

Inspection of Midlothian Council Care at Home service

Report by Allister Short, Joint Director, Health and Social Care

1 Purpose of Report

This report provides an update on the action plan for the service improvements for Midlothian Council Care at Home service

2 Background

2.1 Midlothian Council Care at Home service was inspected in August 2017 over a number of days by the Care Inspectorate, as a registered care at home service for adults. The report was published on Monday 11th September 2017 and has been distributed to all Elected Members of the Cabinet for their information. The inspection covered three key areas of the National Care Standards attributed to care at home services. These include:

- Quality of Care and Support
- Quality of Staffing, and
- Quality of Management and Leadership

2.2 Following the inspection a report was published that details the areas of its findings and outlines any areas for recommendation and/or requirements. An action plan within a specified timescale was developed to address the areas for improvement. This action plan has been implemented and regularly updated, to track and monitor improvements, and identify if timescales are being met.

2.3 The inspection report grades the areas of inspection from 1 (Unsatisfactory) to 6 (Excellent). This inspection report graded the three areas as follows:

Quality of care and support	3	Adequate
Quality of staffing	3	Adequate
Quality of Management and Leadership	2	Weak.

3 Conclusion

The Care Inspectorate have concluded in their report the service was operating at an “adequate” level. As there have been outstanding requirements since 2013 four of these requirements are repeated in the recent inspection report therefore increasing the number of actions required.

4 Report Implications

4.1 Resource

There are no financial and human resource implications associated with this report.

4.2 Risk

The Care Inspectorate inspect all registered services on a regular basis with announced and unannounced inspections. A report is published which informs all stakeholders about the key strengths of the service, areas for improvement and sets out the main points for action.

Following the publication of that report it is accessible to the public via the Care Inspectorate website, and by requesting a hard copy. It is also on display in the Care at Home base for staff and visitors to access and review progress.

4.3 Policy

Strategy

The Care at Home service has responded to the inspection with a detailed action plan responding to all the requirements and recommendations, with clear timescales and outputs to deliver to the plan. The service has already seen significant improvements.

There are a total of 90 individual actions that have clear timelines and outcomes. 63 of these actions are completed, 7 are near completion, and the remainder are being progressed and will be completed within the next three months (3 months ahead of required timelines).

It must be noted that some of the actions are duplicated due to being outstanding actions from previous inspections going back to 2013. All actions and clients were prioritised according to risk level. Those with higher risk rating i.e. those who live alone and in isolated areas, would have their care plans updated and reviewed first.

Actions complete:

1. Medication process's complete.
2. Augmented new Care plan template introduced and implemented to approximately 150 clients at highest risk.
3. Service users and their carers included in their care planning
4. Information on current health conditions and guidance on how to communicate with service users who have communication difficulties.
5. New Care plans now placed into clients home.
6. All new Care plans signed and dated by client or their delegated carer.
7. Clients and their carers included in the risk assessment plan.
8. Workforce development plan in place e.g. staff training matrix
9. Audit reports in place for medication, Care plans and training completed.

10. Monthly reporting for a range of tasks including missed visits, medication errors, supervision sessions completed etc with other reports in development
11. All notifiable issues such as complaints, incidents medication errors are reported to the Care Inspectorate appropriately.

The outstanding actions are as follows:

1. 150 care plans complete, with augmented new template and review dates inserted. 150 to be completed (for those at lowest risk). Additional resource is being assigned to complete this within 3 months.
2. Up to date risk assessments for all clients. These are incorporated into the care plans as outlined in action 1 with those at highest risk completed, and those at lowest risk being reviewed as above.
3. Data processes and reports being compiled to ensure accuracy of information and regular reporting. This will be complete within 2 months.
4. Complaints procedure updated but still requires reporting development. This will be completed within 1 month.
5. Updated Midlothian HSCP Medication policy – currently being reviewed by Midlothian Council Medication policy working group.

There is a new management team in place who meet on a regular basis to update and review on progress against the action plan to ensure it keeps to the timescales. The inspection report also highlighted outstanding actions from 2013 – these are all incorporated in the action plan and we will provide a further update in 3 months when all the actions will be complete. We will also build a suite of measures to monitor on a weekly basis to maintain improvements to the service.

Progress is also discussed at supervision sessions between the Service Manager and the Registered Manager, then communicated to Care Team Supervisors and staff which includes regular staff newsletters and large team meetings. There are regular team meetings with the action plan as a standing agenda item to monitor and review the progress against actions.

Additional support and resource had been put in place such as administrative support, environmental improvements within the office area and additional office staffing to manage the increased workload.

We have also assigned the Older Peoples Planning Officer to dedicate time to home care to ensure our reporting tools are working efficiently to produce accurate data to inform service improvements and development.

The Care Inspectorate were due to revisit in January 2018. However in light of recent progress, they have lifted their risk from “high risk” to “medium risk” (Care Inspectorate terminology), and will re-visit within 1 year. This provided an opportunity to deliver on all the requirements

and recommendations to ensure a better quality of service is in place for patients, clients and staff.

Consultation

Copies of the Inspection report have been made available to Elected Members, and staff members, and notified to families/carers and other interested parties.

Equalities

There are no apparent equalities issues.

Sustainability

There is an ongoing review of Care at Home services within Midlothian to establish opportunities to develop “outcome focussed” effective and efficient Care at Home services. This supports the Midlothian Older People strategy 2016 – 2019 which focusses on improving access to services and exploring opportunities to keep people safe and well in their own home and community.

5 Technology issues

There are no Technology issues arising from this report.

6 Recommendations

The Cabinet is asked to:

- (i) Note the content of the report and progress made.

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