

# Care service inspection report

Full inspection

# Time 2 Help Ltd Support Service

Blueton Stables Braco Dunblane



Service provided by: Time 2 Help Ltd

Service provider number: SP2012011815

Care service number: CS2012307932

Inspection Visit Type: Announced (Short Notice)

Care services in Scotland cannot operate unless they are registered with the Care Inspectorate. We inspect, award grades and set out improvements that must be made. We also investigate complaints about care services and take action when things aren't good enough.

Please get in touch with us if you would like more information or have any concerns about a care service.

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# Summary

This report and grades represent our assessment of the quality of the areas of performance which were examined during this inspection.

Grades for this care service may change after this inspection following other regulatory activity. For example, if we have to take enforcement action to make the service improve, or if we investigate and agree with a complaint someone makes about the service.

#### We gave the service these grades

Quality of care and support 5 Very Good

Quality of staffing 5 Very Good

Quality of management and leadership 5 Very Good

#### What the service does well

We found a strong, established commitment to providing an exceptional level of service and there were very high levels of satisfaction with the quality of the overall service during this inspection. All of the people who use the service and their relatives we spoke with during this inspection told us that the service had improved their lives.

We found that health and wellbeing was very well managed, including the support given to service users with more complex needs. The management team and staff were particularly good at sharing their knowledge and expertise about supporting people with dementia and physical health conditions with people who use the service and their relatives.

Communication between staff, the manager and service users and relatives was highlighted as being exceptionally effective. The day-to-day performance of the service was closely monitored and there was a strong commitment to the ongoing improvement and development of the overall service being provided.

#### What the service could do better

The manager currently provides a very good standard of management and leadership and also delivers care on a daily basis. Some management responsibilities should be delegated to share the responsibility and focus on service throughout the service.

#### What the service has done since the last inspection

The grades achieved at the last inspection have been maintained with the grades for quality of staffing and quality of management and leadership improving from good to very good.

The recommendations made to the provider during the last inspection had all been met

There have been a number of improvements and new initiatives that have resulted in positive experiences and outcomes for service users and their families/carers, as detailed throughout this report.

#### Conclusion

This service provides a very good standard of care and support informed by best practice that is personalised to meet the needs, choices and preferences of each individual service user.

The overall service operates to a very high standard due to the strong leadership demonstrated by the management team and the motivation, skills and commitment of the staff who deliver care and support.

# 1 About the service we inspected

Time 2 Help Ltd is registered since 12 July 2012 to provide a support service - care at home. The service is provided by Time 2 Help Ltd, a company.

The service users are primarily older people, but other adults can also be supported. At the time of the inspection the service was supporting seven service users.

The service is provided in the Stirling Council area and western Perthshire by the manager, two senior support workers and six support staff.

The service aims state: "Time 2 Help Ltd is a best in class personal support service with a strong identity providing support 365 days of the year. Our aim is to have totally satisfied clients that will help spread the word in the circle of their lives."

#### Recommendations

A recommendation is a statement that sets out actions that a care service provider should take to improve or develop the quality of the service, but where failure to do so would not directly result in enforcement.

Recommendations are based on the National Care Standards, SSSC codes of practice and recognised good practice. These must also be outcomes-based and if the provider meets the recommendation this would improve outcomes for people receiving the service.

#### Requirements

A requirement is a statement which sets out what a care service must do to improve outcomes for people who use services and must be linked to a breach in the Public Services Reform (Scotland) Act 2010 (the "Act"), its regulations, or orders made under the Act, or a condition of registration. Requirements are enforceable in law.

We make requirements where (a) there is evidence of poor outcomes for people using the service or (b) there is the potential for poor outcomes which would affect people's health, safety or welfare.

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

Quality of care and support - Grade 5 - Very Good Quality of staffing - Grade 5 - Very Good Quality of management and leadership - Grade 5 - Very Good

This report and grades represent our 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. You can find the most up-to-date grades for this service by visiting our website www.careinspectorate.com or by calling us on 0345 600 9527 or visiting one of our offices.

