

Baillieston Community Care Ltd

Housing Support Service

6 Buchanan Street
Baillieston
Glasgow
G69 6DY

Telephone: 0141 771 6478

Type of inspection:

Unannounced

Completed on:

24 August 2018

Service provided by:

Baillieston Community Care Ltd

Service provider number:

SP2004004482

Service no:

CS2003055886

About the service

Baillieston Community Care is provided by Baillieston Community Care Ltd, which is a registered charity.

This home care service is available to anyone aged 16 or over, and is offered to people with a wide range of conditions including adults with physical disabilities, brain injury, learning disabilities and older adults with dementia. The service can include: personal care, wellbeing support, social support or domestic support.

The organisation is managed by a board of directors. There is a chief executive who is the registered manager. He is in charge of two home care managers and there are two care co-ordinators, two quality assurance team leaders and four team leaders for the teams of support workers.

The service has an office base in Baillieston in the East End of Glasgow.

The service aims:

- To provide a person centred approach to service delivery.
- To provide support to such persons and their carer/family.

This service was previously registered with the Care Commission and transferred its registration to the Care Inspectorate on 1 April 2011.

What people told us

People were generally pleased about the service they received. Many said that they particularly liked the friendliness and caring attitude of the home carers. However, as noted at the last inspection, the quality of communication with the office continued to be raised as a particular concern. Comments included,

"First class service."

"The improvement in our life is great, they are there for us always."

"I feel as if the management could look into employing experienced office staff...if there is an emergency the office staff cannot cope with the extra pressure as I have experienced..."

We asked the manager to look into particular concerns raised by one family carer we spoke with.

Self assessment

The service did not require to submit a self-assessment as part of this inspection process. We took the opportunity to discuss with managers the service's improvement plan. We suggested that the plan would benefit from including the issues highlighted from client, family carers, staff and external stakeholder feedback.

From this inspection we graded this service as:

Quality of care and support	5 - Very Good
Quality of staffing	4 - Good
Quality of management and leadership	not assessed

What the service does well

Managers and staff were committed to delivering a high standard of care and support. This was reflected in the improvements made since the last inspection, for instance, with regards to quality assurance, care planning and improving work schedule rotas for people with more complex support needs.

We carried out two home visits and observed positive person centred interactions between the regular home carers and the person. This was important because these interactions ensured that the level of support was right for the person. Some people we spoke with also gave positive feedback about the difference the service had made to their life. Comments included, "I know I will be put in bed without a struggle".

People should be confident that they will always receive their medication as prescribed by medical professionals. We could see that the service had adopted a more targeted and learning approach for medication management and that this was leading to reduction in errors. Managers acknowledged that medicine recording practices needed to improve further still and were keeping a close eye through audit processes.

In order to support health and wellbeing, care records should give clear direction about how to deliver each person's care and support as well as provide details about personal interests, strengths and preferences. We were pleased to note that the service was in the process of introducing a new improved care plan which did exactly that, reflecting better the positive outcomes that staff were helping people to achieve in practice.

In general, people benefitted from a wide range of ways to gather their views on service delivery. We could see that the service took any issues raised seriously and complaints were fully investigated and resolved within appropriate timescales.

We spoke with homecarers who were well motivated and committed to the promotion of people's welfare. People receiving the service and family carers also told us that they had full confidence in those who supported and cared for them. One person noted, "Staff are the best thing about the service" and another said, "They make us feel very comfortable and safe".

When staff have the opportunity to reflect on their work this gives people confidence that their care and support is of a high standard. We found an improved focus in certain areas of staff learning and development, including regular opportunities for staff supervision, annual appraisals and direct observations or spot checking of staff practice. New performance improvement plans helped focus on individual staff's work performance, leading to raised standards in identified problem areas. Staff felt the learning and development programme covered all their learning needs. We could see that the new training manager was making steady progress with ensuring staff's gaps in learning and development were addressed.

What the service could do better

We discussed with the manager the need for closer scrutiny of staff attendance at support visits as we noted that this could be an issue for some people. Whilst many supported individuals described staff as reliable and professional, we found some incidences of missed visits. We discussed this at feedback with the managers to ensure lessons were learnt (See Recommendation 1).

The introduction of a new rota for some staff teams had improved consistency of care for many. However, elsewhere, the impact of staff travel time on support visits continued to be raised as an issue for people (See Recommendation 1).

The manager told us of plans to pilot a call monitoring system that was intended to improve the management of staff out in the field. We could see how it could lead to better outcomes for people and will review progress with this going forward.

