

Caring Hearts Renfrewshire Support Service

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Type of inspection:
Unannounced

Completed on:
7 March 2025

Service provided by:
Caring Hearts Limited

Service provider number:
SP2013012051

Service no:
CS2013316709

About the service

Caring Hearts Renfrewshire is a registered Support Service with Care at Home. The provider is Caring Hearts Limited. The service is provided for adults and older people living in their own homes within the Renfrewshire area. 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. The service has a manager who is supported by an office team of coordinators and seniors, and a number of employed staff who provide a flexible service to people in their own homes. There were 380 people receiving support at the time of inspection.

About the inspection

This was an unannounced inspection which took place on 3, 4, 5, 6 March 2025 between 09:00 and 17:15. The inspection was carried out by two inspectors 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 21 people using the service and 13 of their family/relatives
- spoke with nine staff and management
- observed practice and daily life
- reviewed documents
- spoke with two visiting professionals.

We also took account of 27 returned Care Inspectorate questionnaires.

Key messages

- People were treated with dignity and respect, and warm relationships between staff and people were evident.
- Staff were committed to their role and worked well together.
- People using the service had their views taken into account to plan improvements to the service.
- Staff were confident and knowledgeable.
- Leaders knew what was working well and where improvements were needed.
- Risk assessments should be clear to ensure staff are guided to support safe practice

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?	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?

4 - Good

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

People and their families told us they were happy with the care and support delivered from Caring Hearts. 'I would say the best thing is the staff, they are wonderful and they give mum a laugh, she always laughs when they come in'. Warm relationships between staff and people were evident. People were confident issues would be addressed if they raised them. Staff made people's visit fun improving their day and this promoted mental wellbeing. People knew staff members well. This was important in building good relationships.

Support was provided with dignity and respect. Relatives appreciated that the staff communicated well with them about their loved one and that office staff were proactive and flexible with support times when requested. A 'Meet the Team' sheet was sent to people's homes, with staff photographs to help familiarise them with who would visit. All visits were scheduled in advance and staff knew their shift patterns. People understood how shift patterns worked and who would be coming that day. This meant people were confident they would be supported by staff who knew them. Daily notes were completed for everyone we visited. Relatives told us this information was important to them. It helped them feel updated and connected to their loved one. People said 'staff are brilliant' and 'the two staff I have now are a great help to me'.

Staff offered meaningful choices around food and drinks, encouraged independence and recorded information when needed. Staff shared information on changes in eating and drinking habits supporting a healthy attitude towards food and drink. People's health benefitted from this.

There was a clear system for administering medication, reporting medication errors, regular audits and staff training. This ensured safe medication practices and gave assurance to people using the service. For people who did not have capacity, the manager understood what was required and had put processes in place to ensure guidance was being followed. This helped to uphold people's legal rights.

Good working relationships with external professionals was evident which supported effective information sharing and good practice. Professionals told us that leaders were responsive to feedback and shared information about changes in people's health and wellbeing when appropriate. This meant people accessed the right healthcare from the right person.

People using the service had a personal plan with person centred information in place, which included information about their medication needs. Some risk assessments required to be clearer with robust instruction for staff and include an escalation process for when people's needs changed. We have made an area for improvement under 'How well is our care and support planned?'

How good is our leadership?

4 - Good

We evaluated this key question as good where several strengths impacted positively on outcomes for people and clearly outweighed areas for improvement. Some improvements were required to ensure consistency for people.

Leaders knew what worked well and where improvements were needed. Management and staff had a clear

vision for the service. There was an open culture, encouraging feedback to drive improvement. The service tracked feedback from people and conducted an annual survey. Staff also provided feedback about how the service could be improved. This meant people using the service and staff could be part of the improvement journey.

The registered manager and operational manager shared oversight of the key areas of service delivery. Governance systems identified risks and ensured actions were taken. The management team were responsive during the inspection.

Managers completed regular quality assurance activities. The service listened to people and acted on suggestions made which contributed to the provision of transparent care. Leaders recognised positive impacts of the care provided to people and captured them effectively. Quality assurance clearly demonstrated where improvements had made a difference to people like having set rotas for staff so that people benefit from better continuity of staff.

Quality assurance systems needed to better identify areas for development within care plans. Personal plans reflected people's views but in some instances required to be updated when a person's needs had changed. Risk assessments were not always clear enough to support safe practice. We have made an area for improvement under 'How well is our care and support planned?' for care plans which is linked to quality assurance and oversight.

A service improvement plan is important to identify and track areas for development, the service lacked an up to date development plan to actively drive forward those improvements. See area for improvement 1.

Partnership working was clear, with good referrals to professionals when needed. Complaints were logged and assigned to managers with priority levels. Actions were taken, including making an apology and additional training for staff. The service was proactive in dealing with complaints when these were received.

Audits were planned and completed regularly covering a variety of areas such as staff supervision, training, complaints, and incidents. Care plan audits were completed monthly. These were discussed during the management meetings and this supported oversight in these key areas.