# 2 How we inspected this service

#### The level of inspection we carried out

In this service we carried out a low intensity inspection. We carry out these inspections when we are satisfied that services are working hard to provide consistently high standards of care.

#### What we did during the inspection

This was a short notice inspection by an Inspector, with notice so that arrangements could be made to visit service users at home. The inspection took place on Wednesday 21 October 2015 from 8.45am - 4.30pm, Friday 23 October from 8.45am - 3.30pm and Monday 26 October from 11.30am - 1.30pm. The Care Inspectorate gave detailed feedback to the manager and provider from 11.30am - 1.30pm on Monday 26 October.

Before the inspection the provider had submitted an annual return and self assessment as requested by us.

During this inspection we gathered evidence from various sources, including;

- -discussion with the manager,
- -discussion with four staff members,
- -visits to five service users' homes,
- -discussion with six relatives in person,
- -examining four service users' care plans,
- -examining the service's records of staff induction, supervision meetings and training,
- -accident and incident records,
- -information on quality assurance systems,
- -questionnaires returned to the Care Inspectorate,
- -relevant sections of policies/procedures/records/documents including complaints.

#### Grading the service against quality themes and statements

We inspect and grade elements of care that we call 'quality themes'. For example, one of the quality themes we might look at is 'Quality of care and support'. Under each quality theme are 'quality statements' which describe what a service should be doing well for that theme. We grade how the service performs against the quality themes and statements.

Details of what we found are in Section 3: The inspection

#### Inspection Focus Areas (IFAs)

In any year we may decide on specific aspects of care to focus on during our inspections. These are extra checks we make on top of all the normal ones we make during inspection. We do this to gather information about the quality of these aspects of care on a national basis. Where we have examined an inspection focus area we will clearly identify it under the relevant quality statement.

#### Fire safety issues

We do not regulate fire safety. Local fire and rescue services are responsible for checking services. However, where significant fire safety issues become apparent, we will alert the relevant fire and rescue services so they may consider what action to take. You can find out more about care services' responsibilities for fire safety at www.firescotland.gov.uk

#### The annual return

Every year all care services must complete an 'annual return' form to make sure the information we hold is up to date. We also use annual returns to decide how we will inspect the service.

Annual Return Received: Yes - Electronic

#### Comments on Self Assessment

Every year all care services must complete a 'self assessment' form telling us how their service is performing. We check to make sure this assessment is accurate

The Care Inspectorate received a fully completed self assessment document from the provider. We were satisfied with the way the provider completed this and with the relevant information included for each heading that we grade services under.

The provider identified what it thought the service did well, some areas for development and any changes it had planned. The provider told us how the people who use the service had taken part in the self assessment process.

#### Taking the views of people using the care service into account

The views of people who use the service are contained throughout this report.

#### Taking carers' views into account

The views of carers/relatives are contained throughout this report.

# 3 The inspection

We looked at how the service performs against the following quality themes and statements. Here are the details of what we found.

# Quality Theme 1: Quality of Care and Support

Grade awarded for this theme: 5 - Very 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

We found this service had performed to a very good standard in the areas covered by this statement. We concluded this after we spoke to service users, relatives/carers and staff; looked at the relevant records and reviewed the questionnaires we received.

The evidence showed that there had been a strong commitment to the meaningful involvement of service users and their relatives/carers in assessing and improving the quality of the overall service, including the care and support to be provided. We found that involvement had become firmly established as an integral part of the overall service. Staff respected peoples' right to be consulted about the quality of the service and valued their input.

Relatives and clients we spoke with during this inspection made the following comments about the quality of care and support:

"Quite honestly I am very happy with the service and I can't think of anything that could be done better."

"They have been outstanding.....absolutely reliable."

