

1st Homecare Falkirk Support Service

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Telephone: 01324 633377

Type of inspection:

Unannounced

Completed on:

19 July 2018

Service provided by:

1st Home Care Ltd

Service provider number:

SP2005007703

Service no:

CS2006118500

About the service

1st Homecare Falkirk is registered to provide a support service to children, adults and older people living in their own homes and in the wider community. The provider has several housing support and care at home services operating in different parts of Scotland under the 1st Homecare name.

This service has been registered since April 2006. The office is in Falkirk but the care at home service is provided in Falkirk, Denny, Grangemouth, Bonnybridge and Polmont areas.

The 1st Homecare website states:

'1st Homecare delivers flexible support for people with an illness or disability who want the independence to continue living in their own homes...Our services are designed to fit around the individual and their lifestyle, whether it's just one hour a week or full-time live in care.'

What people told us

During this inspection we visited some people in their own homes and spoke with others over the telephone. We also received some feedback from people through questionnaires.

Most people told us they were happy with the support that they received from 1st Homecare, Falkirk. Some of the comments we received were:

'All the girls are very friendly and polite.'

'Although, by and large, we get the same group of carers, there are times when it becomes a bit haphazard.'

'They're a great bunch of lassies. I couldn't live at home without them.'

'The carers are fantastic but the office staff are poor.'

'Yes, I get my rotas regularly and the care is very good but I'm never confident that the office will return my calls.'

'I'm not confident with some of the younger staff showering me - can feel rushed.'

'Never call if no carer - I always have to phone to find out what's happening.'

'I do appreciate the service. The staff are very kind and makes life more bearable for me.'

'The service is excellent.'

'The staff who support my husband are generally skilled and helpful but we don't always know who's coming.'

'The carers are very good, the office staff are incompetent.'

'I ask on the phone that the person in charge calls me back...I'm still waiting for that call!'

'Over the past year, I have been happy with my carers and 1st Homecare. I have found them to be approachable and supportive.'

'My present carers are kind, supportive and professional.'

Self assessment

The service had not been asked to complete a self assessment in advance of the inspection. We looked at their development plan and quality assurance paperwork. These demonstrated their priorities for development and how they were monitoring the quality of provision within the service.

From this inspection we graded this service as:

Quality of care and support	4 - Good
Quality of staffing	4 - Good
Quality of management and leadership	4 - Good

Quality of care and support

Findings from the inspection

The inspection of this service found that the manager and staff provide a good level of care and support.

As part of the inspection, we sampled some service user support plans. We saw that the plans had a detailed description of the support to be provided, identified the needs of the service user and included the outcome focussed assessment and care plan from the local authority. We discussed with the manager that not everyone we met had the necessary documentation in their home and steps were immediately taken to rectify this. The manager agreed that this is an area for improvement within the service.

Risk assessments were in place detailing some of the risks that people and staff could face and control measures to reduce these risks. This means that people using the service can be reassured that staff are supporting them to be as safe as possible.

Service users and their relatives/carers told us that continuity of staff was important to them. This reassured them that the quality of care would be maintained as the staff knew their needs, preferences and choices. Consistency of staffing was generally good and we saw evidence of people receiving support from small groups of staff who they were familiar with. People told us that staff were competent and caring and were generally on time, though some mentioned cancellations or missed visits.

The service had improved on the number of missed visits since our last inspection. Where visits had been missed, the causes had been identified to reduce the risk of further missed visits, the relevant health professionals were contacted, particularly if medication had also been missed, and letters of apology were sent.

We saw evidence of improvements in communication and engagement with people using the service and their relatives. However, this continues to vary. A small number of people we spoke to felt that not enough was being done by management to address communication issues. They told us that they did not always feel confident that their issues would be addressed or passed on to the relevant person when they telephoned the office. The manager advised that she was recruiting new staff to work in the office and that this is a significant area of

development within the service. The recommendation regarding communication made at the previous inspection is being repeated. **(See recommendation 1.)**

Requirements

Number of requirements: 0

Recommendations

Number of recommendations: 1

1. People using the service should have confidence that if they contact the office, their information will be acted on or passed on appropriately and they will be contacted if they need or request a reply.

