

1st Homecare Falkirk Support Service

Unit 6b
Callander Business Park
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Telephone: 01324 633377

Type of inspection:

Unannounced

Completed on:

31 May 2019

Service provided by:

1st Home Care Ltd

Service provider number:

SP2005007703

Service no:

CS2006118500

About the service

1st Homecare is a subsidiary company to Real Life Options which provides care services across the UK. They currently have services in five areas of Scotland: Fife, Falkirk, Aberdeen, Irvine and Dumfries.

The Falkirk branch is registered to provide a support service to children, adults and older people living in their own homes. It was identified during the Inspection that changes were required to the registration of the service and the Care Inspectorate, provider and service agreed how this would progress.

The service is well established (2006) and has a modern and accessible office base in Calendar Park in Falkirk. They provide services in the Falkirk areas including Denny, Grangemouth, Bonnybridge and Polmont.

At the time of the inspection approximate 180 people were using the service.

1st Homecare state that their vision is to be recognised as leaders in enabling people to reach their potential with a purpose of providing excellent social care and support.

The service has developed over the past five years and is a key partner in delivering support services commissioned by Falkirk's Health and Social Care Partnership.

What people told us

Prior to the inspection, we provided questionnaires for people using the service and their relatives. We asked them about their experience of 1st Homecare. Comments included:

'Huge improvements have been made in the past few years. I would put this down to good management and reliable staff. May the good service continue, cannot fault anyone that works here would recommend this company to anyone requiring care'

'Overall my care company has supported me well, I find office staff approachable and supportive where possible. I receive a weekly staff rota and this is helpful. I have a few concerns'

'It is helpful to keep one of the team who come in on a regular basis. This has an effect on our morning call if two people are paired up and don't have knowledge of the client'.

We visited people in their homes and we spoke with others on the telephone (this included relatives).

People experienced stability in their care and support and most had confidence in the service. The majority described staff who were courteous and respectful with a friendly and positive manner. People were confident that if they contacted the office, their information would be acted upon. It was evident that the consistent level of care and support provided was having a positive impact upon their quality of life and in most cases was enabling those individuals to remain in their own homes.

Self assessment

A self assessment was not required. We considered the service development plan as part of the Inspection process.

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

What the service does well

People should have confidence in the staff and organisation providing their care and support. This means that their care should be planned and met by the right number of staff. We found that people were informed of their visiting staff and that a small consistent team provided that support. When new staff were introduced, they usually worked alongside experienced staff for a period and observed (shadowed) their practice.

People told us that their visit timings worked for them and that staff did have the time to support and care for them. One or two people had previously experienced visit times that didn't work but they had taken this forward with 1st Homecare and did feel that the service had responded to their concerns. At the last inspection, we made a formal recommendation that the service improves upon how it responds to people's feedback or requests. We saw positive progress and concluded that the recommendation had been met.

People should be able to choose to have an active life. Participating in a range of recreational, social, creative, physical and learning activities every day, both indoors and outdoors is vital in supporting people to achieve their wellbeing and their potential. Many of the people we spoke with had a level of social support from the service. This included shopping, paying bills, cafes and pursuing leisure interests. All we met spoke highly of the staff and it was evident that the quality of the relationship and support was enabling those people to be well, maintain their homes and enjoy their lives. Staff should promote meaningful movement and independence to support all with their daily routines. Enabling people to maintain their living skills maintains people's health and support people's wellbeing and sense of worth.

People choosing and using services must be confident that the people who support and care for them have been appropriately and safely recruited. We saw that the provider had robust systems in place to ensure those employed were suitable for the role and met legal and training requirements. We saw how the support of colleagues was enabling new staff to recognise their own skills and strengths. They told us they felt well supported, included and were looking forward to their future in the profession.

We asked staff about what was important to them in their work. All spoke respectfully of the people they supported, comments included, 'I am a people person, its important the people are comfortable in their own home'. They told us enthusiastically of how they improved people's quality of life, including supporting a young person to integrate in their community which led on to voluntary work. We heard several examples of building people's confidence and life opportunities.

People's care experience benefits when a service has a culture of continuous improvement. This means that the service actively measures the quality of the support they provide (through quality assurance processes) and then

responds to the findings. Questionnaires, visits and feedback from professionals told us that 1st Homecare was committed to developing and we saw how the dedication and responsiveness of the senior team had sustained that improvement.

Moving forward, 1st Homecare should ensure that their quality assurance processes are used consistently to evaluate the aspects of service delivery we have reported on under the next section of this report.

What the service could do better

People should be meaningfully involved in how they are supported and cared for. This is important in meeting people's health and social care needs and in ensuring that their care is consistent. We saw that 1st Homecare carry out regular courtesy calls, both in the home and by telephone. This gave people the opportunity to discuss the quality of their care and to review their personal plan.