- "My relative and I appreciate what they do hugely. It's just transformed things for us, I'm now free to be a daughter again I feel really supported at this point."
- "I know that they're there and they're giving her the support that she needs."
- "I think things are so much better for us since they started because...we've got our relationship back, I'm very grateful to them for that."
- "I can be a daughter again."
- "We couldn't manage without them. I heard about the carers through a friend who was very pleased with them."
- "They've been excellent, I must say, I couldn't really fault them."
- "It's a pleasure at 8.15 when this voice says, "hello, how are you?."
- "quite honestly I am very happy with the service and I can't think of anything that could be done better."
- "I think we've got our relationship back and I'm very grateful to them for that."
- "They're very flexible, they have changed as my relatives' needs have changed."
- "I think we're very lucky that we found them, as we've needed more care they've been there..."
- "I don't always know who is coming but we know them all, we're quite confident in them."
- "There are different people coming over and they're all very nice to my husband."

The flexibility offered by the service was a key theme, which clients and carers/relatives we spoke with during this inspection told us was very important to them.

We found that a range of different methods had been used to encourage and support service users and their relatives/carers to become involved in assessing and improving the quality of the service, including the care and support.

#### These were:

- -1-1 meetings with service users and their relatives/carers.
- -telephone discussions and email communication.
- -consultation with service users and their relatives/carers when writing personal plans to discuss and agree how care and support needs would be met.
- -formal care reviews to discuss how well care and support needs had been met and any changes.
- -satisfaction surveys that asked for feedback about service quality.
- -comments and suggestion forms.
- -advocacy information and support to access this.
- -a client communication book.
- -client visits and reports.
- -a complaint procedure that people could use to address issues on a more formal basis.
- -quality audit checks involving service users and their relatives.
- -spot checks on staff during which service users/relatives were consulted about the service they received.

The provider had developed an information leaflet about the service so that people knew what was available and what they could expect. The welcome pack contained information about a wide range of topics that would be useful to service users and/or their relatives/carers including the organisation's aims and objectives, the scope of the service, involvement in planning support, confidentiality, staffing, policies and procedures, record keeping and the process for making comments and complaints. We found that the quality of information provided by the service was consistently good and the people we spoke to told us they had felt well informed.

Senior staff had carried out a face-to-face meeting with service users and/or their relatives/carers when they had initially been referred to Time 2 Help in order to provide a point of contact, give information and answer any questions. This had offered an opportunity to discuss support needs and what each individual would like to receive from the service.

Outcome focussed care planning, care reviews, staffing and complaints management had been covered at this meeting.

The feedback we received confirmed that staff had formed positive relationships with service users and their relatives/carers who were happy with the level of involvement they had in discussing and agreeing care packages and any subsequent changes. We found that there were high levels of satisfaction with the overall service, including the way the manager and staff had provided information, promoted involvement, met individual needs and responded to the feedback received. Communication was also said to be very good.

We saw that regular reviews were being carried out formally by the manager, clients and relatives told us that informal reviews led to changes which they needed or had requested also took place very regularly on an informal basis. People were very pleased with this approach as they told us it made a real difference to them that the service could adapt quickly to their changing needs.

We saw that questionnaires had continued to be used to ask for feedback from clients and relatives/carers. The management team had collated the results of these.

We saw examples of the service advocating for clients and carers with other services. People told us that they had found the help provided in this respect invaluable in supporting them to negotiate the social care system.

#### Areas for improvement

The recent service evaluation about the service had provided overwhelmingly positive feedback from clients and their relatives/carers. The information gathered had been collated but not shared with clients and relatives/carers. We discussed the quality assurance cycle with the management team during feedback and they agreed to share the feedback received with clients and relatives/carers.

We saw that care and support needs had been assessed and recorded properly and staff had included individual choices and personal preferences in a way that promoted a person centred approach. Care plans had also been reviewed with service users/carers in their own home on at least an annual basis, to review and update information in addition to the six monthly reviews. These plans were person centred but did not reflect the outcomes that clients and carers wanted to achieve.

