

## **DUNDEE CITY COUNCIL**

**REPORT TO: SOCIAL WORK AND HEALTH COMMITTEE – 23 FEBRUARY 2015**

**REPORT ON: OUTCOME OF CARE INSPECTORATE INSPECTION – HOMECARE ENABLEMENT AND SUPPORT CITYWIDE AND COMMUNITY MENTAL HEALTH TEAM OLDER PEOPLE SERVICE**

**REPORT BY: DIRECTOR OF SOCIAL WORK**

**REPORT NO: 73-2015**

### **1.0 PURPOSE OF REPORT**

The purpose of this report is to advise the Committee of the outcome of the Care Inspectorate inspection of the Homecare Enablement and Support Citywide and Community Mental Health Older People Service, which was carried out between 21-22 October 2014. The report outlines the findings of the Care Inspectorate and gives a summary of the grades achieved.

### **2.0 RECOMMENDATIONS**

It is recommended that the Social Work and Health Committee:

- Notes the contents of this report, and
- Notes the improvement in the grades awarded to the service.

### **3.0 FINANCIAL IMPLICATIONS**

None

### **4.0 MAIN TEXT**

#### **4.1 Background Information**

4.1.1 There are two elements to the service – the Enablement and Support Team consists of 8 teams which cover the whole of Dundee City, and provide a first point of contact for individuals requiring homecare services. The service is short term and aims to maximise the independence of individuals. During the period spent on the Enablement service an outcome focussed assessment is carried out, which informs any further service requirements.

4.1.2 The Community Mental Health Team element of the service is provided to individuals over the age of 65, who are difficult to engage with because of the nature of their mental health difficulties.

4.1.3 The annual inspection by the Care Inspectorate took place during time period 21-22 October 2014. The inspection was a low intensity inspection.

4.1.4 The following evidence was used in order to grade the service:

- Self Evaluation
- Interviews with 9 staff
- Interviews with 8 service users
- Correspondence with 3 related health professionals
- Interviews with manager and senior staff
- Inspection of personal plans
- Inspection of records
- Inspection of policies and procedures
- Observation of staff practice within the control room

4.1.5 This Care Inspectorate Annual Report outlines the findings of the Inspection, and gives a summary of the grades achieved.

## **4.2 Findings of the Inspection**

4.2.1 The inspection was extremely positive, and an overall grade 5 (Very Good) was awarded to the service. There were no recommendations or requirements made.

4.2.2 The summary of the Inspection Report stated that *'this was a high quality service which was achieving positive outcomes for service users. Staff were well trained and well supported to carry out their roles. Management had effective systems in place for monitoring and improving quality. The support provided was flexible, effective and person centred.'*

4.2.3 The two recommendations made by the Care Inspectorate at the October 2013 inspection had been actioned and met within timescales.

4.2.4 The service was inspected on three quality themes; Quality of Care and Support, Quality of Staffing, and Quality of Leadership and Management. The Care Inspectorate made some very favourable comments regarding each of the quality themes.

4.2.5 Here are some of the comments made by the Care Inspectorate:

- *'The Inspector was impressed with the high standard of relationship staff had with service users and their families. This was seen as a strong basis from which participation practice undertaken could be effective. It was clear that the service were committed to listening and acting upon any feedback to improve outcomes for people.'*
- *'The Inspector was impressed by the culture of care promoted by this service. Staff were alert to people's changing needs and their wants and choices in life. This approach was non-judgemental and proactive as far as people and their care was concerned.'*
- *'The Inspector was impressed with the knowledge, confidence and commitment of the staff he interviewed. He felt that the service was good at listening to staff issues and promoting an environment which valued staff and service users alike. Feedback from service users was universally positive with staff held in high regard.'*

### **4.2.6 Some views from service users about service**

- *'The support we get from the team is amazing: they are all excellent at their job and are warm and caring'*
- *'We (my husband and I) have been delighted with the quality of the service and have truly felt supported'*

### **4.2.7 Some views from Carers about service are**

- *'I have found the standard of care and help my husband received to be exceptional'*
- *'A very professional approach was given at all times by all members of the team'*

