

Careforth Ltd t/a Home Instead Support Service

Pavilion 1
Castlecreig Business Park
Players Road
Stirling
FK7 7SH

Telephone: 01786 232 799

Type of inspection:
Unannounced

Completed on:
13 November 2024

Service provided by:
Careforth Ltd

Service provider number:
SP2019013372

Service no:
CS2019377036

About the service

Careforth Ltd t/a Home Instead Senior Care was registered with the Care Inspectorate on the 01 April 2020.

They provide a Care at Home and Housing Support service to people living in the Stirling and Falkirk areas.

The service currently supports around 40 people and has a staff team of 28 care professionals, administration and management.

The aim of the service is: To become the UK's most admired care company through changing the face of ageing.

Home Instead aims to provide supportive care and companionship which both enables and encourages people using the service to remain independent, in their own homes, for as long as possible.

About the inspection

This was an unannounced inspection undertaken on 13 November 2024, to follow up requirements and areas for improvement that were made at a full inspection in July 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 we took account of peoples views, staff and management feedback and reviewed service records.

Key messages

The service had improved how people were supported with aspects of their health and wellbeing, specifically care planning and recording care and support.

The service had introduced robust quality assurance processes and this meant that the management team had a very good overview of care and support delivery.

The service had developed and delivered improved training and supervision arrangements to ensure staff were equipped to deliver good outcomes for people.

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?	4 - Good
How good is our leadership?	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?

4 - Good

A requirement was made at a previous inspection in July 2024. The service had put an action plan in place to manage the improvements needed. The service had met the requirement at this inspection.

The requirement was in relation to care and support planning (see section: What the service has done to meet any requirements we made at or since the last inspection).

As there were improvements in care plans and how people were supported, we have re-evaluated quality indicator 1.3 from adequate to good. The overall evaluation for this key question is good. An evaluation of good applies where there are several strengths that impact positively on outcomes for people and clearly outweighed areas for improvement.

How good is our leadership?

5 - Very Good

A requirement and an area for improvement were made at a previous inspection in July 2024. The service had put an action plan in place to manage the improvements needed. The service had met the requirement and the area for improvement at this inspection.

The requirement was in relation to quality assurance (see section: What the service has done to meet any requirements we made at or since the last inspection) and the area for improvement was in relation to following protocol for notifiable events (see section: What the service has done to meet any areas for improvement we made at or since the last inspection).

The service had made considerable changes in how the service was managed and quality assured. Because these improvements were significant, embedded into practice and supported better outcomes for people we have re-evaluated quality indicator 2.2 from adequate to very good. The overall evaluation for this key question is very good. An evaluation of very good applies to performance that demonstrates major strengths in supporting positive outcomes for people.

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

Requirements

Requirement 1

By 18 October 2024, the provider must ensure that each person's care plan and daily recording reflects their current individual care and support needs.

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

- a) Care plans and recordings are sufficiently detailed and reflect the care assessed and provided.
- b) Care plans are evaluated routinely to ensure the care and support remains effective.
- c) Changes to care plans are clearly documented and shared with staff.
- d) Care plans and daily recordings are outcome focused, and written in a person-centred manner, taking account of all the needs of people.

This is to comply with Regulation 5 (1) and (2) (b) (ii) and (iii) (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 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 19 July 2024.

Action taken on previous requirement

We reviewed this requirement at our inspection. Care plans were mostly well written in the first person and clearly outlined peoples needs and preferences. Care plans were detailed and reflected in the daily notes made by care staff. The plans were clear and easy to follow and written in a person centred way. Care plans were evaluated routinely to ensure the care and support remained appropriate and effective and this was followed up by audit process to ensure management oversight of care and support. We could see that when there were changes to care plans these were clearly documented and shared with staff. We were confident that the information and structure of care plans have improved and were person centred, full and informative supporting better outcomes for people.

Met - within timescales

Requirement 2

By 18 October 2024 the provider must ensure people are safe and receive care and support that is well-led and managed and which results in better outcomes for people. This should be achieved through establishing a culture of continuous improvement, with robust and transparent quality assurance processes.

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

- a) the systems of quality assurance and audits are consistently completed;
- b) effective action planning takes place within reasonable timescales which addresses identified areas for improvement;
- c) information from quality assurance activity is communicated to the appropriate people when necessary.

This is in order to comply with regulations 3 and 4(1)(a) 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 19 July 2024.

Action taken on previous requirement

We reviewed this requirement at our inspection. The service had made new arrangements for the management of the service. Robust quality assurance processes had been introduced and we could see how this gave good management oversight of service delivery. The outputs from audit activity were focussed on actions, timescales and clear outcomes, and informed the live service improvement plan. The service had introduced a number of techniques (for example a daily 'huddle') to improve communication across the service. There was good evidence of increased communication and improvement work that was identified through the quality assurance processes.

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 ensure that people benefit from organisations working together, the provider should ensure that the Care Inspectorate is notified of accidents and incidents and other notifiable events, promptly, as per guidance: 'Records that all registered care services (except childminding) must keep and guidance on notification reporting'.

This is to ensure care and support is consistent with Health and Social Care Standards (HSCS) which state that: 'I benefit from different organisations working together and sharing information about me promptly where appropriate.' (HSCS 4.18)

This area for improvement was made on 19 July 2024.

Action taken since then

We reviewed this area for improvement at this inspection. The service had kept up to date with incident notification and notified appropriate partner agencies when required and had completed their plan to meet this area for improvement.

Previous area for improvement 2

In order to ensure that people are supported by well trained staff whose skills and knowledge are kept up to date, the provider should;

- a) Make arrangements for staff to complete required training and refresher courses.
- b) Provide effective, regular supervision to staff to support them to develop and improve through reflective practice.
- c) Make arrangements to enhance staff development through effective workplace assessments and practice learning.

This is to ensure that care and support is consistent with the Health and Social Care Standards 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 19 July 2024.

Action taken since then

We reviewed this area for improvement at this inspection. The service had developed a supervision and support framework for staff that made arrangements for regular opportunities to reflect on practice, for observational supervision and to support new staff for a prolonged period to achieve the level of training and competency that the service planned for all staff. The service had introduced incentives for staff to complete training timeously and staff had responded well.

The service had completed their plan to meet this area for improvement

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?	4 - Good
1.3 People's health and wellbeing benefits from their care and support	4 - Good

How good is our leadership?	5 - Very Good
2.2 Quality assurance and improvement is led well	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

Contact us

Care Inspectorate
Compass House
11 Riverside Drive
Dundee
DD1 4NY

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.