

Inspection report

Highland Home Carers Ltd - Housing Support Service Housing Support Service

3 Stadium Road
Inverness IV1 1FF

Inspected by: John H Corbett
(Care Commission Officer)

Type of inspection: Announced

Inspection completed on: 19 February 2009

Service Number

CS2003054082

Service name

Highland Home Carers Ltd - Housing Support Service

Service address3 Stadium Road
Inverness IV1 1FF**Provider Number**

SP2004005429

Provider Name

Highland Home Carers Ltd

Inspected ByJohn H Corbett
Care Commission Officer**Inspection Type**

Announced

Inspection Completed

19 February 2009

Period since last inspection

12 months

Local Office AddressPavilion 5, Castle House, Fairways, Inverness IV2
6AA

Introduction

Highland Home Carers Ltd was registered to provide Care at Home and Housing Support Services. The services were first registered with the Care Commission in August 2004.

The service mission statement reflected the aims and objectives of the service:

"Highland Home Carers aims to provide a flexible, quality home care and support service, enabling individuals to remain in their own home with assistance in maintaining their current lifestyle and promoting independence where possible"

Based on the findings of this inspection the service has been awarded the following grades:

Quality of Care and Support - 4 - Good

Quality of Staffing - 4 - Good

Quality of Management and Leadership - 4 - Good

This inspection report and grades represent the Care Commission's assessment of the quality of the areas of performance which were examined during this inspection.

Grades for this care service may change following other regulatory activity. Please refer to the care services register on the Care Commission's website (www.carecommission.com) for the most up-to-date grades for this service.

Basis of Report

The Annual Return

The service submitted a completed Annual Return as requested by the Care Commission.

The Self-Assessment Form

The service submitted a self-assessment form as requested by the Care Commission

Views of service users

The views of service users were gauged by examination of the results of the recent evaluation survey carried out by the provider - 122 returns were examined. The results of the provider's Social Audit were also examined in detail in terms of the service user perspective, as well as the Care Commission's service user / carer questionnaires returned.

The results confirmed a largely positive view of the service although some key themes emerged regarding communication between the service provider, staff, and service users / carers. There were issues surrounding information exchange between staff and service users / carers, and where service users had commented on having different carers allocated on a frequent basis.

Sample of comments made - See section marked: "Views of service users"

Regulation Support Assessment

The inspection plan for this service was decided after a Regulation Support Assessment (RSA) was carried out to determine the intensity of inspection necessary. The RSA is an assessment undertaken by the Care Commission Officer (CCO) which considers complaints activity, changes in the provision of the service, nature of notifications made to the Care Commission by the service (such as absence of a manager) and action taken upon

requirements. The CCO will also have considered how the service responded to situations and issues as part of the RSA.

This assessment resulted in this service receiving a low RSA score and so a low intensity inspection was required. The inspection was based on the relevant Inspection Focus Areas and associated National Care Standards, recommendations and requirements from previous inspections and complaints or other regulatory activity.

Staff at inspection

The inspection was carried out by Harry Corbett, Care Commission Officer.

Evidence

The Care Commission Officer met with the service manager, and coordinator, and examined policies and procedures and documentation, relating to previous recommendations. The Commission Officer also examined the results of 122 service user evaluation surveys, the results of an external Social Audit carried out on the service, and took into account responses from Care Commission questionnaires returned from service users and carers. The Commission Officer also conducted random telephone interviews with service staff.

Inspection Focus Areas and links to Quality Themes and Statements for 2008/09

Details of the inspection focus and associated Quality Themes to be used in inspecting each type of care service in 2008/09 and supporting inspection guidance, can be found at:

<http://www.carecommission.com/>

Fire Safety Issues

The Fire (Scotland) Act 2005 introduced new regulatory arrangements in respect of fire safety, on 1 October 2006. In terms of those arrangements, responsibility for enforcing the statutory provisions in relation to fire safety now lies with the Fire and Rescue service for the area in which a care service is located. Accordingly, the Care Commission will no longer report on matters of fire safety as part of its regulatory function, but, where significant fire safety issues become apparent, will alert the relevant Fire and Rescue service to their existence in order that it may act as it considers appropriate. Further advice on your responsibilities is available at www.infoscotland.com/firelaw

Action taken on requirements since last Inspection

It had been recommended that the complaints policy, procedure and recording was reviewed and updated to ensure it was robust, fit for purpose and demonstrated resolution.

