

Eildon Ltd - Support Services Housing Support Service

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Telephone: 01463 711 588

Type of inspection:
Unannounced

Completed on:
2 December 2024

Service provided by:
Eildon Limited

Service provider number:
SP2012011849

Service no:
CS2012308692

About the service

Eildon Ltd - Support Services is registered as a combined care at home and housing support service and the other registered service is called Eildon Limited Support Service - Care at Home.

The service is offered to adults living within their own homes and the staff are split into two teams, one operating in the Highlands and one in Aberdeenshire. At the time of the inspection the service was supporting over 300 people.

About the inspection

This was an unannounced follow-up inspection, which took place between 30 October and 5 November 2024. The inspection was carried out by two inspectors from the Care Inspectorate.

This follow-up inspection focused on the requirements and areas for improvement made during the previous inspection and evaluated how the service had addressed these to improve outcomes for people.

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 some people using the service;
- spoke with a number of staff and management;
- reviewed documents; and
- attempted contact with external professionals.

Key messages

- The provider had improved how they were recording complaints from people.
- People felt their complaint or concern had been handled well.
- The provider had begun to notify the Care Inspectorate of events they are required to do. This had been an indirect improvement because of the work the provider had taken around the complaints requirement.
- Two areas for improvement have been continued to the next inspection.
- The provider did not submit an action plan from our last inspection.

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

Requirements

Requirement 1

By 24 September 2024, the provider must ensure their complaints process and handling of complaints is in line with their policy.

To do this the provider must, at a minimum:

- ensure the management and leadership staff fully understand the provider's complaints policy and what requires to be reported;
- ensure staff handle complaints in accordance with the provider's policy;
- ensure that complaints are handled in a way which is respectful and professional;
- ensure records demonstrate a robust, thorough and impartial investigation; and
- ensure that the outcome of the complaint is communicated to the complainant and held within the complaints file.

This is to comply with Regulation 18 of The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/210).

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

'I receive an apology if things go wrong with my care and support or my human rights are not respected, and the organisation takes responsibility for its actions.' (HSCS 4.4).

This requirement was made on 24 May 2024.

Action taken on previous requirement

The provider had implemented a tool to log complaints, accidents, incidents, and adult protection referrals. This had meant appropriate notifications had been made to relevant agencies.

The provider had begun to notify the Care Inspectorate of notifiable events, which was an improvement. However, there were delays in this being done, and some had been retrospectively notified.

Staff had a better understanding of what constituted a complaint, and we found they had logged complaints appropriately. The provider had documented the outcomes for the complaints investigations they had carried out.

When we spoke with people who had raised concerns, they indicated they were happy with the provider's handling of their concern or complaint.

The provider needs to continue to develop and embed their approaches to complaints and this is something we will continue to monitor.

Met - outwith 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 people's health and wellbeing, managers should record fully the follow up actions they have taken when a staff member raises a concern about someone.

Additionally, they should update the staff member the outcome of their concern, so that everyone, including the person being supported, is kept up to date.

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 24 May 2024.

Action taken since then

The provider had begun to look at how best to proceed with this area for improvement.

We reviewed records and found areas where staff had not carried out the necessary follow-up actions. This was a risk to people's health and wellbeing, and we found they had not been able to address the issues we had raised.

We discussed with the provider about how they use the care management systems, in particular, how they were processing notifications from staff.

When staff had sent a notification through the system, leadership staff would read these promptly. Leadership staff then resolved the notification. We found situations where the notification had needed staff to do additional things, for example, a referral to a dietician, or contact with another health professional. Leadership staff sometimes had failed to carry out the follow-up actions. We found where staff had carried out follow-up actions, these were not consistently recorded on the care management system.

The provider had begun to engage with their care management system developers for some support in resolving these issues, and they were working together with their leadership staff to try and identify solutions.

Therefore, the provider needed to continue to make improvements here and this area for improvement will be continued.

Previous area for improvement 2

To support people's health and wellbeing, the provider should record accurately the time and duration of people's visits.

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

'People have time to support and care for me and to speak with me' (HSCS 3.16).

This area for improvement was made on 24 May 2024.

Action taken since then

The provider had taken forward some actions with staff to support improvements, and we found some evidence of these improvements.

It is important that people's visits are recorded correctly, which should include the time and duration of their support. We asked the provider to continue to work on this.

Therefore, this area for improvement will continued.

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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