

Newlands Care Angus Support Service

NEWLANDS CARE ANGUS LTD 61 Marketgate ARBROATH DD11 1AT

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Type of inspection:

Unannounced

Completed on:

20 November 2024

Service provided by:

Newlands Care Angus Limited

Service provider number:

SP2017012936

Service no: CS2017359103



Inspection report

About the service

Newlands Care Angus is registered as a care at home support service to provide a service to adults living in their own home, covering south-east Angus and the Glens.

Newlands Care Angus aim is to strive to provide the highest quality of care to people using their service whilst respecting their right to independence, choice, privacy and dignity.

About the inspection

This was an unannounced follow up inspection undertaken by one inspector from the Care Inspectorate. This took place on 20 November 2024 between 10:00 and 15:00. This follow-up inspection focused on the requirement and area 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 four people using the service
- spoke with five members of staff and the leadership team
- spoke with one of their family members
- reviewed documents
- spoke with two visiting professionals.

Key messages

- •Overall, there was an improvement in how Adult Support and Protection (ASP) incidents were managed and progressed.
- •There was a consistent approach to Adult Support and Protection incidents. This was an improvement.
- Referrals to regulatory bodies were made timeously. This helped keep people safe from further harm.
- From records reviewed, where things had gone wrong, leaders learned from mistakes.
- •Staff training was ongoing.
- People experiencing care told us they had confidence in the staff and leadership team.

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

Requirements

Requirement 1

By 1 November 2024, the provider must ensure that people's health, safety and wellbeing needs are being accurately assessed and met, to protect them from harm.

In order to achieve this the provider must:

- a) Ensure any Adult Support and Protection incidents are appropriately investigated and reported timeously to the Care Inspectorate and the Health and Social Care Partnership.
- b) Ensure that all staff are trained in Adult Support and Protection at a level that suits their role.
- c) Ensure that all referrals to any regulatory bodies are made timeously. Leaders should be able to demonstrate they have a robust knowledge of the processes and thresholds.

This is to comply with Regulation 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 am confident that people respond promptly, including when I ask for help' (HSCS 3.17).

This requirement was made on 19 July 2024.

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Action taken on previous requirement

Overall, there was an improvement in how Adult Support and Protection (ASP) incidents were managed and progressed. Leaders fully investigated incidents and these were well documented. The provider had developed processes to track actions and this ensured the right actions were taken, at the right time, to keep people safe.

There was a consistent and robust approach to ASP incidents. This was an improvement. There was a designated member of the leadership team who progressed ASP referrals. Referrals were dealt with timeously and actions to keep people safe were taken promptly. This was reflected in feedback from an external professional who shared, "Newlands Care Angus responded well to an incident. Communication was good, and they put immediate actions in place to keep the service user safe".

From records reviewed, we saw that - wherever things had gone wrong - leaders had learned from the mistakes. They put systems and processes in place to prevent issues from recurring. This included, a leadership meeting every week to raise any concerns and manage risks to people. This supported better outcomes for people. This ensured people would continue to receive care and support that met their needs.

Referrals to regulatory bodies were made timeously. Leaders we spoke to demonstrated an improved understanding of the processes. This was reflected in most of the incident recordings we sampled. Leaders had access to a well organised folder of processes and polices. This helped inform their practice. As a result, leaders made the right referrals, at the right time. This helped keep people safe and protected them from further risk of harm.

Staff training was ongoing. We observed an increased knowledge and confidence in the way leaders dealt with ASP incidents. Leaders of the service were booked on an ASP training course with the Health and Social Care Partnership in January 2025. This will ensure staff knowledge is kept up to date to provide effective and safe care and support.

People experiencing care told us they had confidence in the staff and the leadership team. One person shared, "staff are very friendly, and they always go above and beyond". People felt confident to raise a concern and that it would be dealt with promptly. This helped keep people safe.

This requirement has been met.

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 support people's wellbeing and safety, the provider should ensure people's care plans are reflective of the care and support they require to meet their needs.

This should include but is not limited to:

- a) Implement a quality assurance system, to ensure care plans are regularly audited and information is complete and up to date.
- b) Ensure risk assessments are personalised to reflect each person's needs.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that: 'I experience a service that is right for me' (HSCS 5.5).

This area for improvement was made on 19 July 2024.

Action taken since then

The provider had developed systems and processes to ensure care plans were kept up to date. For example, a care plan audit sheet and a spreadsheet to alert leaders when reviews were required. This ensured people received care and support tailored to their specific needs. These processes were in their infancy and were being rolled out across the service. We observed an action plan for this to be fully embedded into the service.

Risk assessments we sampled were personalised. This was an improvement. This ensured people received care and support that was tailored to their needs. The provider was in the process of reviewing this for all people experiencing care. This area for development will be driven forward by the leadership team. We observed an action plan for this.

This area for improvement has been met.

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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