This was in order to comply with The Regulation of Care (Requirements as to Care Services) (Scotland) Regulations 2002 (SSI 2002/114) - Regulation 25

This recommendation had been carried out.

Comments on Self Assessment

The self assessment had been completed online and assisted the inspection and grading process.

View of Service Users

The responses examined indicated a generally positive view of the service, but certain issues

were identified with regard to communication and staff placement.

The difficulties with communication centred around the main office, and were commented on by service users, carers and staff. Lack of information was cited with regard to changes in carer provision, staff rotas and in identifying changing care needs. A lack of assessment information was highlighted by staff as being problematic, on occasion.

In terms of staff placement, where service users were provided with the same regular carer / carers there were fewer issues, and a higher level of satisfaction. The difficulties arose if the carers changed frequently or if service users / carers were not kept informed.

Sample of comments made were;

"it is important to me to have the same carer" (service user)
"the only problem I have is different carers every day" (service user)
"I'd like to keep the same carers"(service user)
"better communication between client, carers and management"(service user)
"better communication...would like to know who I'm speaking to when I phone the office"(relative)
"please phone when changes arranged.....for peace of mind"(service user)
"constant changes in carers is upsetting"(relative)
"there seems to be a lack of communication between the office and carers" (relative)
"Sometimes we have no idea who is going to turn up....not ideal"(relative)

Service user comments examined were in the majority, largely positive, and comments ranged from;

"happy with the team, they're like my friends, and are reliable, friendly, and hard working"(relative)
"the care you get is first class"
"service I get is excellent"
"personal preferences understood and met satisfactorily"
"easy and flexible...tailored to my needs"
"all the girls are very pleasant and good at what they do"
"carers all seem to have common sense, used when needed, and I'm grateful"
"the ladies who do personal care...are so kind, they are truly like an extension to our family, making everything relaxed and happy for all concerned" (relative)
"if it were not for this excellent service, I would not be able to keep.....at home" (relative)

View of Carers

Carers' responses were largely positive with regard to the quality of care received, but the issues regarding communication and placement of staff did recur in comments they made.

Quality Theme 1: Quality of Care and Support

Overall CCO Theme Grading: 4 - Good

Statement 1: We ensure that service users and carers participate in assessing and improving the quality of the care and support provided by the service.

Service Strengths

The quality of service user and carer participation in assessing and improving the quality of the care and support provided by the service was good.

The service provider incorporates service user participation into service delivery, without direct reference to it within the mission statement or core objectives, though it does state that it was "doing our utmost to provide the service required by the user and tailored to their needs".

The service provider had undertaken a substantial Social Audit as part of a pilot run by the Social Audit Network, dealing with selected groups of stakeholders, which included service users, carers, staff and purchasers. The service user returns demonstrated a healthy 57% response.

There was evidence that service user participation and other stakeholder involvement had led to changes in service delivery. Action points had been identified from the audit and were in the process of being followed up.

Service user feedback was obtained via daily contact with support staff, and direct access to the central administration office. Feedback was also obtained through individual and collective feedback - via support planning, reviews, surveys and questionnaires.

Service staff had undertaken training as part of their induction procedure, which included professional values and issues, with regard to service user involvement, and dealing with service users.

There was evidence that service user's views had effected change in the service. Issues raised from the recently conducted service user's survey had led to direct action being taken to deal with key issues - an example being whereby communication issues were being dealt with by an internal staff appointment in order to research the issue.

The service's Quality Assurance systems showed involvement of service users / carers, through surveys. The most recent survey had a healthy return of 122 forms at the time of inspection.

There was a user-friendly introduction to service for new service users. Potential service users were provided with an information package and a home visit arranged by assessment coordinators.

There was evidence of personal involvement of the service users, their family and carers in the development of individual support plans. Personal support plans were reviewed a minimum of once every six months, and more frequently if required.

Service users were assisted with access to independent advocacy and directed to other

support services where necessary.

A copy of the most recent inspection report was included within the information pack.

Service user had clearly evidenced mechanisms within the service to express their views. There was daily access to office staff and access available to the service manager.

