

Home Care Service - Care at Home Support Service

Home Care -Care at Home Council Headquarters High Street Elgin IV30 1BX

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Type of inspection:

Unannounced

Completed on:

21 November 2023

Service provided by:

The Moray Council

Service provider number:

SP2003001892

Service no:

CS2004085958



About the service

Home Care Service - Care at Home is provided by Moray Council. It covers the whole of Moray and the office is based in Elgin.

The service aims to support and enable people to live independently within their own homes, for as long as they are able and it is safe to do so.

About the inspection

This was an unannounced inspection which took place on 9, 10, 13, 14 and 15 November 2023. The inspection was carried out by three 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 34 of their family/friends/representatives
- · spoke with 116 staff and management
- · observed practice and daily life
- · reviewed documents.

Key messages

- Most people were very happy or happy with their standard of care. They told us their carers mostly turned up on time and had enough time to meet their needs.
- People told us they were treated with respect and dignity.
- People had confidence in their care staff because they were knowledgeable, competent and skilled.
- The service had a very good dedicated and experienced management team who worked hard to improve the quality of care.

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?	5 - Very Good
How good is our leadership?	5 - Very Good
How good is our staff team?	5 - Very Good
How well is our care and support planned?	5 - Very 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 the care provided and how these supported positive outcomes for people, therefore we evaluated this key question as very good.

We found the service had significant strengths. Fifty-two people told us they were very happy or happy with their standard of care. Most people felt staff turned up on time and had enough time to meet their needs. They felt the staff were respectful and attentive and knew how to provide their care according to their preferences. People expressed having confidence in the service. People told us:

- 'We are very lucky as a family for the care our (relative) receives from all the carers that come into (our relative's) home each and every one of them are very special individuals, very attentive and very hard working and we don't know what we would do without them they are all one in a million.'
- 'The care my (relative) receives is 5*. The care team are very special people with hearts of gold.'
- One service user described the staff as, 'quardian angels.'
- 'Excellent standard of care received.'
- 'The support my (relative) receives from the team is invaluable as it enables (them) to continue living in (their) own home. The home carers are professional, patient, sensitive to (my relative's) needs and are extremely kind.'
- 'Nae complaints. They're all good.'
- 'They (carers) are all very nice, they can't do enough for you.'

Occasionally, people described challenges with their care and we found the service was very good at working with people to find solutions, where this was possible. For example, changing the times of care, how the care was delivered and/or increasing staff knowledge and training. However, sometimes the solution was not within the power of the service to give. Additionally, sometimes the service found upon investigation that they had made a mistake. On the rare occasion this happened, they apologised and put proactive measures in place to prevent it happening again. This was very good practice and gave people confidence that they could raise issues and complain and action would be taken. We did pass on anonymised feedback to the service for the small number of issues people raised when speaking with us and the manager agreed to follow these up.

The service had good contingency measures they could action quickly during inclement weather or infectious outbreaks. This meant the service was able to meet people's needs and keep people safe during challenging times. One service user told us during a recent storm when the roads to their house were closed, the carers still managed to reach them on foot and they were very relieved and pleased to see them.

Medication was well-managed, administered according to the prescribers' guidelines and people's preferences. Staff were good at quality assuring their own work by noticing any discrepancies on the medication administration record (MAR), for example, a missed signature and then taking the necessary actions to ensure people were given their medication as prescribed. This helped to keep people safe as any

potential missed doses of medication were recognised early on and medical advice sought as to the next steps. It also promoted people's health and wellbeing.

We found the service was flexible and creative in the way it supported people to take their medication in the way that was right for them. It carefully balanced people's rights versus the risks, which gave people more control and choice over how they were supported with their medication.

Staff were very good at recognising and reporting potential adult support and protection (ASP) matters, which helped to keep people safe. We could see that the service ensured all of these referrals were followed-up and concluded according to ASP guidelines. It is important, however, that the service remembers to inform the Care Inspectorate of all ASP matters. The service agreed to do this from now on. As there was no impact on people's experiences or outcomes we decided not to raise it as an area for improvement.

How good is our leadership?

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.

