

Care service inspection report

Oran Home Care

Support Service Care at Home

Birkbrae
Blebo Craigs
Cupar
KY15 5UG

Inspected by: Patsy McDermott

Type of inspection: Announced

Inspection completed on: 15 July 2013



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Contents

	Page No
Summary	3
1 About the service we inspected	5
2 How we inspected this service	7
3 The inspection	10
4 Other information	20
5 Summary of grades	21
6 Inspection and grading history	21

Service provided by:

Oran Home Care Ltd

Service provider number:

SP2011011724

Care service number:

CS2011303568

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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

The service was very good at making sure care was given in the way people preferred. There was an emphasis on person centred planning and physical wellbeing which improved outcomes for the people using the service.

What the service could do better

The service had identified a number of areas for improvement within the self assessment which they had submitted to the Care Inspectorate prior to the inspection. These included: Continuing to develop strategies to involve service users in quality audit process and use this information to inform development plan. Review and develop the health and well-being policy. The service also aimed to create further links and strengthen existing links within the local care framework.

What the service has done since the last inspection

This was the first inspection of the service

Conclusion

Overall, we found the service was offering people flexible and personalised support. The people using the service said they were very satisfied with the service they received.

Who did this inspection

Patsy McDermott

1 About the service we inspected

The Care Inspectorate regulates care services in Scotland. Prior to 1 April 2011, this function was carried out by the Care Commission.

Information in relation to all care services is available on our website at www.careinspectorate.com.

Requirements and recommendations

If we are concerned about some aspect of a service, or think it could do more to improve its service, we may make a recommendation or requirement.

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

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

Oran Homecare was registered with the Care Inspectorate on 28 August 2012. This is a small service providing domestic and care support to six older people. The service hopes to expand in the future and staff have been recruited locally.

The aims of the service are:

To provide a person-centred service tailored to meet the unique needs of each of our individual clients.

To provide a flexible service that can respond to the changing needs of our clients.

Work in partnership with clients to meet their personal goals.

Provide a service that promotes independence and where appropriate, support clients to be active participants in their care and where possible support re-enablement programmes.

Where appropriate, involve relatives and friends in the planning of care.

Provide a service that acknowledges that the rights, dignity, privacy and welfare of service users are the cornerstone of our care.

Build a team of well trained, experienced staff who are appropriately paired with their client to deliver the care.

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 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 following a short notice announced inspection. The inspection was carried out by Inspector Patsy McDermott and took place over one week. The inspection began on 10 July 2013 and feedback was given to the manager and director on 15 July 2013.

As part of the inspection, we took account of the annual return and self assessment forms that we asked the provider to complete and submit to us.

We sent out 4 care standard questionnaires and 3 were completed and returned to us before the inspection.

During this inspection we gathered evidence from various sources, including the following:

We spoke with the director and the manager

We looked at:

- * Minutes of Involvement and liaison meetings
- * Accident and Incident records
- * Complaint records and follow up actions
- * Service user support plans
- * Training records
- * Policies and procedures of the service

All the above information was taken into account during the inspection process and was used to assess the performance of the service in relation to a number of Quality Statements.

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

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 service were able to identify a variety of positive outcomes for tenants showing how they are supported within their homes. We agree with the evaluation the service has recorded. In their assessment, the service graded themselves as excellent or very good in all areas. This grade had been based on the findings from audits and also service user, relative and staff feedback. During the inspection we found a range of very good evidence to confirm this and also grade the service as very good in areas of participation and involvement and health and wellbeing.

Taking the views of people using the care service into account

We sent out 4 questionnaires and 3 were completed and returned to us before the inspection. Every one said they were happy with the quality of care and support the service provided.

Comments from service users included:

"All staff involved have easily and naturally developed a respectful, caring, professional relationship with my mother, father and other members of the family."

"They are excellent. They have helped me in so many ways. They are always reliable and on time. In the beginning they phoned to ask how everything was going."

They do what you want them to do. When I came out of hospital they came right away when I phoned. They are happy to change the time of my visit if I am busy."

Taking carers' views into account

We did not speak to any relatives during the inspection.

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

The service's self assessment told us about most of the ways they supported people to participate in assessing and improving quality. When asked to grade themselves on this statement, the service told us they were very good in this area.

The service identified some of their strengths as: "We are pro-active in seeking feedback from all our stakeholders and we routinely ask service users for feedback and comments on how the service could be improved.

Daily Client Log: This includes a box for service users and carers to comment on the care and support provided during each session.

Service user questionnaires: Commencing at the end of the first week, the client is formally asked for feedback about the care and support they have received through questionnaires. Questionnaires on care and support are used on an on going basis throughout the year."

We sampled some of the evidence provided, looked at the information in the self assessment and found that the service had a very good level of performance. These strengths had a positive impact on people using the service.

