

Easter Inch Limited t/a T&T Healthcare Solutions Housing Support Service

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Type of inspection:
Announced (short notice)

Completed on:
9 December 2024

Service provided by:
Easter Inch Ltd

Service provider number:
SP2016012805

Service no:
CS2020379924

About the service

T&T Healthcare Solutions is registered with the Care Inspectorate to provide care at home and housing support services. These are delivered together and regulated as a combined service.

The service provides personal care and support to older people and adults in Edinburgh and West Lothian living in their own homes.

T&T Healthcare Solutions were supporting six people at the time of the inspection.

About the inspection

This was a short notice announced inspection which took place on 9 December 2024 between 09:30 and 15:00. The inspection was carried out by three inspectors from the Care Inspectorate. The inspection was to follow up on the four requirements made at the previous inspection in March 2024.

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.

During this follow up inspection, we increased the evaluation for quality indicators 2.2 and 5.1 to 'adequate' because the service had made progress by building on key strengths.

Key messages

- The provider had improved their policy and associated systems for the management of unplanned events.
- Improvements had been made to ensure that staff recruitment files now met with best practice guidance. This meant that people could be assured that staff had been safely recruited.
- Some work had started around quality assurance, however more time was needed for the provider to fully work through their plans.
- Improvements had been made to ensure that people they supported now had a more comprehensive personal plan in place to guide staff. This included relevant risk assessments to ensure that care and support was provided safely.

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 good is our leadership?	3 - Adequate
How well is our care and support planned?	3 - Adequate

Further details on the particular areas inspected are provided at the end of this report.

How good is our leadership?

3 - Adequate

We made a requirement in March 2024 about ensuring that quality assurance checks were consistently completed in order to keep people safe and ensure that people received care and support that meets their needs. Although some progress had been made, we assessed that this requirement had not been met and we agreed an extension until 31 March 2025. We have discussed this in 'What the service has done to meet any requirements made at or since the last inspection'.

We made a second requirement in March 2024 about ensuring that all accidents and incidents were properly managed so that people were kept safe and healthy. This had improved and people could now be confident that systems to respond to unplanned events were now in place. This requirement had been met.

Overall, we could see better outcomes for people as a result of the improvements made and, therefore, we reassessed the evaluation for quality indicator 2.2 from 'weak' to 'adequate'.

How well is our care and support planned?

3 - Adequate

We made a requirement in March 2024 about ensuring that people had a detailed personal plan in place. Personal planning had improved and people supported now had a more comprehensive personal plan in place to guide staff. This included relevant risk assessments to keep them safe. This requirement had been met.

We could see better outcomes for people as a result of the improvements made and, therefore, we reassessed the evaluation for quality indicator 5.1 from 'weak' to 'adequate'.

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

Requirements

Requirement 1

By 22 July 2024, the provider must ensure that people are safe and receive care and support that meets their needs.

To do this, the provider must, as a minimum:

- a) make sure that quality assurance checks and audits are consistently completed;
- b) detail actions taken to address any identified improvement; and
- c) include an evaluation of progress made.

This is to comply with Regulation 4(1)(a) (Welfare of users) 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 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 systems' (HSCS 4.19).

This requirement was made on 6 March 2024.

Action taken on previous requirement

Some work had started around quality assurance. However, more time was needed for the provider to fully work through their plans. We felt assured that the provider was in a good position to achieve this due to the progress made to meet the other three requirements that had been at the same time.

This requirement had not been met and we agreed an extension until 31 March 2025.

Not met

Requirement 2

By 24 May 2024, the provider must ensure that they keep people safe and healthy by ensuring all accidents and incidents are properly managed.

To do this, the provider must, as a minimum:

- a) implement a system to ensure that all unplanned events are recorded, investigated, analysed for trends and notified to other bodies, where they are legally obliged to do so; and
- b) ensure that they adhere to the Care Inspectorate notification guidance for reportable events.

This is to comply with Regulation 4(1)(a) (Welfare of users) 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 the 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 'My care and support is provided in a planned and safe way, including if there is an emergency or unexpected event' (HSCS 4.14).

This requirement was made on 6 March 2024.

Action taken on previous requirement

Improvements had been made and people could now be assured that a new policy and systems to managed unplanned events was now in place.

Met - outwith timescales

Requirement 3

By 16 September 2024, the provider must ensure that people can be confident that staff have been recruited and employed safely.

To do this, the provider must, at a minimum:

- a) ensure that the recruitment of staff has been informed by all aspects of safer recruitment guidance as detailed in 'Safer Recruitment Through Better Recruitment';
- b) staff do not start work until all pre-employment checks, including appropriate references, have been completed; and
- c) staff are registered with the relevant professional body, as appropriate for their job role.

This is to comply with Regulation 9(2)(b) (Fitness of employees) of The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI2011/210).

This is to ensure that care and support is consistent with the 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 6 March 2024.

Action taken on previous requirement

Improvements had been made to ensure that staff recruitment files now met with best practice guidance. This meant that people could be assured that staff had been safely recruited.

Met - within timescales

Requirement 4

By 24 May 2024, the provider must ensure each service user has a personal plan in place within one month of the date on which the service user first received the service. This must set out how the service user's health, welfare, and safety needs are to be met.

To do this the provider must, at a minimum, ensure that:

- a) the personal plan sets out how the service users needs will be met, as well as their choices, wishes, and preferences;
- b) relevant risk assessments are completed and used to inform the personal plan;
- c) daily support notes are completed at the end of each visit;
- d) personal plans are reviewed at least once in every six monthly period or where there is significant change in the service user's health, welfare or safety needs; and
- e) people have access to a copy of their personal plan in a format of their choosing.

This is to comply with Regulation 5(1) and (2) (Personal plans) 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 the Health and Social Care Standards (HSCS) which

state 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).

This requirement was made on 6 March 2024.

Action taken on previous requirement

Improvements had been made and people they supported now had a more comprehensive personal plan in place to guide staff.

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 promote good standards of practice, the provider should ensure that everyone has a service agreement.

This should set out what they can expect from their service and support including how their identified outcomes will be met.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that: 'I receive and understand information and advice in a format or language that is right for me' (HSCS 2.9).

This area for improvement was made on 6 March 2024.

Action taken since then

This area for improvement has not been assessed and remains in place.

Previous area for improvement 2

To ensure that people are protected from financial harm, the manager should ensure that staff adhere to the provider's financial support policy.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that: 'If I need help managing my money and personal affairs, I am able to have as much control as possible and my interests are safeguarded' (HSCS 2.5).

This area for improvement was made on 6 March 2024.

Action taken since then

This area for improvement has not been assessed and remains in place.

Previous area for improvement 3

To promote good standards of practice, the provider should ensure that all staff in the service are registered with an appropriate regulatory body by:

- a) undertake an audit of all staff's current registration status;
- b) ensure that all staff are registered correctly with a relevant professional body, as appropriate for their job role; and
- c) implement processes to regularly check registration status.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state: '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 6 March 2024.

Action taken since then

This area for improvement has not been assessed and remains in place.

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 good is our leadership?	3 - Adequate
2.2 Quality assurance and improvement is led well	3 - Adequate
How well is our care and support planned?	3 - Adequate
5.1 Assessment and personal planning reflects people's outcomes and wishes	3 - Adequate

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