#### 4.2.8 **Views from service professionals that work alongside Enablement**

- *'This is an excellent service'*
- *'Proactive joint working taking forward any new initiatives/joint working to benefit the service user'*
- *'Excellent team working which supports discharge planning'*
- *'Optimises recovery from illness and injury for the patient'*

### 4.3 **Summary of Grades**

4.3.1 The Care Inspectorate can award one of six grades for each of the Quality Themes:

- Grade 6 – Excellent
- Grade 5 – Very Good
- Grade 4 – Good
- Grade 3 – Adequate
- Grade 2 – Weak
- Grade 1 – Unsatisfactory

4.3.2 The Care Inspectorate can inspect a service against 4 Quality Themes: Quality of Care and Support, Quality of Environment, Quality of Staffing and Quality of Management. As the service is provided in a service users' own home, Quality of Environment does not apply. Each quality theme contains a number of quality statements as part of the inspection. Each quality statement will be awarded an individual grade, which is then aggregated up to an overall grade for each quality theme.

Table 1 shows the grades awarded to each quality statement and the overall grade awarded to each quality theme.

**Table 1**

<b>Quality of Care and Support</b>	<b>5 – Very Good</b>
Statement 1 – We ensure that service users and carers participate in assessing and improving the quality of care and support provided by the service.	5 – Very Good
Statement 3 - We ensure that service users' health and wellbeing needs are met.	5 – Very Good
<b>Quality of Staffing</b>	<b>5 – Very Good</b>
Statement 1 - We ensure that service users and carers participate in assessing and improving the quality of staffing in the service.	5- Very Good
Statement 3 - We have a professional, trained and motivated workforce which operates to National Care Standards, legislation and best practice.	6 - Excellent
<b>Quality of Management and Leadership</b>	<b>5 – Very Good</b>
Statement 1 - We ensure that service users and carers participate in assessing and improving the quality of the management and leadership of the service.	5 – Very Good
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.	5 – Very Good

4.3.3 Table 2 details the grades for each Quality Theme awarded at the 2013 and 2014 inspections

**Table 2**

<b>Quality Theme</b>	<b>Grade December 2013</b>	<b>Grade 2014</b>
Quality of Care and Support	4	5
Quality of Staffing	4	5
Quality of Management and Leadership	4	5

#### **4.4 Service Improvements**

**4.4.1** The service continues to look for improvements which will increase the quality of the service, and continues to deliver a service which is highly valued by service users, carers and stakeholders. In addition the service continues to develop in response to the changing needs of vulnerable people and new models of service.

#### **5.0 POLICY IMPLICATIONS**

5.1 This Report has been screened for any policy implications in respect of Sustainability, Strategic Environmental Assessment, Anti-Poverty, Equality Impact Assessment and Risk Management. There are no major issues.

5.2 An Equality Impact Assessment is attached to this report.

#### **6.0 CONSULTATIONS**

The Chief Executive, Director of Corporate Services and Head of Democratic and Legal Services were consulted in the preparation of this report.

#### **7.0 BACKGROUND PAPERS**

Care Inspection Report – 24 October 2014

**JENNIFER G TOCHER**  
**DIRECTOR OF SOCIAL WORK**

**DATE: 30 January 2015**

## DUNDEE CITY COUNCIL

### Equality Impact Assessment Tool

#### Part 1 Description / Consultation

Is this a <b>Rapid</b> Equality Impact Assessment (RIAT) ?	YES
Is this a <b>Full</b> Equality Impact Assessment (EQIA)?	NO
Date of assessment <b>19/01/2015</b>	Title of document being assessed Outcome of Care Inspectorate Inspection of Enablement and Support Service
Committee report number	
1) This is a new policy, procedure, strategy or practice being assessed	This is an existing service (If yes please tick box) <input type="checkbox"/>  Care Inspection Report
2) Please give a brief description of the policy, procedure, strategy or practice being assessed.	The committee report advises the Social Work and Health Committee of the Care Inspectorate Inspection of November 2014
3) What is the intended outcome of this policy, procedure, strategy or practice?	To advise of the outcome of the inspection and improvements made to the service
4) Please list any existing documents which have been used to inform this Equality and Diversity Impact Assessment.	None
5) Has any consultation, involvement or research with protected characteristic communities informed this assessment? If yes please give details.	No
6) Please give details of council officer involvement in this assessment. (E.g. names of officers consulted, dates of meetings etc)	N/A
7) Is there a need to collect further evidence or to involve or consult protected characteristics communities on the impact of the proposed policy?  (Example: if the impact on a community is not known what will you do to gather the information needed and when will you do this?)	Feedback on the service will sought from service users by the service and will also be collected by the Care inspectorate at the time of the next Care inspectorate inspection.