Effective daily communication is important in a homecare service to ensure that people have confidence that their care and support needs will be appropriately met. Poor communication with office staff was raised at the last inspection and continued to impact on people's outcomes. For instance, one person said, "Communication could be better, depends who you speak to, some don't pass on information" (See Recommendation 2). Managers assured us that they were taking this matter seriously with the appointment of someone to be in charge of improving communication and engagement as well as arranging for further training on customer care and communication for office staff. We will look at progress with this issue at the next inspection.

Where complaint investigations had taken place, we would have wanted to see ongoing follow up with the complainant to ensure issues had been properly addressed and improvements had been sustained. This was an area for improvement along with conducting audits of daily logs to check that support was provided as agreed.

Many new staff were pleased with the support provided through shadowing experienced workers. However, some of them complained that shadowing periods were too short before they were expected to work with people they did not know. Some established staff also told us that they could often be "going in blind" to supporting someone as they do not always receive information on the person beforehand. This was important because if staff are not confident in their practice it can affect continuity of support and people's outcomes, such as sense of privacy or safety with personal care (See Recommendation 3).

Regular team meetings, were not fully embedded into the culture of the service to help develop a shared understanding of their role and good practice. For example, the staff team needed to develop a shared understanding of how their practice was underpinned by the new health and social care standards (See Recommendation 4).

Staff recruitment followed safer recruitment guidelines, but we asked the manager to ensure that staff are interviewed by more than one person to validate recruitment decisions. Involving service users in recruitment and supervision/appraisal of staff was another area for improvement.

Requirements

Number of requirements: 0

Recommendations

Number of recommendations: 4

1. In order that people can always have confidence in receiving a reliable service, staff work schedules and operational systems should ensure that no one is disadvantaged, for instance, by missed visits, by staff feeling rushed or staff turning up early or late beyond a reasonable time.

This will ensure care and support is consistent with the Health and Social Care Standards, which state: My care and support meets my needs and is right for me (HSCS 1.19).

2. In order that people have confidence in the service providing their care and support, the manager should ensure that,

- information given by staff, supported individuals, family carers or others is always passed on and acted on in an appropriate and prompt manner
- office managers respond appropriately, particularly when an unforeseen issue arises or when help is needed

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

3. In order that people receive their support in a safe and consistent manner, the manager should ensure that

- new staff do not begin working with someone until they have completed an appropriate period of shadowing experienced staff
- all staff have had the chance to meet the supported individual before they begin working with them, and where this is not possible, staff have received adequate background information on the person beforehand followed by reading the support plan in the house.

This will ensure care and support is consistent with the Health and Social Care Standards, which state: I experience high quality care and support because people have the necessary information and resources (HSCS 4.27)

4. In order to promote people's confidence in the workers who support and care for them, the manager should

- ensure that staff attend regular team meetings and/or other equivalent forums to reflect on their work practice and stay informed about service business
- provide opportunities for staff and develop a shared understanding of how their actions are underpinned by good practice guidance, such as the new Health and Social Care Standards.

This will ensure care and support is consistent with the Health and Social Care Standards, which state: My care and support is consistent and stable because people work together well (HSCS 3.19) and, I have confidence in people because they are trained, competent and skilled, 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.

Inspection and grading history

Date	Type	Gradings
9 Aug 2017	Unannounced	Care and support 5 - Very good Environment Not assessed Staffing Not assessed Management and leadership 4 - Good
26 Jul 2016	Unannounced	Care and support 5 - Very good Environment Not assessed Staffing 5 - Very good Management and leadership Not assessed
2 Sep 2015	Unannounced	Care and support 5 - Very good Environment Not assessed Staffing 5 - Very good Management and leadership 5 - Very good
6 Oct 2014	Unannounced	Care and support 5 - Very good Environment Not assessed Staffing 5 - Very good Management and leadership 4 - Good
1 Oct 2013	Announced (short notice)	Care and support 4 - Good Environment Not assessed Staffing 4 - Good Management and leadership 4 - Good
3 Jul 2012	Unannounced	Care and support 4 - Good Environment Not assessed Staffing 4 - Good Management and leadership 4 - Good
11 Jul 2011	Unannounced	Care and support 4 - Good Environment Not assessed Staffing Not assessed Management and leadership 4 - Good

Date	Type	Gradings	
3 Aug 2010	Announced	Care and support Environment Staffing Management and leadership	4 - Good Not assessed 4 - Good Not assessed
16 Sep 2009	Announced	Care and support Environment Staffing Management and leadership	4 - Good Not assessed 5 - Very good 5 - Very good
19 Sep 2008	Announced	Care and support Environment Staffing Management and leadership	4 - Good Not assessed 4 - Good 4 - Good

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