Making plans more outcome focussed would provide an additional way to measure the success of the service provided against the outcomes identified.

There had not been any client and carer meetings held since the last inspection. This type of meeting provides a forum for clients and carers to discuss their experiences of the service and identify where any improvements may be required. It is also useful to identify what the key strengths of the service are to allow the provider to focus on maintaining these consistently. We discussed the reasons why meetings had not taken place and the manager told us that this was an area which they would like to develop further.

#### Grade

5 - Very Good

Number of requirements - 0 Number of recommendations - 0

#### Statement 3

"We ensure that service users' health and wellbeing needs are met."

#### Service Strengths

We evaluated that the service had performed to a very good standard in the areas covered by this statement. We concluded this after we spoke to service users, relatives/carers and staff; looked at the relevant records and reviewed the questionnaires we received. We concluded that care and support needs, including complex healthcare needs had been met by trained and experienced staff using good practice and initiatives that had resulted in positive experiences and outcomes for service users.

The people we spoke to during the inspection told us that staff had provided a high standard of care and support. They had confidence in staff and said that they responded properly to any changes or issues around health and wellbeing. There was evidence to show that the service worked hard to maintain continuity where staffing was concerned as they recognised how important this was to service users and their families / carers.

Some of the comments we received were:

- "I think they're better at looking after my relative's health than me!"
- "A couple of weeks ago one of the girls noticed that the condition of my relative's legs had changed, they're all on the lookout for any changes and they make comments that help. Because she'd noticed, my relative's legs got treated quickly."
- "It's nice to be that bit more independent that somebody else is doing the care and my daughters got more free time."
- "You just feel that they're there, embracing you."
- "It's made life a lot better for both of us."
- "They've made suggestions about things that might help, but you never feel pressurised by them."
- "They're very proactive at noticing any changes, they're checking his skin and watching him like a hawk, all the time."

"They play board games, singing, dancing."

"Some of the visitors were reading some of your holiday diaries with you."

"One staff member brought the sweet pea plants when they were tiny, we now get the benefit of those at the door and the vases on the table."

"The stories she can tell when the girls start reading her diary and how that generates a discussion is lovely and I've seen them using it with her."

"One of the girls was adding to my relative's file of life the other day. With blank sheets of paper so that the other photos stood out, it was a lovely touch."

"I find the girls work well, they'll think about how to do things with (my relative) They've brought in things themselves, for example, some song sheets, a book about the war, music, a film. What we both think is good for you is the company and the stimulation."

"(Relative's) always been on the go the whole of their life, it's really good that the staff are interested and they leave me details of what they've done and I can see this for myself."

"I know about the standard of care to expect and they're exemplary, I really can't fault them...It's the attention to detail, I leave wee notes and it's always done."

We looked at the way that staff had assessed service users' needs when referred to the service and on an ongoing basis after that to keep people safe and well. Staff had established very good links with the local community healthcare network. We concluded that staff had carried out these assessments properly in partnership with other people like relatives, General Practitioner (GPs), social workers and other healthcare staff like occupational therapists and dieticians. Staff were careful to note any changes in clients' health and wellbeing for example, being able to describe changes in presentation to health care professionals had helped them to diagnose and treat medical needs quickly and effectively. The outcome of this was that clients' health was promoted. We saw that staff had contacted the relevant professionals where a need for this had been identified. We saw how this had resulted in positive outcomes for service users like increased social opportunities and maintaining independence.

We saw examples where staff had reported concerns about service users to the manager, and a home visit or review had been carried out in communication with the relevant parties as a result. This demonstrated a responsive approach and good communication with other people to address the issues identified and passed on by staff. Communication records also reflected the action taken by staff in response to any issues that had arisen.

We observed staff providing care and support during this inspection and saw that they knew the needs and preferences of clients very well. Staff were respectful and courteous while maintaining a caring and personal approach to carrying out their care visit. We saw that the staff placed a focus on supporting clients to regain and maintain independence.