## Part 2 Protected Characteristics

Which protected characteristics communities will be positively or negatively affected by this policy, procedure or strategy?

NB Please place an X in the box which best describes the "overall" impact. It is possible for an assessment to identify that a positive policy can have some negative impacts and visa versa. When this is the case please identify both positive and negative impacts in Part 3 of this form.

If the impact on a protected characteristic communities are not known please state how you will gather evidence of any potential negative impacts in box Part 1 section 7 above.

	Positively	Negatively	No Impact	Not Known
Ethnic Minority Communities including Gypsies and Travellers	<input type="checkbox"/>	<input type="checkbox"/>	x	<input type="checkbox"/>
Gender	<input type="checkbox"/>	<input type="checkbox"/>	x	<input type="checkbox"/>
Gender Reassignment	<input type="checkbox"/>	<input type="checkbox"/>	x	<input type="checkbox"/>
Religion or Belief	<input type="checkbox"/>	<input type="checkbox"/>	x	<input type="checkbox"/>
People with a disability	x	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Age	x	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Lesbian, Gay and Bisexual	<input type="checkbox"/>	<input type="checkbox"/>	x	<input type="checkbox"/>
Socio-economic	<input type="checkbox"/>	<input type="checkbox"/>	x	<input type="checkbox"/>
Pregnancy & Maternity	<input type="checkbox"/>	<input type="checkbox"/>	x	<input type="checkbox"/>
Other (please state)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Part 3 Impacts / Monitoring

<p>1) <b>Have any positive impacts been identified?</b> (We must ensure at this stage that we are not achieving equality for one strand of equality at the expense of another)</p>	<p>The Care Inspectorate had identified good practice within the service and as a result of improvements made to the service has awarded a higher grade to the service.</p>
<p>2) <b>Have any negative impacts been identified?</b> (Based on direct knowledge, published research, community involvement, customer feedback etc. If unsure seek advice from your departmental Equality Champion.)</p>	<p>No</p>
<p>3) <b>What action is proposed to overcome any negative impacts?</b> E.g. involving community groups in the development or delivery of the policy or practice, providing information in community languages etc. see Good Practice on DCC equalities web page</p>	<p>N/A</p>
<p>4) <b>Is there a justification for continuing with this policy even if it cannot be amended or changed to end or reduce inequality without compromising its intended outcome?</b> (If the policy that shows actual or potential unlawful discrimination you must stop and seek legal advice)</p>	<p>The inspection of registered care services is determined by the Care Inspectorate and the right to inspect care services is set in statute.</p>
<p>5) <b>Has a 'Full' Equality Impact Assessment been recommended?</b> (If the policy is a major one or is likely to have a major impact on protected characteristics communities a Full Equality Impact Assessment may be required) Seek advice from your departmental Equality lead.</p>	<p>N/A</p>
<p>6) <b>How will the policy be monitored?</b> (How will you know it is doing what it is intended to do? e.g. data collection, customer survey etc.</p>	<p>Care Inspectorate Inspections take place on an annual basis.</p>

#### Part 4 Contact information

Name of Department or Partnership: **Social Work**

#### Type of Document

Human Resource Policy	<input type="checkbox"/>
General Policy	<input type="checkbox"/>
Strategy/Service	<input type="checkbox"/>
Change Papers/Local Procedure	<input type="checkbox"/>
Guidelines and Protocols	<input type="checkbox"/>
Other	x

#### Contact Information

Manager Responsible	Author Responsible
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Signature of author of the policy: Lindsey Gibson

Date 19/01/2015

Signature of Head of Service area: Diane McCulloch

Date 19/01/2015

Name of Director / Head of Service Diane McCulloch

Date of next policy review:

