

Home Instead Dundee & South Angus Support Service

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Type of inspection:

Unannounced

Completed on:

19 February 2025

Service provided by:

MIAY Limited T/A Home Instead Dundee & South Angus

Service no:

CS2021000306

Service provider number:

SP2021000189



Inspection report

About the service

Home Instead Dundee and South Angus is registered as a support service to provide care at home Dundee and Angus.

The hours of delivery provided by the service vary in relation to the outcomes people choose and are for a minimum of one hour. The service offers a range of personalised services including personal care, shopping, light house work, support with medication as well as companionship and support to attend appointments and go on outings in the local community. During the inspection the service was supporting 24 people.

Home Instead states that their 'goal is to help you and your family to be able to stay at home surrounded by their belongings and precious memories for as long as they possible can'.

About the inspection

This was an unannounced inspection which was made to follow up on a requirement made at our previous inspection on 16 May 2024 which took place on 18 February 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 2 staff and management
- · reviewed documents.

This inspection focussed on following up on a requirement. This report should be read in conjunction with our previous inspection report from 16 May 2024.

Key messages

• The service had ensured that all relevant staff were registered with the appropriate body within time scales and had effective systems in place to monitor 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 g	ood is our leadership?	4 - Good

Further details on the particular areas inspected are provided at the end of this report.

How good is our leadership?

4 - Good

At the previous inspection we made a requirement to ensure that all relevant staff were registered with the appropriate organisation. This was because we had concerns that not all staff had appropriate Scottish Social Services Council registration, despite this being highlighted as an action within an internal complaints investigation.

We found that all relevant staff were registered appropriately and within time scales. A system was in place to check all staff's registration status regularly and reminders were sent to staff to prompt them with renewals within timescales.

The service provider has responded effectively and as a result of the improvements made and the impact this had on quality assurance we regraded this key question as good.

(For more details see under 'What the service has done to meet any requirements we made at or since the last inspection').

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

Requirements

Requirement 1

By 31 July 2024, the provider must make proper provision for the health, welfare and safety of people using the service. To do this, the provider must evidence that all required staff have registered with the appropriate body within statutory timescales.

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 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 requirement was made on 16 May 2024.

Action taken on previous requirement

This requirement was made because we had concerns that a member of the team did not have appropriate Scottish Social Services Council (SSSC) registration, despite this being highlighted as an action within an internal complaints investigation.

The service now had a system in place to ensure the registration of all relevant staff. All relevant staff were now registered appropriately, which meant people were protected by staff following the SSSC Codes of

Practice in their daily work. The provider's process ensured that applications were tracked and followed up. Registrations were checked on a monthly basis to ensure that staff were appropriately registered. In addition, reminders were sent to staff when dates for renewals were approaching.

This process helped to ensure compliance and timely registration of all employees. Effective oversight of staff's registration status was now in place and we were satisfied that this requirement has been met.

Met - within timescales

Complaints

There have been no complaints upheld since the last inspection. Details of any older upheld complaints are published at www.careinspectorate.com.

Inspection report

Detailed evaluations

How good is our leadership?	4 - Good
2.2 Quality assurance and improvement is led well	4 - Good

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