

Inspection report

Gowrie Care Limited - Perth & Kinross Outreach - Care at Home Support Service

1st Floor
8 Atholl Crescent
Perth PH1 5NG

Inspected by: Shona Adam
(Care Commission Officer)

Type of inspection:

Inspection completed on: 31 March 2009

Service Number

CS2004078943

Service nameGowrie Care Limited - Perth & Kinross Outreach -
Care at Home**Service address**1st Floor
8 Atholl Crescent
Perth PH1 5NG**Provider Number**

SP2003000083

Provider Name

Gowrie Care Ltd

Inspected ByShona Adam
Care Commission Officer**Inspection Type****Inspection Completed**

31 March 2009

Period since last inspection

11 months

Local Office AddressCentral East Region
Compass House
11 Riverside Drive
Dundee DD1 4NY

Introduction

Gowrie Care Perth and Kinross Outreach has been registered with the Care Commission since March 2005. The branch has recently been reconfigured and now consists of one service for people who misuse alcohol or drugs and/or people who have mental health problems. The service provided may be either housing support, care at home or a combination of both care at home and housing support.

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

Quality of Care and Support - 5 - Very Good

Quality of Staffing - 5 - Very Good

Quality of Management and Leadership - 5 - Very Good

This inspection report and grades represent the Care Commission's 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. Please refer to the care services register on the Care Commission's website (www.carecommission.com) for the most up-to-date grades for this service.

Basis of Report

Before the Inspection

This report was written following an announced inspection that took place on the 16 February 2009 by Care Commission Officer Shona Adam.

Before the Inspection

The Annual Return

The service submitted a completed Annual Return as requested by the Care Commission.

The Self-Assessment Form

The service submitted a self-assessment form as requested by the Care Commission

Regulation Support Assessment

The inspection plan for this service was decided after a Regulation Support Assessment (RSA) was carried out to determine the intensity of inspection necessary. The RSA is an assessment undertaken by the Care Commission Officer (CCO) which considers complaints activity, changes in the provision of the service, nature of notifications made to the Care Commission by the service (such as absence of a manager) and action taken upon requirements. The CCO will also have considered how the service responded to situations and issues as part of the RSA.

This assessment resulted in this service receiving a low RSA score and so a low intensity inspection was required. The inspection was based on the relevant Inspection Focus Areas and associated National Care Standards, recommendations and requirements from previous inspections and complaints or other regulatory activity.

Evidence was gathered from the following sources;

Interview with the manager

inspection of :

- Personal Plans
- Risk assessments
- Policies and procedures
- sample of staff PDRS folders
- responses from staff questionnaires
- responses from service user questionnaires

Inspection Focus Areas and links to Quality Themes and Statements for 2008/09

Details of the inspection focus and associated Quality Themes to be used in inspecting each type of care service in 2008/09 and supporting inspection guidance, can be found at:

<http://www.carecommission.com/>

Fire Safety Issues

The Fire (Scotland) Act 2005 introduced new regulatory arrangements in respect of fire safety, on 1 October 2006. In terms of those arrangements, responsibility for enforcing the statutory provisions in relation to fire safety now lies with the Fire and Rescue service for the area in which a care service is located. Accordingly, the Care Commission will no longer report on matters of fire safety as part of its regulatory function, but, where significant fire safety issues become apparent, will alert the relevant Fire and Rescue service to their existence in order that it may act as it considers appropriate. Further advice on your responsibilities is available at www.infoscotland.com/firelaw

Action taken on requirements since last Inspection

There were no requirements identified following the last inspection.

Comments on Self Assessment

The manager submitted an electronic self assessment. This was seen to identify a significant amount of detail in which both strengths and areas for development had been identified. The detail of the information provided demonstrated that the manager had an indepth understanding of the self assessment process.

View of Service Users

A total of 16 questionnaires were completed by service users. All questionnaires indicated that service users were satisfied or very satisfied with the service they received. Comments included the following:

'I find the support very supportive and helpful and I wish this to continue'

'I am very happy with the service I get from the staff at Gowrie Care'

'The staff are very curtious and friendly and are always willing to help me if and when I need assistance with any problems I have'

'Am very happy with the service I receive, the staff treat me with respect and as an individual. The service is able to adapt to my needs as required'.

'Thoroughly decent, lively and confident people come three times a fortnight. We work and blether alongside each other and I am regaining control of my life'.

View of Carers

There were no carers present during the inspection process.

Quality Theme 1: Quality of Care and Support

Overall CCO Theme Grading: 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 Care Commission Officer was very impressed by the way in which service user participation had been developed.

It was particularly evident that the service promoted a strong culture of service user involvement.

The service provided a range of very good evidence that supported this statement. Evidence sampled by the Care Commission Officer included the following:

A service user led group had been up and running for a year. The group which had chosen to call its' self the TEDAIC ('take each day as it comes') group was seen to be very involved in a number of initiatives that had influenced service provision such as involvement in the staff recruitment process and also influencing change in the organisations policies and procedures.

Several group members had written out to all service users to inform them about the availability of National Care Standards for Housing Support and Care at Home. An offer to obtain a copy of these was also made and a significant number of service users responded.

A 'C's 'board had been introduced for use in the service. This was to encourage not only staff but other stakeholders to provide their thoughts/views/comments/suggestions about the quality of the service provided and how it could be improved. A significant number of service users had contributed their thoughts and comments to the board.

Service users were seen to be central in the care review process. Participation was encouraged wherever appropriate.

Areas for Development

The manager had identified a number of developments for the future. This demonstrated a high level of commitment by the service in ensuring that service users were central to improving the quality of care and support.

The service should continue to maintain and evaluate the very good standard of practice.