At next inspection



## Care service inspection report

# Dundee City Council - Homecare - Enablement & Support Citywide and Community Mental Health Older People Team

## Housing Support Service

Dundee Independence Living Centre  
Unit T Charles Bowman Avenue  
Claverhouse West Industrial Estate  
Dundee  
DD4 9UB

Type of inspection: Announced (Short Notice)

Inspection completed on: 24 October 2014



HAPPY TO TRANSLATE

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**Service provided by:**

Dundee City Council

**Service provider number:**

SP2003004034

**Care service number:**

CS2011286180

If you wish to contact the Care Inspectorate about this inspection report, please call us on 0845 600 9527 or email us at [enquiries@careinspectorate.com](mailto:enquiries@careinspectorate.com)

### 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

This was a high quality service which was achieving positive outcomes for service users. Staff were well trained and well supported to carry out their roles. Management had effective systems in place for monitoring and improving quality. The support provided was flexible, effective and person centred.

### What the service could do better

The service was well aware of its own areas in which it wished to improve. These included: the promotion of leadership, the further rolling out of outcome focussed reviews, ongoing staff development and annual appraisals.

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

The service has continued to develop since the last inspection. Here are some examples of what they have been working on:

- staff development and training towards SSSC registration.
- Staff appraisals and continuous learning framework.
- Service user focus groups.
- Pharmacy technician pilot scheme.
- Step Into Leadership initiative - to promote leadership in staff and service users.

### **Conclusion**

This is a well organised and effective service which supports people effectively and flexibly.

# 1 About the service we inspected

The Care Inspectorate regulates care services in Scotland. This service was registered with the Care Inspectorate on 10th January 2012. Information in relation to all care services is available on our website at [www.careinspectorate.com](http://www.careinspectorate.com).

This service registered with the Care Inspectorate on 10 January 2012.

- A recommendation is a statement that sets out actions the care service provider should take to improve or develop the quality of the service based on best practice or the National Care Standards.

- A requirement is a statement which sets out what is required of a care service to comply with the Public Services Reform (Scotland) Act 2010 ("the Act") and secondary legislation made under the Act, or a condition of registration. Where there are breaches of Regulations, Orders or conditions, a requirement may be made. Requirements are legally enforceable at the discretion of the Care Inspectorate.

There were 8 city-wide enablement and support teams provided to people over 18. They provide a first point of contact for people with homecare needs. Initial assessment and enablement periods of 6 weeks were followed by further intervention or referral to other homecare resources.

The Community Mental Health Older People element of the service was provided to people aged over 65 living in their own home who may have found it difficult to accept support in the past. Support was delivered by one team of Social Care Workers led by a Social Care Organiser. This service could be provided for as long as the person needed this support.

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](http://www.careinspectorate.com) or by calling us on 0845 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**

We wrote this report after an announced inspection which took place on 21-22 October 2014.

As requested by us, the service sent us an annual return. The Care Inspectorate wrote to the service to request completion of the self assessment form which was duly completed.

30 questionnaires were sent to the service to distribute to service users and staff - 16 were returned.

In this inspection we gathered evidence from the following sources:-

- Interviews with 9 staff.
- Interviews with 8 service users and carers.
- Correspondence with 3 related health professionals
- Interviews with manager and senior staff.
- Inspection of personal plans.
- Inspection of records.
- Inspection of policies and procedures.
- Observation of staff practice.

### **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.firelawscotland.org](http://www.firelawscotland.org)

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

The service now has annual appraisal in place and has an annual development plan.

### **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 an extensively detailed and fully completed self assessment document from the service provider. We were very impressed with the way this had been completed and with the information they had provided under each theme that we were inspecting.

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

7 service users were spoken with during the inspection and 7 care service questionnaires were received with comments. The views expressed were all very positive about the service. Here are some of the things people said:-

- I fully believe that if I had any issues or suggestions they would be listened to.
- Happy with the service.
- The support we get from this team is amazing: they are all excellent at their job and are warm and caring.
- We (my husband and I) have been delighted with the quality of service and have truly felt supported.
- The carers put in a lot of time and effort to ensure I am comfortable and they put me at ease.
- Yes staff always wear gloves and aprons when giving me personal care.
- I got given written information about the service when I started.



