

Avicenna Care Support Service

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Type of inspection:
Announced (short notice)

Completed on:
22 January 2025

Service provided by:
Avicenna Care Limited

Service provider number:
SP2018013078

Service no:
CS2018364867

About the service

Avicenna Care Ltd, provides care at home support to people living in their own homes in the Kirkcaldy, Glenrothes and surrounding towns of Fife. The service supports adults who have a range of support needs including those who have physical conditions, are physically frail and/or living with dementia.

At the time of the inspection they supported 124 people and employed 30 care staff.

About the inspection

This was an short notice announced inspection which commenced on 14 January 2025 and concluded 22 January 2025. 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 seven people using the service and three of their representatives
- spoke with 23 staff and management
- observed practice and daily life
- reviewed documents.

Key messages

- People told us care was very good and reliable.
- Staff teams were consistent.
- Leaders in the service had a strong improvement focus and used quality assurance to inform care delivery.
- Care plans were informative in places.
- Risk assessments required more thorough quality assurance to ensure they are consistently detailed.

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

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|--|---------------|
| How well do we support people's wellbeing? | 5 - Very Good |
| How good is our leadership? | 4 - Good |
| How good is our staff team? | 5 - Very 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.

It is essential that people are supported with the right care, at the right times. People told us that they were satisfied with the care being provided. Comments included:

"These girls are great; I have no complaints."

"They are always good."

"Always willing to do more."

"They wash me properly."

"We have a good routine, and I trust her explicitly".

We reviewed the services' accident and incidents log, which evidenced prompt responses to events where people appeared unwell, and or needed additional input. One person told us, "They saved my life a few times", explaining that the carers had arrived to find them very ill and contacted emergency services, without delay. Relatives we spoke with echoed this, telling us they felt communication was good when their loved one presented 'out of character'. This evidenced care that was responsive and attentive.

We observed practice that was unhurried and respectfully delivered. It was clear that carers knew people's needs well and that people trusted them. We witnessed nice examples of 'banter' and promotion of independence. Relatives told us, "He talks to my husband, takes time", "She isn't lonely when they visit and talk to her", "They know her skin and how fragile it is, they are so careful". This evidenced care that was compassionate.

We found good systems were in place to promote safe medication management. Observations of practice were regularly carried out and monitored standards of care. The electronic care planning system used by the service had 'prompt' functions in place to remind carers to support with medications, where this was needed. Improvements had been made to the guidance around application of topical creams. See section 'what the service has done to meet previously made areas for improvement' section of this report.

How good is our leadership?

4 - Good

For this key question we looked at how well the service used quality assurance to drive improvement. We evaluated this key question as good as there were several strengths which impacted positively on outcomes for people.

People's views should be central to improvement planning. We saw the service had robust systems in place to analysis and evaluate feedback. We saw examples of them using this to measure their effectiveness and to make any required changes to support people's outcomes. Peoples feedback was gathered collectively on a yearly basis, but also more regularly as part of reviews and staff 'spot checks. This evidenced that people's experiences were drivers for change.

The service had a comprehensive system for managing complaints and suggestions. We could see from records that actions were taken to address any areas of concern. People told us they felt confident that any concerns would be dealt with timeously and appropriately. Staff told us they felt confident in approaching the leadership team for support and guidance at any time.

Our review of improvement plans provided us with assurance that the service was committed to ongoing improvement for staff and people experiencing care. A thorough annual audit had identified strengths and areas for improvement, all of which had been actioned. We suggested that the service use the Care Inspectorate 'Self-evaluation tool' to measure themselves against the 'A quality framework for support services (care at home, including supported living models of support)' to support further development.

The service made good use of other quality assurance tools to measure standards of care, using a scoring system to review performance. We made suggestions that the service take time to consistently record people's voices within these audits and clearly link this any staff development needs and the service improvement plan.

We found improvement was needed to the auditing system for care planning and risk assessing. **(See area for improvement 1)**. Further details can be found in sections 'How well is our care planned' (key question 5) and 'What the service has done to meet any areas for improvement made at or since our last inspection'.

Areas for improvement

1. The provider should ensure that quality assurance and audit processes are effective in identifying areas for improvement. This should include but not be limited to, regular auditing of care plans and risk assessment. Audits should include relevant stakeholders and seek to promote plans that are up to date, and outcome focussed.

This is to ensure that care and support is consistent with 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) and

'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).

How good is our staff team?

5 - Very Good

For this key question we evaluated the staffing arrangements. We evaluated this key question as very good.

We found that well organised rotas meant people were being supported by the same group of carers. People told us their care was "reliable". If carers were running very late or there had been a change, the service made efforts to contact people to tell them this. People told us they had asked for specific carers and that the leadership team had made efforts to grant this. One relative told us the carers attending to their loved one were able to speak with them their native language, saying that this meant "She isn't lonely when they visit and talk to her".