We could see that staff training was tracked and training compliance was high. People benefitted from being supported by staff that were trained and competent in their role.

Areas for improvement

1. To ensure that people benefit from a culture of continuous improvement, the provider should ensure robust quality assurance systems are utilised to drive improvement. Actions identified from audits and feedback from people experiencing care and other stakeholders should be clearly linked to the service improvement plan.

This is to ensure care and support is consistent with the Health and Social Care Standards (HSCS) which states "I benefit from a culture of continuous improvement, with the organisation having robust and transparent quality assurance processes" (HSCS 4.19) and "I use a service and organisation that are well led and managed." (HSCS 4.23).

How good is our staff team?

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.

Staff were recruited safely. A robust induction was completed by management helping new staff feel well supported into the team. The service had planned a garden BBQ to introduce members of the teams to each other to promote team working. Staff told us they felt confident and it was clear that staff knew their roles well.

Staff we spoke with were committed to their role and fostered good relationships with people using the service. People told us 'staff are trained well and they come on time'. Staff were skilled and knowledgeable about people's needs. Staff told us they felt valued and well supported. The service plans to introduce keyworkers for people to have a dedicated person to speak to. This would help foster better relationships and continuity of care.

Staff were flexible and worked well together, there was a positive team culture within the service. Some staff were more confident than others in their communication. The leadership team had recognised this and provided information to staff such as conversation openers to support their development. They also ensured a good skills mix with more experienced staff being shadowed by newer staff again promoting development. All staff were registered with the appropriate professional bodies such as the Scottish Social Services Council (SSSC) and knew their responsibilities to achieve professional qualifications.

The service assessed the number of staff hours needed to deliver support effectively. Scheduling was efficient, and if people were unhappy with staff or visit timings, alternatives were provided. This meant people's views were heard and showed the service took action to make changes to support better outcomes for people. Staff told us the rota worked for them. Staffing arrangements supported positive outcomes for people.

Compliance rates with mandatory training were good meaning people could be confident staff were well trained in a range of areas. Learning and development for staff was prioritised. Staff were keen to achieve vocational qualifications. They received training on responding to incidents, including falls and allegations of harm or abuse. Staff's understanding of their learning was checked during supervision. There were staff observations of practice carried out regularly in particular with medication administration. People could be assured that staff competence was assessed and monitored.

Regular and effective supervision is essential for staff development. Supervision was planned, constructive and ongoing. Competency checks encouraged staff to reflect on their practice, to discuss their development goals and we saw clear links to the health and social care standards. People who used the service were able to give feedback about the staff that supported them.

Team meetings included daily handovers, office meetings, and area meetings. Team meetings were difficult to plan and these could take place more regularly to benefit both staff and the people they support. Staff were offered both face-to-face and virtual options for meetings which meant they were well attended.

Staff had access to a wellbeing room with uplifting messages and a massage chair, they told us this added to feeling valued and supported by management.

How well is our care and support planned?

4 - Good

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

Personal plans sampled contained person-centred information and had been developed with involvement from people and their families. Staff used the care plans to deliver care and to support people's outcomes. The managers had produced examples of a gold standard aspirational care plans. They aimed to achieve these for everyone, and this work was ongoing. This meant we could see leaders taking action to improve standards in care planning to benefit people.

Most of the personal plans sampled reflected the care being provided. Whilst individual preferences were clear and noted, there were inconsistencies between people's needs and the details contained within a few of the care plans. Some plans required to be updated to reflect where people's needs had changed. There needed to be more detail to direct staff particularly around when staff should escalate concerns. This is to ensure the personal plans fully reflect people's needs and allow staff to deliver care and support more effectively. We saw where staff highlighted changes in people's presentation and had responded flexibly to meet these needs. We had confidence in the care being provided however improved quality assurance processes for care plans would improve their quality and consistency.

Risk assessments were used to keep people safe and showed that people were encouraged to take positive risks. However more information was required in some plans to direct staff in how to deliver safe care in line with people's current needs. A more structured approach for audits and updates of personal plans would be of benefit. Information in care plans that is no longer relevant should be archived. See area for improvement 1.

Future care plans had been added to people's care plans and were being developed. This will help people live well right to the end of their life.

Service reviews were conducted in line with legislation, with seniors and coordinators completing reviews every six months or as needed. The manager tracked reviews, and commentary was added to the system, allowing managers to review and follow up on actions until final completion. People and families told us they were part of these discussions.

We asked that agreements about medication support for people lacking capacity should be carefully recorded in personal plans with supporting legal documentation. The service had requested copies of legal documentation such as power of attorney, where required. This meant that people's legal rights were being considered and upheld.

Areas for improvement

1. To ensure that people's changing needs are met, the provider should ensure that care plans and risks assessments are accurate and up to date. Care plans should give staff clear instruction on how to meet people's needs safely and how to escalate concerns.

This is to ensure care and support is consistent with the Health and Social Care Standards (HSCS) which state that: "My personal plan is right for me because it sets out how my needs are to be met, as well as my wishes and choices" (HSCS 1.15).

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?	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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