One relative told us how the service had supported them to develop their own care plan which the staff used with one client. 'I mentioned it to the manager during a review. I actually amended the form and sent it through to her and this was in place the next day'. This was an example of how flexible the service is and their commitment to meeting the needs of individual clients.

#### Areas for improvement

We looked at records kept by the service about clients financial transactions when they are supported by staff. For example, some clients provide staff with money to buy some shopping items on a regular basis. We found that the service should improve the records kept with regards to these transactions. For example, a copy of receipts should be retained by the service to evidence money which had been provided by the client, what items this had been spent on and any change which was returned to the client. These records should be signed and dated by both staff and clients.

We saw that staff were responsible for 'prompting' clients to take medication as part of their identified role. The service had not provided any medication training for staff and was not checking the competency of staff with regards to this.

#### **Inspection report**

The purpose of medication training and competency checks are to ensure that staff have robust knowledge and skills to deliver safe and effective medication management. We discussed this with the provider who had already identified that medication training was required and had arranged to put this in place. We will follow up on this during the next inspection.

#### Grade

5 - Very Good

Number of requirements - 0

Number of recommendations - 0

## Quality Theme 3: Quality of Staffing

Grade awarded for this theme: 5 - Very Good

#### Statement 3

"We have a professional, trained and motivated workforce which operates to National Care Standards, legislation and best practice."

#### Service Strengths

We found this service had performed to a very good standard in the areas covered by this statement. We concluded this after we spoke to service users, relatives/carers and staff; looked at the relevant records and reviewed the questionnaires we received. We concluded from the evidence found that the staff team were knowledgeable, skilled, experienced and highly motivated to deliver a safe, quality service.

We confirmed that staff retention in the service was good. The management team worked hard to maintain continuity in relation to the staff teams that service users were used to as they recognised how important this was to them. The people we spoke to told us that they appreciated this as it had helped to build up positive relationships and promoted good communication. We found that there were high levels of satisfaction with the quality of the staff team and the service they provided.

#### Comments included:

- "I'd say they're a six (when asked how they would grade the service)."
- "They're definitely well trained."
- "They never rush us, we never feel rushed, they make allowances for the importance of that and there's no sense of panic."
- "We certainly get the impression that they're caring about (my relative)."
- "They all seem to have nice personalities."
- "All of the people that come here are brilliant, their friendliness is fantastic and everything is done during their visits."

- "I know them all, each brings something different to the table personality wise and conversation wise."
- "I like the differences between the slightly different age groups of carers, they're all lovely. They've fitted in well and you feel they're so caring."
- "All the individual carers are personally very nice, I think she (relative) likes the fact that there are some older women. I think it's important that she receives the service she does from the people she receives care from. Conversation is very important to her and may be for most people who live alone."
- "She's found them much more supportive and helpful and nice than the other company we had in before."
- "It's very smooth, it's just a part of their practice, they give you exactly what you need."
- "They genuinely are just lovely people, they're really thinking outside the box, for example, some staff have thought of how to best help her to feel comfortable when she wasn't well enough to have a shower, they way she talked to her about gardens, it was excellent."
- "They'll ask us in advance if they've got a new carer and they will be shadowing."
- "They always check if a new person can shadow."
- "And we have a laugh which is definitely important, I like a bit of fun."
- "She's quite set in her ways but they're all so very good. She's not backwards in coming forwards and they pander to all her foibles."
- "I ask the girls and they tell me who's coming for the rest of the week. You occasionally get introduced to someone new but you usually know who's coming each day."

Staff we interviewed told us that they felt their induction to the company had prepared them for their role. They said that shadowing other staff had been an important part of their induction, and working with them and the manager had allowed them to understand what the expectations were of them in their role with Time 2 Help. Staff also completed some training as part of their induction and told us that this was useful and informed their day-to-day work.