The service had an experienced and dedicated leadership team who fully understood the care at home model and the challenges facing the sector. Their value base drove their decision making and ensured all areas for improvement kept the needs and wellbeing of people at the centre. This resulted in very good outcomes for people. For example, they managed to reintroduce a comprehensive induction programme for new staff, which equipped staff with the knowledge and expertise they required to provide very good quality care. People told us that sometimes they had different carers, but this did not bother them because every carer who attended to their needs had the knowledge and professionalism to know how to care for them well. This is particularly important because of the recruitment challenges currently facing the care sector.

They had well-established governance arrangements in place for the day-to-day functions of the service and these had improved expected standards of performance in a reliable and sustainable way. These fed into their improvement plan and the leaders were well aware of their strengths and areas that required further development. This allowed them to focus their resources on priority areas. There were several projects undergoing consideration which could provide innovative and creative solutions to the difficulties facing the care sector and improve people's outcomes. We look forward to following these up at the next inspection.

On the whole feedback from staff regarding their management team was very positive. Eighty-eight staff described a supportive management structure, with line managers listening to their views, supporting their training and development and providing help and guidance when required. However, 20 staff raised issues about a lack of communication and support from their direct line manager. These views (which were anonymous) were fed back to the senior management team who agreed to investigate.

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.

Each job role had a clear structure for learning and training pathway attached to it. This ensured staff had the knowledge and skills to do their job well. The service was very good at evaluating and assessing staff's

knowledge and competency and taking action to address any shortfalls. From the staff surveys it was clear to see that the newer staff who had the more thorough two-week induction felt better prepared and more confident than some of their colleagues who had a shorter induction. The management team were aware of this and were in the process of identifying what additional training was now required for those staff, so that any gaps in knowledge would be addressed. This will support the staff to provide good quality care.

There was clear focus on staff values and the Scottish Social Services Council (SSSC) Code of conduct. This promoted more person-centred care and professional practice, with 53 service users and relatives who responded to us feeling that they were treated with respect and dignity by a professional workforce.

Supervisions were being used effectively to support staff development and their learning needs. Where it was identified that staff needed additional training and support this was provided and followed up by reviewing staff practice via the quality assurance system, for example, spot checks and observations of practice. This ensured that learning was put into practice, which promoted good outcomes for people.

When required we could see that additional person specific training was put in place which helped staff understand people's unique needs and how best to meet them. This was done as part of a multi-disciplinary team and was regularly evaluated with additional oversight and clear reporting procedures so that staff could seek more guidance if required. This resulted in good outcomes for people. For example, reducing someone's stress and distress or managing someone's medical condition well, thereby enabling them to remain in their own home.

How well is our care and support planned?

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.

The service had recently redeveloped the care plan format and this seemed to be working well. Each care plan had a short person-centred section at the beginning which helped the reader get to know and understand the person before detailing their needs and preferences. The care plan had many sections and it was being used smartly and proportionately, so that only the sections that applied to the person were completed. We could see the care plans were written in a person-centred manner which ensured people's wishes and preferences were paramount. We saw some very good work whereby the service had supported people to uphold their rights by balancing people's wishes versus the potential risks.

The plans were regularly reviewed, evaluated and updated, which meant they stayed relevant to people's current needs.

Staff told us they could easily access the care plans and that they used them to direct how they supported people. This ensured people's care was consistent and delivered the same way regardless of which carer was available.

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

The provider should review the service agreement for people who use the care at home service and explain what further assessments may take place should their needs change. This should include informing people and their representative this may result in a change of service provision and reasons provided for this. When there are changes to the service provision, the service agreement should be updated.

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 13 October 2022.

Action taken since then

The provider had reviewed the support plan, risk assessment and review documentation which included the service agreement. We found that when there were changes to service provision the support plan had been updated to reflect this.

This area for improvement has been met.

Previous area for improvement 2

The provider should ensure that when the care at home service is not being provided for any reason as per the service agreement and plan of care, a risk assessment is undertaken. This should include consideration of the person's health, well being and associated risks of the service not being provided. It should also take account of a person's carer's needs. The risk assessment should be evident to escalate a person's situation to the lead agency for further action and ensure there is a follow up process in place.

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 13 October 2022.