- Staff seem to love their job.
- They will stay longer if they need to.
- Once when I had run out of bread they got me some and dropped it in on their way past.

### **Taking carers' views into account**

2 relatives and 3 stakeholders (including, occupational therapist, care manager and hospital discharge nurse) were interviewed during the inspection. Other relatives views were aired in the 7 care service questionnaires received. Generally comments were very positive about the service and especially the staff. Here are some quotes that reflect the views expressed:-

- I have found the standard of care and help my husband received to be exceptional.
- A very professional approach was given at all times by all members of the team.
- Staff were always on time and spent valuable time to understand my husband's feelings and opinions.
- I, as a carer, was always given reassurance.
- I look after my dad and feel there is great support for me as well as my dad.
- My mother appreciates the work done by staff and would struggle without their care and service.
- The staff are very good and they even support me.

Stakeholders:

- This is an excellent service.
- Excellent team working which supports discharge planning.
- Excellent lines of communication (often daily) -- verbal or email regarding the needs of the patients requiring a service for discharge.
- The team feel very much involved with patient feedback obtained by the Enablement team and there is open discussion around any issues positive or negative.
- Proactive joint working taking forward any new initiatives / joint working to benefit the service user.
- Supports and enables a quicker discharge from the hospital setting.
- Optimises recovery from illness and injury for the patient.
- The assessment provided by enablement are invaluable when preparing for long term packages of care and ensure a clear picture is available prior to arranging services with providers.



### 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

This service provided a very good level of participation for service users who were routinely involved in assessing and improving care and support within the setting. Here are some of the service's strengths in this area:-

- The service had a service user involvement policy for homecare services which emphasised information sharing, consultation, and involvement. Face to face interviews were held with service users at the end of the enablement intervention to ascertain their opinions of the care they received. The service had set up service user and staff focus groups to look at improvement of the service. This was confirmed by staff during a focus group meeting with the inspector and it was felt that their views had resulted in improvements in the service. A service user who was interviewed confirmed he attended a focus group related to discharge from hospital.
- The service uses Dundee Celebrate Age Network, an independent advocacy group, to gather views face to face from service users. Findings were fed back to the service and any actions required were addressed. This service also gave people information on a whole range of resources they could access to address things like fitness, diet and social events.
- The complaints procedure was well publicised and service users have made use of this for individual issues. One complaint had been recorded and resolved by the service since the last inspection. The inspector saw the complaint procedure in service user's service agreements.

- Service users confirmed at interview that there were reviews of their personal plans at which they could have their say in their own care. Each service user now has a keyworker assigned to their case. This improves the links between service user needs and the service.
- Service users who were interviewed confirmed that the service listened to any issues they raised on an informal basis and were good at finding ways to address these problems. They felt they had a good working relationship with all staff. Staff confirmed that part of their role was to support people to connect with other agencies that could support them such as dieticians, fire safety, food banks and advice agencies.
- Carers spoken to felt that the service was alive to their needs and felt that they were listened to by staff.
- Annual surveys were sent out and service users returned them anonymously. The service then devised action plans as a result of feedback gained.

The inspector was impressed with the high standard of relationships staff had with service users and their families. This was seen as a strong basis from which the participation practice undertaken could be effective. It was clear the service were committed to listening and acting upon any feedback to improve outcomes for people.

### **Areas for improvement**

The service acknowledged that they could do more to gather information from wider stakeholders such as related health and social work professionals.

**Grade awarded for this statement:** 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

The service had a very good level of care provision for service users. The inspector was impressed with the way this large service received high levels of satisfaction from service users. Here are some examples of the strengths:-

