

Avenue Care Services – Perth/Dundee Support Service

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Telephone: 01764 663 644

Type of inspection:
Unannounced

Completed on:
13 February 2025

Service provided by:
Avenue Care Services Ltd

Service provider number:
SP2018013172

Service no:
CS2017362277

About the service

Avenue Care Services - Perth/Dundee has supported people for many years. It registered separately with the Care Inspectorate in August 2018, having previously been combined with other Avenue services. The service is provided by Avenue Care Services Ltd, a private company that provides three other registered care services.

The service provides a care at home service to people living in Perthshire, Dundee and Angus. The service operates from an office in Aberuthven, near Auchterader.

At the time of inspection the service was supporting around 200 people in their homes.

"The aim of Avenue Care Services is to recognise the right of individuals to lead independent lifestyles within their own home with the appropriate support services, where practicable. Avenue Care Services will do this by offering personal, social and domestic care to meet the assessed needs of service users, ensuring that within the process reablement is fully endorsed within this."

About the inspection

This was an unannounced inspection which took place on 3, 4 and 5 February 2025, between 09:30 and 16:30 hours. The inspection was carried out by two inspectors from the Care Inspectorate. An additional inspector assisted with telephone calls to staff and an inspection volunteer helped telephone people using the service and their relatives. To prepare for the inspection we reviewed information about the service. This included information submitted by the service and intelligence gathered since the last inspection. In making our evaluations of the service we:

- Discussed care practice and support provided with people and their relatives, and staff members.
- Spoke with 13 people using the service by telephone.
- Spoke with five service user's family members by telephone.
- Spoke with 12 staff by telephone.
- Spoke with six staff and management in person.
- Received feedback through care standards questionnaires from 24 people using the service and their relatives.
- Received email feedback from six external professionals.
- Reviewed documents.

Most people identified that they were happy with the care and support provided, and with the management of the service.

Key messages

- People valued the support provided. Many stated that they were happy with the service and that carers were very good.
- Many people praised staff for their caring attitude and high quality support. Staff mostly attended people's scheduled care on time and delivered the support that had been planned.
- Staff aimed to make a difference to people's quality of life and promote their independence where possible.
- Where needed, people had legal frameworks in place to support decisions around their welfare and financial matters. Nevertheless, improvements could be made to information held about these. The service stated that they would liaise with social work colleagues to address this.
- Many people told us that they were involved in developing and reviewing their care plans; however, this was not the case for everyone. The service planned to improve the consistency of care plan reviews.
- Managers were supported in employment issues by dedicated recruitment staff. Pre-employment checks were carried out in line with safer recruitment practice.
- The service could improve the scheduling of staff supervision sessions and involve staff more in suggesting and making improvements to the wider organisation. The service identified that they would address this.

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 staff team?	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?

4 - Good

We evaluated this key question as good where several strengths impacted positively on outcomes for people and clearly outweighed areas for improvement.

Staff supported people to carry out personal care, prepare meals, take their prescribed medicines and maintain their accommodation. People and their relatives valued the support provided and were grateful for opportunities for social interaction and a chat with staff. Many stated that they were happy with the service and that carers were very good.

People generally made their own arrangements to access health and social care services to support their physical and psychological wellbeing. Where needed, care staff would help people contact such services and/or refer people to relevant agencies.

Staff we spoke with cared about their work and knew people well. They aimed to make a difference to people's quality of life and promote their independence where possible.

Staff communicated well with people and knew how to raise concerns about their wellbeing. Where needed, people had legal frameworks (such as Powers of Attorney and Guardianship Orders) in place to support decisions around their welfare and financial matters. Nevertheless, improvements could be made to information held about people's legal frameworks. Where these are in place, the service should hold a copy of the powers delegated to them by the Attorney or Guardian. This would help ensure that care and support provided is in line with people's wishes and preferences. The service managers stated that they would liaise with social work colleagues to address this matter.

Care plans identified people's care and support needs. This included information about the administration of medicines. We heard that pharmacies in some areas were changing the way in which they supplied medicines. This meant that staff would need training to familiarise themselves with the new medicine administration and recording systems. Service managers assured us that such training, supported by observed practice, was being organised.

Care plans were held on paper documents in people's homes with copies of current and past records held at the service's office. People's care and support needs were clearly identified with outcomes relating to practical aspects of care detailed.

We were informed that the service plans to move to a new electronic system for care planning and logging / monitoring visits later this year. The system will allow for real-time updates to records, which can be viewed by relevant staff and managers. It is hoped that improved accuracy of care records and management oversight will result from the introduction of the new system.

Many people told us that they were involved in developing and reviewing their care plans and risk assessments; however, this was not the case for everyone. Some of the care plans we examined showed variations in the time between reviews, which should be carried out at least every six months. The service acknowledged our findings and planned to improve the consistency of care plan reviews.

On a positive note, we saw that where people or their representatives had been involved with care planning and reviews, they signed to acknowledge that they had been consulted.

Involving people in planning and reviewing care is important in ensuring that the service is adequately meeting their needs.