All of the staff we spoke with told us that having time to spend with clients, rather than rushing to and from visits made a significant difference to how well they felt they supported clients. Staff were able to provide examples of the differences this made to individual clients. Clients and relatives we spoke with also told us that the staff not rushing between visits was helpful and had a positive impact on them and their family members.

We looked at training records which showed that some staff had completed specialist learning and development with regards to dementia, for example, transitions in dementia care. We found that this type of learning helped staff to provide a very good standard of care and support for people with a dementia. Relatives also gave us examples of some of the ways in which the staff had supported them to understand the cognitive impairments affecting their relative. This had helped relatives/carers to develop a greater understanding of the condition affecting their relative.

We looked at six monthly reviews for staff and found these to be detailed and reflective. The manager had observed staff in their role, collated feedback from clients, relatives and colleagues and used this to inform their review of staff performance.

Our discussions with staff during the inspection suggested that they valued and enjoyed the work they did. Staff came across as being motivated, professional and knowledgeable with a caring attitude. Staff told us they felt valued and very well supported. All confirmed that they had been able to provide a high standard of care and support and were very positive about the quality of the training and development programme. Morale was said to be very good and management respected.

We saw that a range of good quality training had been undertaken by staff. This had included mandatory training that staff had to attend, as well as additional training informed by the care and support needs of service users and the development needs of the staff team.

Some staff had been supported to gain qualifications suitable for registration with the Scottish Social Services Council (SSSC). The purpose of this register is to support the delivery of a safe, qualified and regulated social care workforce in Scotland.

Meetings had been held with staff to discuss plans and developments, share ideas and promote good communication. Staff, clients and carers we spoke with told us that the manager delivering some care and working with them meant that they felt supported, understood and had opportunities to share information and communicate regularly.

#### Areas for improvement

We found some evidence that disciplinary issues should be addressed more vigorously by the provider. For example, where records showed that a staff member failed to attend a care visit or carry out care tasks appropriately. We saw that the management team had addressed these issues however, these were not always followed with further disciplinary processes where consistent improvements were not made. While the provider took a supportive approach to managing staff at the service, we identified that disciplinary procedures should be used to better effect where a supportive approach had failed to sustain positive changes.

We looked at Protection of Vulnerable Groups (PVG) checks for staff and found that some staff recruited since the last inspection had provided a recent PVG check from another care organisation and were lone working with Time 2 Help clients before the service had received an updated check for them. We recommend following best practice guidance which states that PVG update checks should be completed for new staff before they are employed by the provider.

#### Grade

5 - Very Good

Number of requirements - 0 Number of recommendations - 0

#### Statement 4

"We ensure that everyone working in the service has an ethos of respect towards service users and each other."

#### Service Strengths

We found that the service was performing at a very good standard in relation to this statement.

We observed staff practice and interaction with clients and their carers/friends and relatives and found that staff members supported service users in line with support plan information.

We spoke with clients and relatives/carers during the inspection visit and found that people were very happy with the care and support provided. We asked all of the clients and carers we spoke with during this inspection what they thought about the staff who support them, their comments included:

"I feel he's safe in their hands."

"Staff have gone through how to use the hoist with me a few times and they go back over it with me if I ask them to."

"They seem very mindful of how he's feeling for example, sometimes he doesn't want to be disturbed."

"In a way you think of them as friends, you don't think of them as carers."

#### Areas for improvement

Where there were some concerns that a staff member had not demonstrated respect for the views of their colleagues while at work, we were able to see that some action had been taken to address this. However, further action was required to ensure that the high standard of support provided by staff was delivered consistently.

#### Grade

5 - Very Good

Number of requirements - 0 Number of recommendations - 0

# Quality Theme 4: Quality of Management and Leadership

Grade awarded for this theme: 5 - Very 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

We found this service had performed to a very good standard in the areas covered by this statement. We concluded this after we spoke to service users, relatives/carers and staff; looked at the relevant records and reviewed the questionnaires we received.

