

Professional Carers Support Service

Professional Carers
Unit 3B
55 The Loan
South Queensferry
EH30 9SD

Telephone: 0131 319 1968

Type of inspection:
Announced (short notice)

Completed on:
21 December 2022

Service provided by:
Professional Carers (Wirral) Ltd

Service provider number:
SP2015012481

Service no:
CS2015336898

About the service

The service provides care at home to adults in Northwest Edinburgh with its office based at South Queensferry. The service was registered with the Care Inspectorate on 29 May 2019 and managed by Professional Carers (Wirral) Ltd. At the time of the inspection the service offered care and support to 65 people.

About the inspection

This inspection took place on 14 and 20 December 2022 after 24 hours notice to the service. The inspection was conducted by one inspector from the Care Inspectorate. To prepare for the inspection we reviewed information about this service. This included registration information, information submitted by the service and intelligence gathered since the last inspection.

We evaluated how well people's health and wellbeing was supported, the infection protection and control practices, the quality of management as well as people's personal plans.

To inform our evaluation we:

- spoke with 10 people using the service and five relatives and two professionals working with the service
- spoke with seven care staff, two office staff and the manager
- observed how well care staff supported people
- visited the office to see how it was run
- reviewed documents and electronic records.

Key messages

- People were satisfied with the quality of the care and support received in their homes.
- Staff interacted warmly and respectfully with people.
- People had regular care staff who were on time.
- Staff followed infection, protection and control guidance well.
- Staff were well trained and supported.
- Managers were competent and approachable.
- People's personal plans were thorough and up to date.

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 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 evaluated the service as operating at a very good level for this key question. There were significant strengths with the care provided and how this supported positive outcomes for people.

People told us that staff interacted warmly and respectfully with them. Staff had conversations with people, were interested in their lives and people felt listened to and enjoyed the company of the care staff. People did not feel rushed by staff when being supported. Care and support were carried out in a dignified way with personal preferences respected. Techniques used to assist people to mobilise were undertaken in a safe and reassuring way.

The staff were regular and knew people well. Late or missed visits were not an issue; the office would call if care staff were running late. There was electronic access for service users and relatives to the daily care notes and real time information regarding visiting care staff. People we spoke to were satisfied with the quality of the care and support received in their homes. People's comments included "care was fabulous, was wary at first, but these girls are great, they are like friends, they have been a blessing" and "they go all the way, more than enough, they have a chat with me." Relatives' comments included "they do treat her very respectfully and they are very kind" and "they give her great care and attention."

Meal preparation involved people choosing what they wanted to eat and drink, enjoyed in an unhurried way. When there were concerns about a person's food and drink intake, people were encouraged and regularly monitored. Medication administration was well organised with regular audits by management and appropriate training for staff. Managers observed staff practice regularly to assess their competence. This ensured that people experienced safe and effective medication.

There was a good supply of personal protective equipment such as masks, gloves and aprons (PPE) for staff. We observed and people told us that staff used PPE appropriately. Managers observed staff practice regularly to assess their competence in wearing PPE correctly and hand washing. Staff had completed training for safe infection, prevention and control practices. Covid-19 testing of staff and self-isolation periods (if have a positive test) were taking place in line with current guidance. Staff cleaned and tidied up after themselves. Relatives told us "they always wear gloves and aprons and wash their hands first" and "they are still wearing their protective clothing." These measures aided the continued protection of people and staff from harm.

How good is our leadership?

5 - Very Good

We evaluated the service as operating at a very good level for this key question. There were significant strengths with the leadership and quality assurance.

People considered that the office staff were responsive to any issues they raised, were courteous and respectful and the issues were resolved. The planning of the care visits was well-organised; staff had time to provide care and support with compassion and engaged in meaningful conversations with people. Examples of comments are "I do get the same carers and have got to know them" and "the time I get is absolutely fine, I never feel rushed."