Induction training was thorough and included a range of mandatory topics which were completed both online and in person. Staff told us, "Induction provided a comprehensive overview of the company's policies, my specific responsibilities and the tools I would be using" and that the service "Always provide training to us for giving better services to service users". Shadow shifts were undertaken before staff worked alone with people. The service also offered staff additional training relating to their role and the specific needs of the people they cared for. Staff told us that training was helpful and supported them to do their jobs well. We reviewed team workshops that had delivered guidance on best practice. We could be confident that people were supported by a knowledgeable and skilful staff group.

An online care planning and delivery app was used by the service and accessible to staff on a mobile device. We saw that this app had various, easy to use, communication functions to inform staff about best practice guidance and or updates to company policies. Staff could also use this online platform to safely share information about people's needs. Staff told us they would contact 'the on call' for more urgent queries or concerns. "I am always able to reach out if I need any additional support" and "The service encourages open communication, enabling staff to share concerns or ideas". This promotes practice that focusses on achieving the best outcomes for people.

How well is our care and support planned?

4 - Good

We evaluated this key question as good. We identified many strengths, with some areas for improvement that would enhance people's experiences.

People's plans should accurately reflect their wishes and needs. We sampled plans that reflected people's life history and current support needs. The narrative recorded around care tasks were clear and detailed. People's abilities were clearly recorded and independence encouraged. Plans gave good, best practice guidance to care staff around infection prevention control. This supported effective care delivery.

Personal plans should be regularly reviewed and up to date. We saw evidence of plans being reviewed on a six-monthly basis, or before if required. People's feedback about the service was clearly captured within these reviews. This supports the service to analysis its effectiveness. The service had created a new review format that asked people, or next of kin, as appropriate, to agree the care plan content. Some reviews had been conducted under this format; however this was ongoing, and we found evidence of people not being fully involved in reviewing their plans. Area for improvement in section 'what the service has done to meet areas for improvement made at, or since, the last inspection?' applies.

Effective care plans should clearly capture risks and any mitigation actions required by carers. Although all plans identified specific risks for people, these were not consistently detailed or reflected people's up to date needs. The service should develop its quality assurance processes around care planning to ensure that plans are consistent and effectively inform care staff, enabling people to be safe in their homes. This should be in both online care planning and care plans held within people's homes. See area for improvement in section 'what the service has done to meet areas for improvement made at, or since, the last inspection'. Area for improvement in 'How good is our leadership?' (key question 2) also applies.

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 wellbeing, the provider should ensure people's support plans contain sufficient information to guide staff on how to best meet their needs.

This should include accurate information on the application of topical preparations including the name of preparation and the exact body part it is to be applied to.

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 my 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 area for improvement was made on 10 April 2023.

Action taken since then

Care plans we reviewed clearly recorded when someone required application of topical preparations (creams) and a body map was used to direct carers to the exact area of the body.

Area for improvement is MET.

Previous area for improvement 2

To support effective recruitment, you, the provider, should follow guidance from the 'Safer Recruitment Through Better Recruitment' resource.

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 area for improvement was made on 10 April 2023.

Action taken since then

Introduction of a recruitment checklist ensured that all steps were followed, as noted in 'safer recruitment through better recruitment', prior to a person commencing any work with the company. Recruitment records we reviewed were compliant with these standards.

Area for improvement is MET.

Previous area for improvement 3

To support the health, welfare and safety of people who use the service, the provider should ensure that all personal plans have up to date and detailed risk assessments in place. These should accurately reflect risks that have been identified, the assessment of these, and steps to be taken to reduce and/or mitigate the risks.

This is to ensure 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 area for improvement was made on 10 April 2023.

Action taken since then

All plans that we reviewed gave good direction around people's care needs. Further work was required around risk assessments to ensure that these are accurate and detailed. See "how well is our care and support planned?" (key question 5) for details.

Area for improvement is NOT MET and remains in place.

Previous area for improvement 4

In order to ensure good outcomes for people experiencing care, the service should ensure that people are included in their assessments and care plans. Care and support plans should clearly reflect people's individual choices and preferences and should be reviewed regularly to ensure that their needs are being met.

This is to ensure care and support is consistent with Health and Social Care Standard (HSCS): I am fully involved in developing and reviewing my personal plan, which is always available to me (HSCS 2.17).

This area for improvement was made on 18 November 2024.

Action taken since then

We found plans recorded people's preferences and wishes. The service had commenced an improved review format to ensure that people were actively and meaningfully involved in reviewing their care plans. This work was ongoing and not all people had been involved in reviewing their plans.

Area for improvement is NOT MET and remains in place.

Complaints

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

Detailed evaluations

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| 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? | 5 - Very Good |
| 3.3 Staffing arrangements are right and staff work well together | 5 - Very 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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