- Service users and families who were interviewed were impressed with the way they were supported by the service. The identified tasks were carried out in an unhurried way and where changes were needed to the plan this was done quickly. Staff were seen as flexible and committed. One service user gave an example of where she had run out of bread and milk and her support worker had got this for her in between other visits she was doing. A commissioning health professional gave an example of where the service had gone out of its way to provide a man with a second worker at very short notice - so that this man did not have to go into hospital.
- The care plans that were inspected reflected the identified needs of the people the service was caring for, as well as more general information about their background, beliefs and health. All plans had stated goals for the care provided and contained good levels of detail around how tasks were to be carried out. Outcomes for service users gathered from interviews indicated that people felt the quality of their lives had improved due to the service's intervention. One service user stated that the service had made all the difference to her in managing to stay independent.
- Service users all confirmed that staff wore protective gloves and aprons while providing personal care.
- The service was very good at working in partnership with related agencies such as occupational therapist (with whom they share an office), district nursing and community mental health nurses. One health professional cites a case of the service working with them to prevent a crisis occurring for a person being supported.
- The service actively encouraged service users to tap into wider supports such as alcohol services, daycare support and the Dial-Op information line.
- The service worked closely with the meals service and any mental health services or those who needed them.
- The service works closely with a pharmacy technician on a pilot scheme to ensure that supported people have their medication effectively monitored and their abilities to self-administer assessed. The staff interviewed felt this system was invaluable to them when working with people in the community.

The inspector was impressed by the culture of care promoted by this service. Staff were alert to people's changing needs and to their wants and choices in life. This approach was non-judgemental and proactive as far as people and their care was concerned.

### **Areas for improvement**

It is to be hoped that the pharmacy technician pilot scheme is continued as this is having positive outcomes for service users and the way this service is provided.

**Grade awarded for this statement:** 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 1**

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

#### **Service strengths**

Please see Quality Theme 1 statement 1 for information in relation to this statement.

#### **Areas for improvement**

Please see Quality Theme 1 statement 1 for information in relation to this statement.

**Grade awarded for this statement:** 5 - Very Good

**Number of requirements:** 0

**Number of recommendations:** 0

### Statement 3

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

### Service strengths

The inspector was impressed with the high level of knowledge, commitment and professionalism of the workforce at this service. Here are some of their strengths:-

- Staff at the service had a high level of training. Staff interviews confirmed that all staff had been through an induction programme when they began work and that this included core training such as moving and handling, first aid and infection control. Staff also received training that they had identified as being useful for them such as stroke, Huntington's and diabetes. The service also provided vocational awards such as SVQ. Staff interviewed felt that if they identified a training need it would be addressed if it benefited their work role. Staff being interviewed said that because they worked closely with the NHS locally, if they needed training on a particular illness or syndrome there were always expert nurses who would come and give them a talk on the subject. Staff felt they benefitted from the support and guidance they got from working very closely with advisors on pharmacy, physiotherapy and occupational therapy. Outcomes for service users were that their care needs were addressed more quickly and effectively.
- Interviews with staff showed that they were all aware of the National Care Standards and could apply them to their work role. All spoken with confirmed they had been given SSSC codes of practice. When interviewed every service user felt that they were treated with dignity and respect by the staff they came into contact with.
- In interviews staff confirmed they had regular, and supportive supervision. An annual appraisal was now being rolled out to all staff. Those interviewed who had undergone appraisals felt the process helped them develop as professionals. There was confirmation of regular team meetings at which staff could freely express their ideas. Staff felt there were plenty of ways to hand over information on service users so that continuity of care was maintained.
- Staff all stated that they felt they were supported to do their job and their ideas were valued by management. All felt they were part of a team that was supportive. They felt they had the proper equipment to carry out care tasks and enough time to do their allotted jobs. Service users who were interviewed felt that staff were flexible with their time and if they needed extra this would happen.



- At inspection the inspector was able to observe enablement training going on for service staff and for staff of services who take over care when the time-limited enablement finished. This was done by the service to ensure continuity of care values. When the enablement service comes to an end staff will work alongside new services until a smooth transition is achieved.

The inspector was impressed with the knowledge, confidence and commitment of the staff he interviewed. He felt that the service was good at listening to staff issues and promoting an environment which valued staff and service users alike. Feedback from service users was universally positive with staff held in very high regard.

### **Areas for improvement**

The current frequency of staff supervision was only every 6 months and the inspector questioned this. Staff interviewed and organisers all felt that this worked well as staff could get supervision on request and that organisers and the manager of the service were always accessible.

**Grade awarded for this statement:** 6 - Excellent

**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**

Please see Quality Theme 1 statement 1 for information in relation to this statement.