This is to ensure care and support is consistent with the Health and Social Care Standards which state that 'I am confident that people respond promptly, including when I ask for help.' (HSCS 3.17).

Grade: 4 - good

Quality of staffing

Findings from the inspection

The inspection of this service found that it had a good performance for quality of staff.

People who use the service spoke very highly of all the staff who care for them.

During the inspection we sampled staff files which included evidence of the service's recruitment and selection process. A recruitment checklist offered an overview of the recruitment process. We could see that the service followed good practice in this area, ensuring that safer recruitment processes were followed with a full written employment history, two references and the necessary safety checks being carried out.

Induction and shadowing opportunities were in place for all new staff and a carer told us that shadowing was 'a really good experience' as it helped her to understand the role and standards of care expected.

Staff we spoke to felt valued by the service and supported by the management team in their day-to-day work. All staff had received supervision with their line manager in the past three months. Staff meetings were held regularly and there was good evidence of participatory discussions taking place. These meetings were well-attended, minuted and evidenced discussion on a range of topics relevant to a care at home service.

We saw that the majority of training was done remotely through e-learning. Training records were being maintained and the service was alerted when refresher training was due. Whilst e-learning was a positive part of training it did not enable discussion or reflection of practice. The managers had addressed this through competency assessments which were held with staff during spot checks on their practice. We discussed with the manager the need to broaden the range of competencies being assessed and felt this was still an area for improvement although the recommendation made at the previous inspection has been met.

We visited some people receiving services while staff were present and saw good humoured, friendly, cheerful interactions with staff having good relationships with the people they were supporting.

Requirements

Number of requirements: 0

Recommendations

Number of recommendations: 0

Grade: 4 - good

Quality of management and leadership

Findings from the inspection

We thought that the management and leadership within the service was operating at a good level.

Some issues discussed in 'Quality of Staffing' are relevant to this theme, for example staff supervision and team meetings. Audits carried out by the management team included unannounced observations of care being delivered and resulted in detailed action plans which the manager was making good progress with. This gave the manager the opportunity to look at staff practice, evaluate learning and informally discuss the quality of support being provided by the service.

Review and monitoring of the systems, to check visits to service users and times of visits were carried out by co-ordinators and audited by the depute manager to identify where there were any issues.

Timings of visits had been raised with us by a couple of service users or their relatives during our inspection and we discussed this with management. We saw that action had been taken to attempt to resolve the identified issues, including phone calls and face-to-face meetings to discuss and remedy the situation.

The service had recently distributed questionnaires to service users and relatives seeking information about the quality of the support provided. We saw that there had been a very good response to the questionnaires. The manager recognised that these areas, including communication, were important and had a clear plan to prioritise the work she was doing.

Requirements

Number of requirements: 0

Recommendations

Number of recommendations: 0

Grade: 4 - good

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

Previous requirements

Requirement 1

The provider must ensure that safe medication practice is maintained.

The provider must ensure that staff medication administration is observed to ensure correct practice. Methods to audit medication records must be maintained.

The medication support needs of service users must be reviewed and the level of support people need identified. This must include identifying if individual service users require medication to be "prompted" or "administered".

Where medication is administered records of administration must be accurately and consistently maintained.

This is to comply with The Social Care and Social Work Improvement Scotland (Requirement for care services) Regulation 2011/210 Regulation 4 (1) (a)(b) - Welfare of users, and should also take account of the National Care Standards, Care at home, Standard 4.

Timescale for implementation: within four weeks of the receipt of this report.

This requirement was made on 10 August 2017.