The complaints system was clear, understandable, user-friendly, fair, and robust. There had been no complaints received by the Care Commission.

There were 5 internal complaints examined at inspection, which demonstrated appropriate investigation and resolution by the service.

Service users were made aware of how to complain to the Care Commission through the information pack.

Areas for Development

CCO Grading

4 - Good

Number of Requirements

0

Number of Recommendations

0

Statement 3: We ensure that service user's health and wellbeing needs are met.

Service Strengths

The quality of care in terms of meeting health and wellbeing needs was good.

The service expected a Single Shared Assessment as a minimum standard of information from referral agencies, which is good practice.

On referral, staff visited the service user, and or carer, and assessment was carried out with them. Following initial assessment, review was ongoing. Risk assessment was carried out as required.

Support / care staff were provided with basic contact information, a current care plan, client checklist, daily tasks, communication needs, and medication records. There was a minimum period of 6 months allowed between reviews, once care planning had been established.

A written record existed which enabled staff to have continuity to support the service user in their health and wellbeing. Staff ensured appropriate information was passed on to relief staff, in order to maintain service user's health and wellbeing. Staff utilised communication

sheets to update information on the service user's needs as they changed.

Staff were supported by the availability of nursing staff within the organisation for specific advice regarding care needs. Staff training provided was aimed at meeting the service user's individual identified needs.

Core training provided the baseline information to safely meet the service user's needs. This included a formal induction process, which dealt with de-escalation techniques, fire safety, first aid, moving & handling, professional issues, rights and responsibilities.

Further training was available to meet a range of specific need - palliative care, catheter care, pressure area care, multiple sclerosis, cerebral vascular accident, epilepsy, medication, catheter care, MRSA, autism, record keeping, and the protection of vulnerable adults.

Staff had developed links with the service user's GP and other primary care, and support services locally.

Service users knew how to complain and were encouraged to inform the service of suggestions / concerns.

The service user's key health and support personnel were recorded within their support plan.

Staff recorded and investigated any accidents or incidents, including restraint.

A confidentiality policy was in place.

A complaints procedure is in place which includes access to advocacy - the service responds to complaints and concerns.

There had been no complaints recorded by the Care Commission.

Areas for Development

The process of care planning review should be formalised so that a constant overview of the care packages provided is maintained.

CCO Grading

4 - Good

Number of Requirements

0

Number of Recommendations

0

Quality Theme 2: Quality of Environment

Overall CCO Theme Grading:

Quality Theme 3: Quality of Staffing

Overall CCO Theme Grading: 4 - Good

Statement 1: We ensure that service users and carers participate in assessing and improving the quality of staffing in the service.

Service Strengths

The quality of service user and carer participation in assessing and improving the quality of staffing in the service was good.

The service provider incorporates service user participation into service delivery, without direct reference to it within the mission statement or core objectives, though it does state that the service was: "doing our utmost to provide the service required by the user and tailored to their needs".

Service user had clearly evidenced mechanisms within the service to express their views. There was daily access to office staff and access available to the service manager.

The service provider had undertaken a substantial Social Audit as part of a pilot run by the Social Audit Network, dealing with selected groups of stakeholders, which included service users, carers, staff and purchasers.

The service user returns demonstrated a healthy 57% response. The social audit evaluation asked service users specific questions regarding staff.

There was evidence that service user participation and other stakeholder involvement had led to changes in service delivery. Action points had been identified from the audit and were in the process of being followed up

Service user feedback was obtained via daily contact with support staff, and direct access to the central administration office. Feedback was also obtained through individual and collective feedback - via support planning, reviews, surveys and questionnaires.

Service staff had undertaken training as part of their induction procedure, which included professional values and issues, with regard to service user involvement, and dealing with service users.

There was evidence that service user's views had effected change in the service. Issues raised from the recently conducted service user's survey had led to direct action being taken to deal with key issues - an example being whereby communication issues were being dealt with by the appointment of a consultant to examine the issue.

The service's quality assurance systems showed involvement of service users / carers, through surveys. The most recent evaluation survey had a healthy return of 122 forms at the time of inspection. This evaluation did not specifically ask questions regarding staffing and this should be considered.

There was a user-friendly introduction to service for new service users. Potential service users were provided with an information package and a home visit arranged by assessment coordinators.