There was routine involvement of service users and relatives in service development and evaluation. The service used a variety of methods to promote this, such as policies which were distributed with the quarterly newsletter and service user surveys which informed the business plan and the self assessment. They had responded to people's views and we saw this had resulted in continued improvements to the quality of care such as the development of the services website forum for relatives where they could openly discuss any queries and concerns with other relatives.

The service had also introduced a system of 'unannounced visits' carried out by the director. This meant that service users were able to provide feedback about the service they received on a regular basis and in a situation they were comfortable with. The service had found this approach successful and had been able to respond to feedback about support on an on going basis.

Overall, we felt that the service supported an inclusive approach with opportunities to build on, and encourage more service users to be involved in improving the service.

Areas for improvement

In the self assessment submitted by the service the manager had identified the following areas for improvement:

"Ensuring all policies reflect our quality assurance processes and that assessment and evaluation is built in to every aspect of our care service.
Continuing to develop strategy of involving service users in quality audit process and use this information to inform development plan."

We discussed with the manager the need to ensure service users were aware of the local advocacy service and to keep this information updated.

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's self assessment told us about most of the ways they supported people to participate in assessing and improving quality. When asked to grade themselves on this statement, the service told us they were very good in this area.

The service identified some of their strengths as: "Oran Homecare supports service users in identifying and articulating personal health and wellbeing needs through the care plan assessment. This leads to the service users setting personal health and wellbeing goals. Our medication training instructs staff in knowledge, best practice and skills required to work with service users. Each staff members training is given at induction and reviewed regularly."

During the inspection we examined some of the evidence presented, the information from the self assessment and spoke to service users and staff. We confirmed that the service was working at a very good standard in promoting the health and wellbeing needs of service users.

We examined three care plans in detail. We found some good clear detail especially in areas of assessment and communication. We saw that staff demonstrated a sound understanding of the communication needs of all service users and this was also detailed in the care plans we looked at. This meant that staff were aware of the needs and preferences of each service user and the support offered was sufficient to meet the persons needs.

The service had a distinct emphasis on physical wellbeing. We saw that they provided dietary advice through leaflets and directing clients to other sources of information that may be relevant to their dietary needs. For example one service user needed help to shop. The worker discussed healthy eating guidance already issued during the initial assessment and planned the shopping around the menu she had developed with the service user. The service should continue to promote this good practice to ensure all service users experience a sense of control over their lives.

Service users had been involved in self medication assessment and this had been reviewed every six months or as required. Full medication administration policies and procedures were in place for staff and we confirmed that training had been undertaken in the administration of medication.

Staff attended a variety of training related to health and well being which supports their practice on a day to day basis and ensures service users receive the appropriate care. This includes, Nutrition, Adult Support and Protection and Moving and Handling.

Service users were aware of the training staff attend which again builds their confidence in staff and their abilities.

We felt the staff in the service were an important element in demonstrating the person centred values of the service and helping people achieve their planned outcomes.

Overall, we found that the service was offering care and support that met a very good standard. Plans were designed to meet specific needs and were carried out with well trained and experienced staff.

Areas for improvement

In the self assessment submitted by the service the manager had identified the following areas for improvement:

"Review and develop the health and well being policy. Create further links and strengthen existing links within the local care framework.

Continue to develop content on health and well being in the newsletter."

We agreed with the goals in the self assessment and thought that the areas for improvement identified were very worthwhile.

We identified one area for improvement. In one of the care plans we looked at we noted the date on the medication assessment was unclear. We feel this could cause some confusion about how up to date the information was. The director advised this had been completed during the initial assessment but agreed these would be clearly dated in the future.

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

Evidence in support of this statement can be found in Quality Theme 1 Quality Statement 1.

Areas for improvement

Evidence in support of this statement can be found in Quality Theme 1 Quality Statement 1.

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 service's self assessment told us about most of the ways they supported people to participate in assessing and improving quality. When asked to grade themselves on this statement, the service told us they were very good in this area.

The service identified some of their strengths as:

"We have in place a training and development policy to ensure that an on-going programme of training and development is in place.

All staff are familiar with the SSSC Code of Conduct and receive copies, we have also developed a staff Code of Conduct specifically for Oran Homecare staff that is included in the staff handbook.

All staff receive Induction and we have an Induction Policy and Procedure. This Induction includes classroom setting training, shadowing, supervised work and on-going assessment over a 12 week period.

All staff receive annual appraisals, which help identify individual training and development needs."

We looked at staff files, spoke to the director and manager and service users about the quality of the staff. We also looked at the policies and procedures around staff and their learning.

The evidence provided in the self assessment as well as the information provided on the day of the visit was very informative and identified a very good level of performance in relation to this statement.

We saw that the service had a robust recruitment procedure in place and all appropriate checks were in place to protect service users. A process of supervision and appraisal supported access to training and continual learning. Service users were involved in the appraisal process and we saw their thoughts about the staff member was a part of the appraisal system. We felt staff showed a high level of motivation in putting their learning into practice and keen to share their learning with others. This had proved to be beneficial in establishing effective and consistent care and improving outcomes for the service users.