Action taken since then

From the sample of care plans we analysed we found the provider had undertaken risk assessments which included what should happen in the event that care could not be provided. Likewise, it also considered the risk to the supported person. There was a process in place to escalate unmet needs to the lead agency, usually the care manager.

This area for improvement has been met.

Previous area for improvement 3

To ensure people experience stability in their care and support from people who know their needs, choices and wishes, even if there are changes in the service or organisation, the service should:

- Progress their plans to change the way rotas are allocated.
- Move to smaller teams.
- Progress the personal outcomes based approach as soon as possible to improve stability and consistency in people's care and support.

This is to ensure care and support is consistent with the Health and Social Care Standards (HSCS) which state that:

'People know who provides their care and support on a day to day basis and what they are expected to do' (HSCS 3.11); and

'It is important that people can build a trusting relationship with the person supporting and caring for them in a way that they both feel comfortable with' (HSCS 3.8).

This area for improvement was made on 2 July 2020.

Action taken since then

The service had made progress towards meeting this area for improvement (AFI) and therefore we have assessed it as met. Albeit, since the AFI was made there have been significant challenges in the care sector making some of the improvements difficult due to the shortage of care staff. There has been progress made towards a personal outcomes approach and people's outcomes were being measured. The service was undergoing further improvement work which included using a specific outcomes measuring tool. We look forward to seeing this in practice. However, the move to smaller teams was not possible due to staff shortages.

This area for improvement has been met.

Previous area for improvement 4

In order to ensure people's physical, emotional, social and psychological needs are being met and staff know what they are expected to do, for example in people's skin or pressure area care, the provider should:

- Review the title and layout of their 'service delivery plan' to ensure the plan sets out how people's care needs will be met.
- Review the process and regularly audit people's care plans to ensure care planning informs all aspects of current and support experienced by people.
- Include feedback about the results to staff to support continuous improvement.

This is to ensure care and support is consistent with the Health and Social Care Standards (HSCS) which state that:

'Any treatment of intervention that I experience is safe and effective' (HSCS 1.24); and

'My personal 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 2 July 2020.

Action taken since then

Care plans had been fully redeveloped and now included how people's care needs were to be met. People's care plans were audited and found, on the whole, to be of a very good standard.

This area for improvement has been met.

Previous area for improvement 5

To ensure people can be confident that their medication was administered safely and their wellbeing promoted, the service should:

- Introduce body maps for recording the use of topical medications.
- Following administration of people's 'as and when' medications, evaluation of the effect should be undertaken and recorded.
- Increase the numbers of audits of completed Medicine Administration Record (MAR) in light of the multiple MAR sheets in use.
- Complete the review of the Health and Social Care Moray Medication Management Guidelines within the timescale advised by the service.

This is to ensure care and support is consistent with the Health and Social Care Standards (HSCS) which state that:

'I experience high quality care and support based on relevant evidence, guidance and best practice' (HSCS 4.3).

This area for improvement was made on 2 July 2020.

Action taken since then

Medication practice had been reviewed and included topical body maps, as well as a clear process for administering, 'as and when required' medication.

This area for improvement has been met.

Previous area for improvement 6

The service should seek guidance and support from local health professionals about the potential to record all pressure-relieving device pump settings in people's care plans. This will enable the care workers to check the setting as part of people's care and support and therefore reduce the risk of an incorrect setting which can put a person at risk of pressure damage.

This is to ensure care and support is consistent with the Health and Social Care Standards (HSCS) which state that:

'Any treatment of intervention that I experience is safe and effective' (HSCS 1.24).

This area for improvement was made on 12 February 2020.

Action taken since then

People's care plans included all pressure relieving device settings and care staff were aware that they needed to check the pump settings during their visits.

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?	5 - Very Good
1.1 People experience compassion, dignity and respect	5 - Very Good
1.2 People get the most out of life	5 - Very Good
1.3 People's health and wellbeing benefits from their care and support	5 - Very Good

How good is our leadership?	5 - Very Good
2.2 Quality assurance and improvement is led well	5 - Very Good

How good is our staff team?	5 - Very Good
3.2 Staff have the right knowledge, competence and development to care for and support people	5 - Very Good

How well is our care and support planned?	5 - Very Good
5.1 Assessment and personal planning reflects people's outcomes and wishes	5 - Very Good

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