At this inspection we saw that the management team had demonstrated a strong commitment to the meaningful involvement of service users and their relatives/carers. The promotion of a culture that welcomed, valued and supported involvement in ways that benefited the people using the service had been promoted and suggestions from service users and relatives/carers had been responded to in a positive way. We found that, where service users and/or their carers had requests concerning the staff providing their support, this had been dealt with sensitively by the management team so that people would be happy and comfortable with their care team.

This meant that people could see that their involvement had been taken seriously and acted on. We received very positive feedback about the way the service had been managed and confidence in the management team was expressed as detailed under quality theme 4, statement 4.

Participation was considered in general terms under quality theme 1, statement 1. For shared strengths around participation see quality theme 1, statement 1.

#### Areas for improvement

The management team could inform people about the quality assurance systems being used and the outcomes of the audits and checks undertaken to let them know how standards are monitored, maintained and improved. This could be done via meetings, written communications or a newsletter.

Participation was considered in general terms under quality theme 1, statement 1. For shared areas for improvement see quality theme 1, statement 1.

#### Grade

5 - Very 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

We evaluated the service to perform to a very good standard in the areas covered by this statement. We concluded this after we spoke to service users, relatives/carers and staff; looked at the relevant records, reviewed the questionnaires we received and considered the overall findings of this inspection.

The evidence we looked at showed that while the quality assurance system was informal, this provided the management team with an excellent and comprehensive overview that maintained high standards of performance whilst informing and supporting a culture of continuous review and improvement. The high levels of satisfaction and other evidence found at this inspection led us to conclude that the overall approach to quality assurance had been very effective in informing, monitoring, maintaining and continuing to improve and develop the service provided.

In addition to the strengths around the involvement of service users and their relatives/carers, the quality assurance methods detailed under quality theme 1, statement 1 and the evidence detailed under the other quality statements in this report:

We found that management team had provided very good leadership for staff. They also had meaningful contact with service users and their relatives/carers. The people we spoke to during the inspection had confidence in the management team and expressed high levels of satisfaction with the quality of the overall service. We also saw complimentary cards, letters and emails from service users and relatives/carers praising staff for the service they had provided.

The comments we received included:

- "I think she (manager) picks very good people."
- "They've been incredibly flexible when we've needed extra visits. They've been able to step up, they've re-arranged things so that they can help."
- "I've already recommended them to other people."
- "We message each other weekly or more often if needed...if there's anything I want to flag up with them I do it and it's sorted."
- "Mostly I feel I've got a very clear line of communication to get straight to the manager and I find that very reassuring...it's all very transparent and I can pass on information quickly to my family."
- "It was the manager who approached us as a family and told us about the level of practice she wanted to have, I would grade them as excellent...the quality of care is such that it doesn't matter about the cost."
- "We've had a sit down meeting with the manager and I feel comfortable going to her if there were any issues."
- "She's always said, if there's anyone you don't feel comfortable with (staff members), just tell me."
- "When they've been particularly worried the manager has stayed on with us when I needed to phone NHS 24."
- "We had visitors and they were able to change their rota for us, they were happy to work round that for us."
- "I think its excellent that the manager's here and delivering care, I would say that she gets very good staff."
- "The manager and her team do seem to go above and beyond, they genuinely do care about my relative...When we go away on holiday I'm quite confident that they're there and if they need to they'll get in touch but otherwise things will be fine."
- "Without a doubt I'd say if there were any problems I would go straight to the manager."
- "All the positives are down to the person in charge, she's very important. She's everything to everybody, and long may she be able to do it."
- "At the moment everything is working great for us but I'm sure that if anything changes, they'll be flexible."
- "If the team have any feedback about my relative the manager will text me. I know that I can always get hold of the manager if I need to."

#### Timekeeping:

"They're very punctual, not very often but sometimes they'll be 5 or so minutes late but that's because something's happened to hold them up."

"They're here all the time that they're meant to be here."

"Yes, they stay for the full time that they're supposed to."