A comprehensive induction system was in place which provided information and training on a range of key areas such as policy, procedure, person centred practice, codes of conduct and Oran Homecare Codes of conduct.

New staff within the service were given supervision weekly for the first four weeks then monthly to support their individual learning and development. We also saw one staff member was working with a service user with dementia and we confirmed dementia training had recently been provided. This is very good practice and enabled new staff to learn about the service and the systems in a very hands on and practical way. New staff follow a process of competency based on observation and reflective discussion on their practice. This ensures they have the right skills to meet the needs of the people using the service.

As the service was very small staff meetings had not yet began as the manager and director seen the three staff regularly and were able to offer support on an on-going basis. The manager advised regular team meetings were planned as the service increased.

These processes assisted the manager to monitor and further develop staff understanding of their role and the expected standards of care. It also contributed to the development of the yearly training plan and the training requirements of the staff team. We felt the service was proactive in identifying staff training which would enhance the knowledge and skills of the staff to help people using the service meet their personal outcomes.

Areas for improvement

In the self assessment submitted by the service the manager had identified the following areas for improvement:

"As the team grows find more opportunities for staff to come together for briefing and debriefing sessions.

Be aware in changing practices by allocating regular time for research and reading, this will ensure we keep up to date with best practice and procedures, including changes to legislation and National Care Standards.

Expand skills in team."

As there were only currently three staff members employed by the service we felt there was very good management support for everyone. We hope this will continue as the service expands.

Grade awarded for this statement: 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

Evidence in support of this statement can be found in Quality Theme 1 Quality Statement 1.

Areas for improvement

Evidence in support of this statement can be found in Quality Theme 1 Quality Statement 1.

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's self assessment told us about most of the ways they supported people to participate in assessing and improving quality. When asked to grade themselves on this statement, the service told us they were very good in this area.

The service identified some of their strengths as:

"Service users, staff and stakeholders are integral to the on-going quality audit process:

The collated information from Client Care Logs, Service User Questionnaires, Discussions with Clients, Team meetings, Staff questionnaires and staff input at briefing and debriefing sessions are used as a basis for the audit process.

We produce appropriate action plans in response to any identified areas for improvement in the audit. These action plans include achievable timescales and identify who is responsible for the implementation of the plans."

We found that the service was delivering high quality care resulting in very good outcomes for people using the service. At this inspection we looked at quality assurance policies and audits and spoke to service users and staff.

We saw there were a range of checks in place to ensure the on-going monitoring of the service. These included:

- * Weekly meetings with the manager and directors. We saw from the documents provided that any issues or concerns were dealt with and an action plan with timescales was developed.
- * The service had an annual development plan. This included targets set from questionnaire feedback and audits of the service.
- * Service users and staff were seen to be involved in the self assessment process and questions from the Care Inspectorate Questionnaires were included in the surveys done by the service.
- * The introduction of 'unannounced visits' being carried out on a regular basis had proved to be a successful monitoring tool for senior staff. In particular, they were able to observe practice which was then discussed in supervision. This gave the manager a clear indication of the standard of service delivery and ensured this remained consistent.

During the inspection, we saw that the service had systems and procedures in place that ensured service users' needs were being met. This included regular checks of support plans by the manager, collation of feedback, review of any complaints, accidents or incidents and ensuring staff supervision was up to date.

Overall, the systems used by the service ensured that a very good standard of service delivery was maintained and continually developed. The involvement of service users and staff ensured that a wide variety of opinions were heard. We felt the service demonstrated a commitment to quality assurance processes which were inclusive and effective in maintaining very good outcomes for service users.

Areas for improvement

In the self assessment submitted by the service the manager had identified the following areas for improvement:

"Continue to make evaluations and audits integral to all aspects of the service."

We saw that the monthly audits had just started and would suggest these continue to be done monthly to ensure the service is regularly monitoring the quality of the service.

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

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

Quality of Care and Support - 5 - Very Good	
Statement 1	5 - Very Good
Statement 3	5 - Very Good
Quality of Staffing - 5 - Very Good	
Statement 1	5 - Very Good
Statement 3	5 - Very Good
Quality of Management and Leadership - 5 - Very Good	
Statement 1	5 - Very Good
Statement 4	5 - Very Good

6 Inspection and grading history

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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Translations and alternative formats

This inspection report is available in other languages and formats on request.

Tha am foillseachadh seo ri fhaighinn ann an cruthannan is cànan eile ma nithear iarrrtas.

অনুরোধসাপেক্ষে এই প্রকাশনাটি অন্য ফরম্যাট এবং অন্যান্য ভাষায় পাওয়া যায়।

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

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本出版品有其他格式和其他語言備索。

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