There were good quality newsletters and Facebook page to communicate with people. The service was regularly seeking feedback through satisfaction surveys with people experiencing care and their friends and relatives as well as their staff.

Any incidents were reported thoroughly with actions on improvements where needed. Quality checks were taking place, such as timing of care visits, daily care notes and personal plans. This ensured that there was a culture of continuous improvement for people experiencing care.

Staff recruitment and induction processes were thorough. Training was comprehensive with a very good level of completion. There were quality checks by management regarding observing staff competence in people's houses. There were regular face-to-face supervision sessions, however face-to-face team meetings are also needed for staff. This ensures staff have the necessary information and support to provide quality care based on relevant evidence, guidance and best practice.

How well is our care and support planned?

5 - Very Good

We evaluated the service as operating at a very good level for this key question. There were significant strengths with personal planning.

People's personal plans detailed each area of care, for example, mobility, and had thorough and personalised information regarding how best to support someone. People's choices and preferences were recorded, however, there needed to be more focus regarding people's life history.

Personal plan updates were recorded regularly and promptly as were any changes in actions needed. There was electronic access for service users and relatives to their personal plans. Six monthly reviews (as required by legislation) were taking place with people experiencing care and their relatives. This ensured that personal plans remained right for people as their needs change.

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

Requirements

Requirement 1

The provider must by 10 July 2019 ensure the complaints policy is reviewed to contain clear information about conflicts of interest, family members working together and good complaints handling procedures.

This is to comply with Regulation 18(2) and (3) (complaints) 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 states that:

'I benefit from a culture of continuous improvement, with the organisation having robust and transparent quality assurance processes' (HSCS 4.19).

This requirement was made on 27 March 2019.

Action taken on previous requirement

The service has policies in place for conflict of interest at work and relationships at work in appropriate detail. The complaints procedure consists of six clearly defined steps. The records seen showed that complaints were responded to quickly and competently.

Met - within timescales

Requirement 2

The provider must by 10 July 2019 ensure that the care and support plan contains accurate information of the support provided with the actions taken to demonstrate when issues are raised.

This is to comply with Regulation 4(1)(a) (Welfare of users) and 5(2)(b)(ii) (personal plans) 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 states that:

'my personal plan (sometimes referred to as a care 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).

'my care and support meets my needs and is right for me' (HSCS 1.19).

This requirement was made on 27 March 2019.

Action taken on previous requirement

People's personal plans detailed each area of care, for example, mobility, and had thorough and personalised information regarding how best to support someone. People's choices and preferences were recorded, however, there needed to be more focus regarding people's life history.

Personal plan updates were recorded regularly and promptly as were any changes in actions needed. This ensured that personal plans remained right for people as their needs change.

Met - within timescales

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 service should review its medication policy and procedures taking into account guidance from the Care Inspectorate to include, but not be limited to:

- definitions of prompt, assist or administer medication
- medication risk assessments to determine and record the level of support required
- good practice guidance on the use of multi-compartment compliance aids
- systems to regularly assess the competency of care staff in medication handling.

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

'I experience high quality care and support based on relevant evidence, guidance and best practice' (HSCS 4.11).

This area for improvement was made on 29 May 2019.

Action taken since then

The service's medication policy gave clear definitions between assisting and administering medications as well as explaining their medical risk assessments. The personal plans included thoroughly completed medical histories and medication risk assessments. There were no issues regarding the use of multi-compartment compliance aids.

Medication administration was well organised with regular audits by management and appropriate training for staff. Managers observed staff practice regularly to assess their competence. This ensured that people experienced safe and effective medication.

This previous area for improvement has been met.

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?	5 - Very Good
1.1 People experience compassion, dignity and respect	5 - Very Good
1.3 People's health and wellbeing benefits from their care and support	5 - Very Good
1.5 People's health and wellbeing benefits from safe infection prevention and control practice and procedure	5 - Very Good
How good is our leadership?	5 - Very Good
2.2 Quality assurance and improvement is led well	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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Care Inspectorate
Compass House
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