbeing. It was clear that staff had worked hard to develop relationships with people using the service. This enabled people to feel a sense of trust and confidence in their support.

Relatives shared with us that staff had a good understanding of their loved ones needs and that they were kept informed of any changes or concerns. This gave confidence in the support being provided. A relative told us "The connection between x and the staff is really good, which makes all the difference, doesn't feel like it they are just coming in, doing the tasks and leaving again".

We acknowledge that, as a small business, there were family connections between some staff. To keep people safe, the manager should have a record of this and how any associated risks are mitigated.

The health and wellbeing needs of people were supported by the staff team. Staff shared that the management team were responsive when they raised concerns about peoples health and wellbeing. Staff accessed a range of external professionals such as dietician and district nurses, for advice and support when required.

Systems were in place to support the safe management of medication, for a small number of people where prompting and assisting was required. Records were completed detailing the support provided. To give management assurances that support was being provided as per the medication policy, observations of practice should be undertaken.

(Please see area for improvement one, how good is our staff team).

How good is our leadership?

4 - Good

We evaluated this key question as good where several strengths impacted positively on outcomes for people and clearly outweighed areas for improvement. Improvements were required to ensure that people's experiences and outcomes were consistently positive.

People should benefit from a culture of continuous improvement. There was an improvement plan in place, which demonstrated an understanding of areas of development. This could be improved further with clear steps of how the improvements will be achieved and measured. This would ensure progress was tracked and that changes were achieving the desired outcomes.

Whilst the service had quality assurance processes in place, these were not always being utilised to identify and action improvements. As the management team know the service well, there was a number of informal processes in place, which would benefit from being formalised. For quality assurance processes to be effective, the service requires a clear and structured plan of what is required, when and by who. This would improve the understanding of senior staff in relation to their role in quality assurance.

(Please see area for improvement 1).

There was a number of audits currently being carried out. However these were not being fully recorded. Audit formats should be developed to ensure they detail the quality assurance checks that are being undertaken to improve the quality of the experience for people. All audits should have a clear action plan with the intended outcome, whose responsible, required dates and signed off when completed.

(Please see area for improvement 1).

Due to the size of the service and the day to day involvement of the management team, they had a good understanding of key activities being carried out. This included when reviews had been carried out and audits completed. However there was no recorded overview of these. It would be helpful for all key activities to be tracked with dates completed so it is clear what has been carried out as well as any gaps.

(Please see area for improvement 1).

Newsletters sharing information and developments with staff and people supported, were circulated quarterly which is a great way of keeping connected with people. Questionnaires seeking feedback from people supported, covering the main areas of support were also distributed. Feedback received was very positive about the care and support. Following consultations, people should be kept informed of the outcome and how the information will be utilised.

Care and support should be consistent and stable because people work together well. Staff shared that the management team were approachable, supportive and open to hearing ideas of how the service could be improved for people supported. This made staff feel valued and they appreciated that their knowledge was recognised.

Areas for improvement

1. To further the improvement journey, the provider should continue to develop and embed their quality assurance system.

This should include but not be limited to:-

- a. the registered manager utilising a quality assurance framework detailing what should be completed, when and by whom
- b. quality audits and action plans including care planning and medication being fit for purpose, completed regularly and ensuring they lead to the necessary action to achieve improvements without delay.

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.

People should experience a warm atmosphere because staff have good working relationships. Staff shared that they felt they worked well together, supporting each other as and when needed. People supported and staff shared that the management team were warm and engaging, which gave them confidence in contacting the office. A staff member shared "Our management team are supportive as are my colleagues. Being a small company we all help each other."

Staff should have time to provide care and support to people. People supported and their relatives shared that they don't ever feel rushed and that staff take the time needed to achieve what is required. Staff shared "we do whatever is needed on each visit to provide the care and support needed and don't hurry people along".

Considerations were given when matching staff and people supported, including who was best to meet people's support needs, current gaps and staff who would work well together. This improved communication across the staff team and enhanced the connection between people, their loved ones and staff supporting them.