We accompanied staff on two review visits and looked at several more review documents. Whilst people were confident that the service was working for them, we saw the quality of the review process could be strengthened. One person we met commented that they were raising a concern discussed at the last review - so for them - the outcome could have been better. We saw occasions when the review process and document missed changes in people's circumstances, including new equipment available.

Personal plans were not always updated to reflect changes and whilst the service responded promptly and took action, changes must be made to ensure that the staff have the confidence and competence to support a review of care that is worthwhile.

The service should develop a more outcome focused way of recording information through reviews and personal plans so that they can demonstrate that people are meaningfully involved and receiving care and support that worked for them. The principles and outcomes included in the Health and Social Care Standards (My Support, My Life) 2017 should be considered. See Area for Improvement 1.

People should be confident that those supporting them are trained, competent and skilled. People using the service told us that staff seemed to be mainly learning through e-learning (on-line) which staff confirmed. Staff told us that this learning was useful and in-depth - and that they did have to demonstrate to management how this increased their knowledge. There are though circumstances that can be more specific to individuals when other learning supports are needed. This could include people with a dementia diagnosis or neurological conditions. The provider acknowledged that a 'blended' approach to staff's development is necessary and we will measure how this has progressed at our next inspection visit. This should include opportunities to strengthen the leadership capabilities of those with enhanced roles. See Area for Improvement 2.

We looked at some policies which guide staff's practice - including finance, medication and adult support and protection. We provided feedback to the manager around areas to be reviewed to ensure that practice is consistent. For example, the way that staff record how they managed people's receipts and shopping. The service responded during the inspection with information sent to all staff. Going forward, policies and processes should remain a focus of discussion during staff meetings to ensure that practice is consistent and people using the service understand what standards and processes are in place.

Requirements

Number of requirements: 0

Recommendations

Number of recommendations: 2

1. The service should ensure that staff involved in reviewing people's care and support and personal plans are competent and skilled. A more outcome focused review process and personal plan should be developed that is reflective of the person receiving the support. This should include identification of individual outcomes and goal planning as well as the support required to work towards achieving these. Details of outcomes and actions agreed through six monthly reviews of personal plans must be evidenced. This would enhance the quality and consistency of support provided.

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

'I am fully involved in assessing my emotional, psychological, social and physical needs at an early stage regularly and when my needs change'. (HSCS 1.12)

'I am assessed by a qualified person, who involves other people and professionals as required'. (HSCS 1.13)

'My personal plan is right for me because it sets out how my needs will be met as well as my choices and wishes'. (HSCS 1.15)

2. The provider should ensure that it has a comprehensive staff training plan appropriate to the needs and roles of the staff team and the people that they support. This should meet identified needs and link to staff's supervision and appraisal.

This is to ensure care and support is consistent with the Health and Social Care Standard which state that: ' I have confidence in people because they are trained, competent and skilled and are able to reflect on their practice and follow their professional and organisational codes'. (HSCS 3.14)

Complaints

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

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

Previous requirements

There are no outstanding requirements.

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

Previous recommendations

Recommendation 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 Health and Social Care Standard 3:17 which state that 'I am confident that people respond promptly, including when I ask for help'

This recommendation was made on 19 July 2018.

Action taken on previous recommendation

We asked several people of their experience of contacting the office based staff. All told us that the office based team were respectful and responsive. We could see through documents and electronic systems sampled that concerns were documented and followed up. The depute manager wrote to individuals if the service had not met their expectations. This meant that people's views were acknowledged and valued by the service.

Inspection and grading history

Date	Type	Gradings
19 Jul 2018	Unannounced	Care and support 4 - Good Environment Not assessed Staffing 4 - Good Management and leadership 4 - Good
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

Date	Type	Gradings	
		Staffing Management and leadership	3 - Adequate 2 - Weak
16 Nov 2015	Unannounced	Care and support Environment Staffing Management and leadership	3 - Adequate Not assessed 3 - Adequate 3 - Adequate
12 Mar 2015	Unannounced	Care and support Environment Staffing Management and leadership	4 - Good Not assessed 4 - Good 4 - Good
13 Mar 2014	Announced (short notice)	Care and support Environment Staffing Management and leadership	5 - Very good Not assessed 5 - Very good 4 - Good
22 Feb 2013	Unannounced	Care and support Environment Staffing Management and leadership	5 - Very good Not assessed 5 - Very good 4 - Good
29 Nov 2011	Unannounced	Care and support Environment Staffing Management and leadership	4 - Good Not assessed Not assessed 4 - Good
4 Nov 2010	Announced	Care and support Environment Staffing Management and leadership	5 - Very good Not assessed Not assessed Not assessed
23 Oct 2009	Announced	Care and support Environment Staffing Management and leadership	4 - Good Not assessed 4 - Good 4 - Good

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