### **Areas for improvement**

Please see Quality Theme 1 statement 1 for information in relation to this statement.

**Grade awarded for this statement:** 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

The service had a very good quality assurance system supported by its external provider and from within the service itself. Here are some of the strengths identified:-

- It is clear that the health and wellbeing of service users was at the core of what this service does with its person centred and detailed approach. (The information for this can be found in Quality Theme 1 statement 3).
- The service had a high level of participation whereby service users, staff and other stakeholders can have an input into what the service delivers. (The information for this can be found in Quality Theme 1 statement 1).
- The service had effective systems in place to support staff, to develop their skills via training and supervision - they also involve staff in developing the service. (The information for this can be found in Quality Theme 3 statement 3).
- The managers of the service attend their own regular meetings as well as a weekly diary meeting and wider network meetings held by the provider Dundee City Council. These allow managers to keep up-to-date with wider developments in care. The service is present on a variety of local forums such as winter planning, discharge from hospital group and domiciliary care forum.
- The organisers who manage the various teams that this service provides stated that they had been freed up to spend more time supporting staff now that they had administrative assistance with scheduling the work. There was also a new system in place for staff to log in and out of service users home. These times gave the service hard information on whether service users needed more or less time for their support. This information was useful for maintaining continuity of care and in interactions with other related health professionals.
- The service had both internal and external systems in place for auditing support plans and other aspects of the work they carried out.
- There was evidence of direct observation of staff practice by senior staff to ensure quality of provision. Staff interviewed saw this as an integral part of what they did and found it useful to address issues and to give positive feedback when they were providing good care.
- The service is continually planning its development and this was evidenced in its annual service plan which fed into and was informed by the provider's wider service plan. This outlined how the service was going to develop and who was responsible for achieving this. The current plan laid an emphasis on high standards of care, respecting people's rights and continuous learning framework for staff.

The inspector was impressed with the way that quality assurance was embedded within the ongoing practice of the service. It was seen as part of their whole approach to supporting people and tied in with their annual development plan - 'we provide a high standard of care and support.' (action 2 in team action plan)

### **Areas for improvement**

The service should continue to develop in a way outlined in their development plan to meet the challenging needs of home care service users.

**Grade awarded for this statement:** 5 - Very Good

**Number of requirements:** 0

**Number of recommendations:** 0

## 4 Other information

### Complaints

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

### Enforcements

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

### Additional Information

None noted.

### Action Plan

Failure to submit an appropriate action plan within the required timescale, including any agreed extension, where requirements and recommendations have been made, will result in the Care Inspectorate re-grading a Quality Statement within the Quality of Management and Leadership Theme (or for childminders, Quality of Staffing Theme) as unsatisfactory (1). This will result in the Quality Theme being re-graded as unsatisfactory (1).

## 5 Summary of grades

<b>Quality of Care and Support - 5 - Very Good</b>	
Statement 1	5 - Very Good
Statement 3	5 - Very Good
<b>Quality of Staffing - 5 - Very Good</b>	
Statement 1	5 - Very Good
Statement 3	6 - Excellent
<b>Quality of Management and Leadership - 5 - Very Good</b>	
Statement 1	5 - Very Good
Statement 4	5 - Very Good

## 6 Inspection and grading history

Date	Type	Gradings
10 Oct 2013	Announced (Short Notice)	Care and support 5 - Very Good Staffing 5 - Very Good Management and Leadership 5 - Very Good
21 Nov 2012	Unannounced	Care and support 4 - Good Staffing 4 - Good Management and Leadership 4 - Good

All inspections and grades before 1 April 2011 are those reported by the former regulator of care services, the Care Commission.

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هذه باي تسد سيم رونابز رگيد روا رولكش رگيد رپ شرازگ تعاشا هي

ਬੇਨਤੀ 'ਤੇ ਇਹ ਪ੍ਰਕਾਸ਼ਨ ਹੋਰ ਰੂਪਾਂ ਅਤੇ ਹੋਰਨਾਂ ਭਾਸ਼ਾਵਾਂ ਵਿਚ ਉਪਲਬਧ ਹੈ।

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