CCO Grading

5 - Very Good

Number of Requirements

0

Number of Recommendations

0

Statement 3: We ensure that service user's health and wellbeing needs are met.

Service Strengths

The Care Commission Officer identified significant strengths in this area

An individual, person centred approach was used by the service to ensure that the health and well being needs of service users were met.

The service was involved in the Care Programme Approach which ensured the involvement of all professionals delivering care.

A sample of support plans inspected by the Care Commission Officer identified that each had been developed in consultation with the service user and relevant others where appropriate. The level of detail contained within the personal plan was seen to be very comprehensive and demonstrated a person centred approach to providing care.

The service had also developed support plans to openly support suicidal ideation. A high level of commitment to provide ongoing support to service users was demonstrated by the service. This included when service users were admitted to hospital.

Staff within the project had in-depth knowledge of and access to local resources which assisted in the support of service users with issues such as alcohol and substance misuse and mental health problems.

Areas for Development

The following areas of improvement had been identified in the self assessment:

There were plans to roll out training in palliative care.

An intimate personal care policy had been developed and had been circulated for comment prior to approval by the organisations management committee.

The organisations 'administration of medication' policy and procedures had recently been amended and approved. Training dates had been arranged to ensure that all staff were made aware of the policy and its implications in practice.

The service should continue to maintain and evaluate the very good standard of practice.

CCO Grading

5 - Very Good

Number of Requirements

0

Number of Recommendations

0

Quality Theme 2: Quality of Environment

Overall CCO Theme Grading:

Quality Theme 3: Quality of Staffing

Overall CCO Theme Grading: 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 presented by the service demonstrated that they had a very good level of performance in relation to this statement.

The information included in 1.1 is also relevant to this statement.

The home recording system facilitated the opportunity for service user to participate in the assessment of staffing. Inspection of a sample of personal plans identified a variety of positive comments that had been made by service users in relation to staff.

Two service users from the TEDAIC group were to be actively involved in the recruitment and selection process. A significant amount of work had been done by the group in identifying key qualities of prospective new staff. Group members had also contributed to the development of paperwork used in the selection and recruitment process.

It was evident that the TEDAIC group were very active in raising awareness amongst service users about their individual rights whilst receiving support. Copies of the National Care Standards had also been offered to all service users.

Areas for Development

The following area for development had been identified in the self assessment:

To invite carers to become involved in the recruitment process using a variety of methods.

To continue work with the TEDAIC group and actively pursue areas ensuring participation of all to improving quality.

The service should continue to maintain and evaluate the very good standard of practice.

CCO Grading

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

Inspection of a sample of the evidence provided in the services self assessment identified that this was very good. This included the following:

Minutes of team meetings were seen to be clear and outcome focused. It was evident that the staff team had developed very good working relationships with each other. This ensured that all staff were knowledgeable about their role and responsibilities within the service.

Learning and development was co ordinated centrally by a dedicated department. This ensured that mandatory training was provided as and when required by staff.

Training needs were identified through supervision, appraisal and team meetings. As well as undertaking mandatory training, the staff group had also received training in the following areas; protection of vulnerable adults , child protection and medication.

Staff supervision was carried out every 4 - 6 weeks. This process also involved staff producing written pieces of reflective practice. This was viewed as good practice by the Care Commission Officer as it demonstrated that the service was committed to improvement. The SSSC codes of practice were a fixed agenda item at each supervision session.

Areas for Development

Gowrie Care Limited has planned to incorporate a child protection policy and statement into the policy manual. Training for this will become mandatory for all staff.

The service should continue to maintain and evaluate the very good standard of practice

CCO Grading

5 - Very Good

Number of Requirements

0

Number of Recommendations

0

Quality Theme 4: Quality of Management and Leadership

Overall CCO Theme Grading: 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 presented by the service demonstrated that they had a very good level of performance in relation to this statement.

The information in statements 1.1 and 3.1 are also relevant to this statement.

The manager informed the Care Commission Officer about the work carried out by members of the TEDIAC group which included the collation of questionnaires which informed the service user involvement strategy.

Members of the TEDIAC group had been instrumental in the development of a new Gowrie Care smoking policy. It was evident that this group played a very active role in the assessment and improvement of the quality of management and leadership within the service.

Staff sought feedback from service users on a regular basis at the end of each support session about the quality of support provided.

Areas for Development

The manager informed that the service brochure and complaints procedure required additional information to be added. It was planned that this information would be developed.

The service should continue to maintain and evaluate the very good standard of practice.

CCO Grading

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 demonstrated a very good level of performance in relation to this statement.

The manager of the service was subject to peer appraisal whereby staff completed

questionnaires. This provided the service with informative feedback about the manager's performance.

A number of audits were seen to be carried out at a local level these included service user reviews, external professionals and notifications to regulatory bodies when required.

Carers, relatives and external professionals were encouraged to participate in the review process although this did not need to be in person. The service was seen to be very sensitive to individual service users needs in relation to the review process and preventing people from feeling overwhelmed.

The organisation had created the post of 'Improvements Officer'. The remit of the post included promoting service user involvement and developing methods of assisting services which could then be incorporated into Gowrie Care practice.

The specific focus area for this inspection was notifications to the care commission and the SSSC.

The manager was aware of her responsibility to report any instances of misconduct, staff dismissal or occasions when a staff member had resigned prior to intended dismissal.

Areas for Development

The service should continue to maintain and evaluate the very good standard of practice.

CCO Grading

5 - Very Good

Number of Requirements

0

Number of Recommendations

0

Regulations / Principles

National Care Standards

Enforcement

There has been no enforcement action against this service since the last inspection.

Other Information

None

Requirements

None

Recommendations

None

Shona Adam

Care Commission Officer