On referral, staff visited the service user, and or carer, and assessment was carried out with them. Following initial assessment, review was ongoing, which included compatibility of the staff member and service user relationship.

A written record existed which enabled staff to have continuity to support the service user in their health and wellbeing. Staff ensured appropriate information was passed on to relief staff, in order to maintain service user's health and wellbeing. Staff utilised communication sheets to update information on the service user's needs as they changed.

Service users were assisted with access to independent advocacy and directed to other support services where necessary.

A copy of the most recent inspection report was included within the information pack.

The complaints system was clear, understandable, user-friendly, fair, and robust. There had been no complaints received by the Care Commission.

There were 5 internal complaints examined at inspection, which demonstrated appropriate investigation and resolution by the service.

Service users were made aware of how to complain to the Care Commission through the information pack.

Areas for Development

CCO Grading

4 - Good

Number of Requirements

0

Number of Recommendations

0

Statement 2: We are confident that our staff have been recruited, and inducted, in a safe and robust manner to protect service users and staff.

Service Strengths

The quality of the recruitment and induction process was good.

Staff were recruited and selected through a robust process which included:

Formal application, interview, references, and Enhanced Disclosure check.

Staff members who had a relevant qualification were vetted through Scottish Social Services Council or the Nursing & Midwifery Council.

Staff spoken with, confirmed that they had undergone some form of induction programme which included professional issues & values, policies & procedures, SSSC Code of conduct, National Care Standards, health & safety, legal issues, risk assessment, infection control, food hygiene, and medication.

Induction was formally recorded, and job descriptions and contracts of employment were issued to staff.

The service had in place the appropriate records in place to meet the statutory regulations - Regulation 19(2)

The service had the appropriate policies and procedures to meet legal requirements: Staffing & Recruitment, Health & Safety, Medication, Restraint, Fire Safety, Risk Management, Infection Control, Protection of Vulnerable Adults

Staff knew how to put these policies and procedures into practice, and had training to review these.

The service had an operational staff development strategy and a training plan for staff.

The staff demonstrated awareness of, and practised anti discriminatory and anti-harassment policies and procedures.

The service had in place the appropriate records in place to meet the statutory regulations in terms of:

Service users

Staff

Accident & Incident recording

Complaints Policy & Procedure and records

Notifications to the Care Commission and Scottish Social Services Council

Staff knew how to maintain these records and follow the appropriate procedures in terms of reporting.

Areas for Development

Individual staff development should link into the staff development strategy through the framework for staff supervision, continuous professional development, and education and training programmes.

CCO Grading

4 - Good

Number of Requirements

0

Number of Recommendations

0

Quality Theme 4: Quality of Management and Leadership

Overall CCO Theme Grading: 4 - Good

Statement 1: We ensure that service users and carers participate in assessing and improving the quality of the management and leadership of the service.

Service Strengths

The quality of service user and carer participation in assessing and improving the quality of management and leadership by the service was good.

The service provider incorporates service user participation into service delivery, without direct reference to it within the mission statement or core objectives, though it does state that it was "doing our utmost to provide the service required by the user and tailored to their needs".

The service provider had undertaken a substantial Social Audit as part of a pilot run by the Social Audit Network, dealing with selected groups of stakeholders, which included service users, carers, staff and purchasers. The service user returns demonstrated a healthy 57% response.

There was evidence that service user participation and other stakeholder involvement had led to changes in service delivery. Action points had been identified from the audit and were in the process of being followed up

Service user feedback was obtained via daily contact with support staff, and direct access to the central administration office. Feedback was also obtained through individual and collective feedback - via support planning, reviews, surveys and questionnaires.

Service staff had undertaken training as part of their induction procedure, which included professional values and issues, with regard to service user involvement, and dealing with service users.

There was evidence that service user's views had effected change in the service. Issues raised from the recently conducted service user's survey had led to direct action being taken to deal with key issues - an example being whereby communication issues were being dealt with by the appointment of a consultant to research the issue.

The service's Quality Assurance systems showed involvement of service users / carers, through surveys. The most recent survey had a healthy return of 122 forms at the time of inspection, which included specific questions on management of the service.

There was a user-friendly introduction to service for new service users. Potential service users were provided with an information package and a home visit arranged by assessment coordinators.

Service users were assisted with access to independent advocacy and directed to other support services where necessary.