Some people shared with us that they didn't know who was visiting over the course of the week. Whilst this didn't have a major impact on people, it is important that people know who will be providing support to them.

We were able to see people supported were allocated their assessed support hours on staff rotas, with no short or cancelled visits. Any gaps arising were filled by a member of the management team meaning people received visits as planned. This ensured that people consistently received the support they were assessed as requiring and gave people confidence in the service.

People can expect to have confidence in staff because they are trained to carry out their role. There was a clear induction programme in place for all new staff, covering service information as well as baseline learning, which new recruits had undertaken.

The organisation provided a range of online and in person training opportunities, delivered by the management team and external training company. Staff shared that they felt equipped to carry out their role. Although there was a high uptake of online training there were some gaps across the staff team in their mandatory training.

(Please see area for improvement 1).

We heard that as the management team regularly worked alongside staff observations of practice were done on an informal basis, as well as ongoing spot checks. To give management confidence in staff practice,

observations should be scheduled and tracked to ensure practice has been observed across the staff team, particularly in relation to medication.

(Please see area for improvement 1).

Supervision was taking place regularly. There had been some consideration as to the effectiveness of team meetings, which was subject to ongoing review. These are important to encourage staff to reflect on their role as well as identify areas for development. Notes from meetings should be reflective of the discussion as well as planning actions to be taken forward.

(Please see area for improvement 1).

Areas for improvement

1. The provider should ensure all staff receive training appropriate to their role and particular to the needs of people supported. To promote the safety and wellbeing of people staff must apply their training into practice.

To do this the provider should:

a. ensure all staff receive appropriate induction and core training, as directed by training needs analysis. This should include dementia, managing stress and distress and any other relevant condition specific training required

b. ensure that key training to keep staff and people supported safe is current and up to date for all staff

c. monitor staff competence through regular supervision, team meetings and direct observations of staff practice, including medication observations

d. keep accurate records of all training completed to evidence that staff have the required skills, knowledge and qualifications for their role.

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 reflection their practice and follow their professional and organisational codes." (HSCS 3.14)

How well is our care and support planned?

4 - Good

We evaluated this key question as good where several strengths impacted positively on outcomes for people and clearly outweighed areas for improvement. The strengths will have a positive impact on peoples experience and outcomes.

People should benefit from care plans which are person centred, up to date and reflect their rights, preferences and desired outcomes. We could see from observations and discussions with the staff team that people's needs were identified and staff were able to engage and support people with dignity and respect. However, this was not always documented in care plans.

We appreciate that staff know people well and therefore may not use the care plans as much to direct support, however they should be up to date, giving relevant details require to provide consistent support.

Plans gave good background information about people supported and their lives. Whilst some plans were detailed, highlighting peoples strengths and giving clear information with regards to support to be provided this was not the case for all. This could lead to a lack of consistency of support and people becoming deskilled.

(Please see area for improvement one).

A person supported shared "Some staff try to get me to do more for myself, whereas some will do everything for me, which is nice but it is important I am able to push myself to continue to do things for myself".

Reviews were being carried out regularly including, people and their relatives. The current review format seeks feedback on peoples satisfaction of support being provided. It is important that there are clear discussions at the review about support that has been provided and future planning, to ensure support continues to meet peoples needs. We do however appreciate that support provided was flexible and could be changed out with the review. The management team updated their review format over the course of the inspection.

Areas for improvement

1. To ensure that people receive the right support at the right time, the provider should ensure care plans are current, up to date and reviewed on a regular basis.

Care plans should be strengths based, person centred, directing staff on how to meet people's care and support needs .

To ensure care and support continues to be appropriate to meet peoples needs, support requirements and planning should be discussed at reviews. This should include involvement from all relevant parties.

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

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?	5 - Very Good
1.3 People's health and wellbeing benefits from their care and support	5 - Very Good
How good is our leadership?	4 - Good
2.2 Quality assurance and improvement is led well	4 - Good
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?	4 - Good
5.1 Assessment and personal planning reflects people's outcomes and wishes	4 - Good

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