Policies and procedures had been written to inform the operation of the service and the standard of performance that was expected from staff. There was evidence that the senior team monitored this to maintain and improve the quality of the service being provided. We concluded that there had been a strong commitment to the delivery of a professional, safe, good quality service with a clear focus on best practice and continuous improvement.

We found that the day-to-day running of the service had been very well managed. Individual members of staff were responsible and accountable for making sure that specific aspects of the service were properly organised. We also found that there were excellent planning, communication and reporting systems across the service as a whole which helped to support the smooth running of the service. The staff we spoke to said that communication and information sharing was very good.

The people we spoke to told us that they were able to speak to someone from the management team when they wanted to and said that management team were "professional" and receptive to feedback. People also said that they would feel comfortable raising any issues as they found staff approachable, friendly and responsive.

We found that there had been a strong focus on the continued improvement and development of the service in line with good practice with a view to further improving safety and quality. There had also been a clear commitment to the ongoing development of staff which had helped to build a strong management team with the introduction of new roles where it had been recognised that this would be beneficial.

There were two recommendations made to the provider during the last inspection, these were:

1. The provider would develop an annual development plan setting out the goals to be achieved, and when and how they will be achieved.

The provider gave us a copy of their annual service development plan and we were able to see that this outlined all of the above, therefore this recommendation has been met.

2. The provider should ensure that staff delete anonymised text messages about service users from their phones or computers.

Staff we spoke with told us that this was an important practice which was regularly reiterated to them by the management team. We also saw that the provider had developed guidance for staff with regards to this and had publicised this to new and existing staff. Therefore this recommendation has been met.

#### Areas for improvement

As highlighted above, we found that the quality assurance systems in place were informal and relied on effective communication between staff and the manager. Staff currently send a text message with a summary of each visit to the manager immediately after they leave. The manager is therefore aware of the health and wellbeing of each client and what support they have received very regularly throughout the day along with any feedback they have about the quality of the service. The manager also continues to deliver care themselves and is therefore in regular contact with clients, their relatives and staff.

This arrangement is currently very effective and has influenced the high levels of satisfaction expressed by clients, relatives and staff during this inspection. However, we discussed the importance of considering a more formal approach to quality assurance, particularly if the service should expand and develop further.

# Inspection report

#### Grade

5 - Very Good

Number of requirements - 0 Number of recommendations - 0

# 4 What the service has done to meet any requirements we made at our last inspection

#### Previous requirements

There are no outstanding requirements.

# 5 What the service has done to meet any recommendations we made at our last inspection

#### Previous recommendations

1. The provider would develop an annual development plan setting out the goals to be achieved, and when and how they will be achieved.

#### This recommendation was made on 27 January 2015

The provider gave us a copy of their annual service development plan and we were able to see that this outlined all of the above, therefore this recommendation has been met.

2. The provider should ensure that staff delete anonymised text messages about service users from their phones or computers.

### This recommendation was made on 27 January 2015

Staff we spoke with told us that this was an important practice which was regularly reiterated to them by the management team. We also saw that the provider had developed guidance for staff with regards to this and had publicised this to new and existing staff. Therefore this recommendation has been met.

# 6 Complaints

No complaints have been upheld, or partially upheld, since the last inspection.

## 7 Enforcements

We have taken no enforcement action against this care service since the last inspection.

## 8 Additional Information

There is no additional information.

# 9 Inspection and grading history

Date	Туре	Gradings	
27 Jan 2015	Announced (Short Notice)	Care and support Environment Staffing Management and Leadership	5 - Very Good Not Assessed 4 - Good 4 - Good
14 Mar 2014	Announced (Short Notice)	Care and support Environment Staffing Management and Leadership	4 - Good Not Assessed 4 - Good 3 - Adequate

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Tha am foillseachadh seo ri fhaighinn ann an cruthannan is c?nain eile ma nithear jarrtas

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本出版品有其他格式和其他語言備索。

Na życzenie niniejsza publikacja dostępna jest także w innych formatach oraz językach.