Action taken on previous requirement

We looked at medication records and practice and could see that records were accurately maintained. Staff were knowledgeable about the difference between 'administering' and 'prompting' medication and had received updated training.

Met - within timescales

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

Previous recommendations

Recommendation 1

The service should improve missed visit recording by noting the effect of a missed visit on the person using the service. Where medication has not been taken medical advice should be sought to identify any further action needed.

National Care Standards. Care at home. Standard 4 Management and staffing.

This recommendation was made on 10 August 2017.

Action taken on previous recommendation

We could see that missed visits had significantly reduced and that the service noted the effect and contacted the appropriate health professional for further advice.

Recommendation 2

People using the service should have confidence that if they contact the office their information will be acted on and passed on appropriately. They will be contacted if they need a reply.

National Care Standards. Care at home Standard 4 (6): Management and staffing.

This recommendation was made on 10 August 2017.

Action taken on previous recommendation

People told us that they were not always confident that if they contact the office that their information would be acted upon or passed on appropriately. This recommendation has been repeated.

Recommendation 3

The service should ensure that methods are put in place to evaluate the effectiveness of e-Learning undertaken by individuals to confirm it is having a positive impact on the care and support provided by the individual staff who are undertaking the training.

National Care Standards. Care at home. Standard 4. Management and staffing arrangements.

This recommendation was made on 10 August 2017.

Action taken on previous recommendation

The service now undertakes regular observed practices to evaluate the effectiveness of e-learning. Reflective discussions about learning that had taken place was also evident in supervision notes.

Recommendation 4

Where changes to care are identified as needed following a review personal plans should be updated to reflect these changes and ensure staff have the correct information to provide care.

National Care Standards. Care at home. Standard 4. Management and staffing.

This recommendation was made on 10 August 2017.

Action taken on previous recommendation

All personal plans sampled had been reviewed within the past six months and contained relevant, up to date information to ensure staff had the correct information to provide care.

Recommendation 5

The service should ensure that relatives are fully involved and consulted in the reviews carried out by the service.

National Care Standards. Care at home. Standard 4. Management and staffing.

This recommendation was made on 10 August 2017.

Action taken on previous recommendation

All files samples had a recent review where we could see relatives had been fully involved and consulted upon. All relatives or representatives had signed the review paperwork.

Complaints

There have been no complaints upheld since the last inspection. Details of any older upheld complaints are published at www.careinspectorate.com.

Enforcement

No enforcement action has been taken against this care service since the last inspection.

Inspection and grading history

Date	Type	Gradings
22 Jun 2017	Unannounced	Care and support 4 - Good Environment Not assessed Staffing 4 - Good Management and leadership 3 - Adequate
24 Jan 2017	Unannounced	Care and support Not assessed Environment Not assessed Staffing Not assessed Management and leadership Not assessed
24 May 2016	Unannounced	Care and support 2 - Weak Environment Not assessed Staffing 3 - Adequate Management and leadership 2 - Weak
16 Nov 2015	Unannounced	Care and support 3 - Adequate Environment Not assessed Staffing 3 - Adequate Management and leadership 3 - Adequate

Date	Type	Gradings
12 Mar 2015	Unannounced	Care and support 4 - Good Environment Not assessed Staffing 4 - Good Management and leadership 4 - Good
13 Mar 2014	Announced (short notice)	Care and support 5 - Very good Environment Not assessed Staffing 5 - Very good Management and leadership 4 - Good
22 Feb 2013	Unannounced	Care and support 5 - Very good Environment Not assessed Staffing 5 - Very good Management and leadership 4 - Good
29 Nov 2011	Unannounced	Care and support 4 - Good Environment Not assessed Staffing Not assessed Management and leadership 4 - Good
4 Nov 2010	Announced	Care and support 5 - Very good Environment Not assessed Staffing Not assessed Management and leadership Not assessed
23 Oct 2009	Announced	Care and support 4 - Good Environment Not assessed Staffing 4 - Good Management and leadership 4 - Good

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