Managers carried out regular audits around care planning and the quality of care and support. People's care was also discussed at regular staff meetings and individual supervision sessions. This helped ensure that staff knowledge and skills around personal care and support was current and relevant to individual needs.

How good is our staff team?

4 - Good

We evaluated this key question as good where several strengths impacted positively on outcomes for people and clearly outweighed areas for improvement.

Many people praised staff for their caring attitude and high quality support. Staff mostly attended people's scheduled care on time and delivered the support that had been planned. Individual circumstances meant that this could not be guaranteed all of the time. Where delays occurred people were usually informed and alternative arrangements made.

Some areas of the service had staff shortages and relied on staff flexibility to meet people's needs. Such issues are recognised nationally and we were satisfied that the service was trying to recruit staff with the necessary knowledge and skills.

Managers were supported in employment issues by dedicated recruitment staff. Pre-employment checks were carried out in line with safer recruitment practice. Managers maintained audits around professional body registration and training needs following appointment. These audits identified some gaps in training; however, we were satisfied that there was sufficient oversight of training to allow managers to adequately address these.

Staffing levels were determined by contracted packages of care and reviewed with those funding the care and/or the relevant health and social care partnership. Information on service provision was provided to the health and social care partnership on a regular basis and was discussed at individual reviews. Managers also audited a range of activities and performance across the service, and appropriate action was taken to address identified issues.

We heard that staff generally worked well together and had good management support. Many staff told us that they had regular meetings and supervision with their line managers, and had access to regular training. There were, however, some delays around delivery of staff supervision sessions and not all staff could attend pre-arranged staff meetings. There were also variances in the degree of staff involvement in suggesting and making improvements to the service. Staff told us that they had routine discussions around making people's care and support better, but there was little involvement with improvements at an organisational level. These are issues which the service recognised and would take steps to address.

The service was in the early stages of implementing training around the Health and Care (Staffing) (Scotland) Act 2019. It will be important to progress such training so that staff can understand 'safer staffing' and the implications of the Act. The provision of regular staff meetings, supervision and training is important in ensuring that staff are supported and have the necessary knowledge and skills to deliver high quality care.

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

Area for improvement 1 - complaint case number: 2023123089 (17/05/2023)

To ensure good outcomes for people, the manager should ensure people and their families are informed about changes to their support.

This is in order to comply with:

Health and Social Care Standard 4.22: 'If the care and support that I need is not available or delayed, people explain the reasons for this and help me to find a suitable alternative.'

This area for improvement was made on 17 May 2023.

Action taken since then

Most people identified that they were informed about changes to their support; however, this was not the case for everyone. The service acknowledged this and identified that they would seek to make further improvements with involving people in making changes to their support arrangements. This would require liaison with external agencies, such as health and social work services.

Whilst recognising that further improvements were needed, overall, this area for improvement has been met. Arrangements for involving and informing people about changes in their support will be reviewed at future inspections.

Previous area for improvement 2

Area for improvement 2 - complaint case number: 2023123089 (17/05/2023)

To support people's health and wellbeing the manager should ensure that all people using the service who require support to manage their medication, have this in place. Carers who are supporting with medication should know exactly what is required for each individual.

This is in order to comply with:

Health and Social Care Standard 4.11: 'I experience high quality care and support based on relevant evidence, guidance and best practice.'

This area for improvement was made on 17 May 2023.

Action taken since then

People's medication administration arrangements were identified in their care plans and subject to review. Staff were trained in administering medication and observed by team leaders/managers from time to time to ensure that their practice was safe.

As a result of our findings, this area for improvement has been met.

Previous area for improvement 3

Area for improvement 3 - complaint case number: 2023123089 (17/05/2023)

In order to ensure positive outcomes for people living with dementia, the manager should ensure that they are supported by a consistent staff team who know them well.

This is in order to comply with:

Health and Social Care Standard 4.15: 'I experience stability in my care and support from people who know my needs, choices and wishes, even if there are changes in the service or organisation.'

This area for improvement was made on 17 May 2023.

Action taken since then

Most people received visits from staff that they knew well; however, this was not always the case. The service tried to ensure that people received consistent staff to attend to their support, but wider circumstances in the service could impact on their ability to do this.

We felt that that service was committed to providing continuity around staffing and that managers understood the importance of communicating staff changes to people in advance. Our view was that, overall, this area for improvement has been met. Arrangements around staff allocation will be reviewed at future inspections.

Previous area for improvement 4

Area for improvement 4 - complaint case number: 2023123089 (17/05/2023)

The manager should ensure that people's concerns and complaints are logged and responded to in line with their complaints policy. This should include, but not be limited to, maintaining a log of all concerns and complaints, actions taken and feedback offered.

This is in order to comply with:

Health and Social Care Standard 2.12: 'If I am unable to make my own decisions at any time, the views of those who know my wishes, such as my carer, independent advocate, formal or informal representative, are sought and taken into account.'

This area for improvement was made on 17 May 2023.

Action taken since then

The service had complaints processes in place, which included provision for senior management oversight. Any concerns were recorded with actions noted.

On the basis on these findings, this area for improvement has been met.

Complaints

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

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 staff team?	4 - Good
3.3 Staffing arrangements are right and staff work well together	4 - Good

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