A copy of the most recent inspection report was included within the information pack.

Service user had clearly evidenced mechanisms within the service to express their views. There was daily access to office staff and access available to the service manager.

The complaints system was clear, understandable, user-friendly, fair, and robust. There had been no complaints received by the Care Commission.

There were 5 internal complaints examined at inspection, which demonstrated appropriate investigation and resolution by the service.

Service users were made aware of how to complain to the Care Commission through the information pack.

Areas for Development

The service provider's own Social Audit had highlighted communications being an issue with regard to the management of the service.

This was reflected in evaluation surveys, Care Commission questionnaires involving service users, carers and staff, and was confirmed in telephone interviews with staff.

The service provider was actively pursuing this particular issue via the use of a consultant and the service provider should address the outcomes.

CCO Grading

4 - Good

Number of Requirements

0

Number of Recommendations

0

Statement 4: We use quality assurance systems and processes which involve service users, carers, staff and stakeholders to assess the quality of service we provide.

Service Strengths

The quality of service user and carer participation in assessing the quality of service provided by the service was very good.

The service provider incorporates service user participation into service delivery, without direct reference to it within the mission statement or core objectives, though it does state that it was "doing our utmost to provide the service required by the user and tailored to their needs".

The service provider had undertaken a substantial Social Audit as part of a pilot run by the Social Audit Network, dealing with selected groups of stakeholders, which included service users, carers, staff and purchasers. The service user returns themselves demonstrated a healthy 57% response.

The Social Audit demonstrated involvement of all the key stakeholders within the service:

The service users (250) employees (124), board members (6), purchasers (Highland Council, private service users and families) and partner (the Baxi Partnership Ltd).

A range of methods were used - questionnaires, semi-structured interviews, and focus groups to consult with the various stakeholders.

There was evidence that service user participation and other stakeholder involvement had led to changes in service delivery. Action planning had followed the outcomes of the audit and led to service change and re-evaluation of service delivery.

Service user feedback was also obtained informally via daily contact with support staff, and direct access to the central administration office. Feedback was also obtained through individual and collective feedback - via support planning, reviews, surveys and questionnaires.

There was evidence that service user's views had effected change in the service. Issues raised from the recently conducted service user's survey had led to direct action being taken to deal with key issues - an example being whereby communication issues were being dealt with by the appointment of a consultant to research the issue.

The service's Quality Assurance systems showed involvement of service users / carers, through surveys. The most recent survey had a healthy return of 122 forms at the time of inspection.

There was a user-friendly introduction to service for new service users. Potential service users were provided with an information package and a home visit arranged by assessment coordinators.

There was evidence of personal involvement of the service users, their family and carers in the development of individual support plans. Personal support plans were reviewed a minimum of once every six months, and more frequently if required, giving service users / family the opportunity to feedback.

Service users were assisted with access to independent advocacy and directed to other support services where necessary.

A copy of the most recent Care Commission inspection report was included within the information pack.

Service user had clearly evidenced mechanisms within the service to express their views. There was daily access to office staff and ready access available to the service manager.

The complaints system was clear, understandable, user-friendly, fair, and robust. There had been no complaints received by the Care Commission.

There were 5 internal complaints examined at inspection, which demonstrated appropriate investigation and resolution by the service.

Service users were made aware of how to complain to the Care Commission through the information pack.

Areas for Development

The service provider's own Social Audit and evaluations had highlighted communications being an issue with regard to the quality of the service.

This was reflected in evaluation surveys, Care Commission questionnaires involving service users, carers and staff, and was confirmed in telephone interviews with staff.

The service provider was actively pursuing this particular issue via the use of a consultant and the service provider should address the outcomes.

CCO Grading

5 - Very Good

Number of Requirements

0

Number of Recommendations

0

Regulations / Principles

National Care Standards

Enforcement

There has been no enforcement action against this service since the last inspection.

Other Information

The Care Commission now publishes extended service information on the care services section of the website. This includes service details, provider details, and easy access to a number of previous inspection reports, brief information about enforcement action and information about upheld or partially upheld complaints. Readers can request more detailed information by contacting the Care Commission

Requirements

No requirements are made as a result of this inspection

Recommendations

No recommendations are made as a result of this inspection

John H Corbett

Care Commission Officer