

**Inspection of Midlothian Council – Domiciliary Care – Care at Home Support Service****Report by Morag Barrow, Director of Health and Social Care Partnership****1 Recommendations**

The Council is recommended to note the content of the report and progress made.

**2 Purpose of Report**

This report provides an overview of the recent unannounced care inspectorate report for Midlothian Council – Domiciliary Care – Care at Home Support Service.

**9<sup>th</sup> March 2022****Report Contact:** Grace Cowan  
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### 3 Background

- 3.1 Midlothian Health and Social Care Partnership's (HSCP) Care at Home Service was inspected on 19<sup>th</sup> August 2021 by the Care Inspectorate, as a registered Care at Home Service for adults and older people living in their own homes in Midlothian.

At the time of the inspection the service was supporting approximately 294 people. The report was published 15<sup>th</sup> September 2021.

It covered the following themes: -

- How well do we support people's wellbeing?
- How good is our leadership?
- How good is our care and support during the COVID-19 pandemic

- 3.2 Following the inspection a report was published that details the areas of its findings and outlines areas for improvement and/or requirements.

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

<b>How well do we support people's wellbeing?</b>	<b>3</b>	<b>Adequate</b>
<b>How good is our leadership?</b>	<b>3</b>	<b>Adequate</b>
<b>How good is our care and support during the COVID-19 pandemic?</b>	<b>4</b>	<b>Good</b>

A follow up review of the service took place on 4<sup>th</sup> March 2022. The following grades were given in the three areas.

<b>How well do we support people's wellbeing?</b>	<b>4</b>	<b>Good</b>
<b>How good is our leadership?</b>	<b>4</b>	<b>Good</b>
<b>How good is our care and support during the COVID-19 pandemic?</b>	<b>4</b>	<b>Good</b>

- 3.3 People described carers as very kind, and for those with consistent carer input, there was a sense of a strong working relationship between users of the service and carers. There was also acknowledgement of the close working relationships between carers and other health professionals. Although changes to care and support arrangements

were necessary due to COVID-19 impact, people still experienced care and support with compassion.

The changes in carers for some people was unsettling, particularly for those with Dementia who rely on consistency for their wellbeing. Communication around changes to carers on visit schedules or regarding the timings of visits, was highlighted as an area for further improvement.

There was one requirement highlighted in relation to the support of people pertaining to medication management. An improvement in management and administration of medication within the service required to be achieved by 31<sup>st</sup> October 2021.

#### 3.4 Leadership of the care at home support service was reported to be good.

Systems were in place to monitor aspects of service delivery and support the manager to have clear oversight of the care to people. There was evidence through examples of these improved outcomes for people e.g. reduction of missed visits, reviews of personal care plans and observation of staff practice.

- A satisfaction survey had been completed by people using the service – whilst this was generally positive, many did comment that they felt communication and consistency of carers could be improved upon.
- Some staff did not feel supported and felt isolated in their roles.

#### 3.5 The Care inspectorate reported that they felt the service demonstrated a good level of care and support during the COVID-19 pandemic.

Staff had access to specific training on COVID-19, the correct use of PPE and demonstrated good infection control and prevention practices.

Whilst disruption to regular support was inevitable during the pandemic, people felt confident in their care because staff had been trained appropriately.

A risk assessed approach had been taken at times of service pressure, with families and friends being asked to step in to support delivery of care themselves. It was acknowledged that in a period of crisis, this would be inevitable.

It was noted that proactive communication had been consistent between provider/manager and Care Inspectorate throughout the pandemic with all necessary notifications around service disruption having been made to the Care Inspectorate.

## 4 **Conclusion**

The Care Inspectorate reported in their findings from visiting clients and speaking to family members that people said:

*“words could not express how glad I am to see them coming in “*

*“Exceptionally happy to get care from them”*

*“it is a great service, the staff are really friendly and helpful”*

*Other comments from people highlighted the need to improve communication:*

*“Care workers are superb, but the administration side of things leaves a lot to be desired and is inefficient”*

*“I don’t know who is coming tonight or tomorrow”*

*“There are so many different carers I need to explain what to do and where everything is – though the carer quality is very good”*

## 5 **Report Implications**

### 5.1 **Resource**

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

### 5.2 **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.

### 5.3 **Policy**

#### **Strategy**

There are now a total of two requirements from this recent inspection and 2 areas for improvement:

Requirements:

People who need help to take their medication can be confident that they will receive it safely from appropriately skilled staff. They will know that there are clear policies and guidelines in the service on the use, storage, and administration of medication.

This requirement has been reviewed and was met at inspection 4<sup>th</sup> March 2022.

People will be confident that their care and support will be delivered to meet their needs and wishes. The provider must ensure affective management oversight of the service is in place with strong leadership and enhanced quality assurance measures.

This requirement was reviewed on 4<sup>th</sup> March 2022 and has now been met.

Improvements:

People and their relatives are provided with clear information about the service, in particular the arrangement for staff delivering their care and any changes in staffing, there should be good communication between staff, people and the management team. The implementation of communication agreements with people could support this area for improvement.

Noted on review 4<sup>th</sup> March 2022 - Communication agreements are now included within the care plan.

To ensure people that staff know how to care and support them should they become unwell, anticipatory care plans should be developed for each person.

Recognition to work undertaken since August inspection with further work identified for service regarding this improvement going forward from review on 4<sup>th</sup> March 2022

Midlothian Care at Home has responded to the inspection with a comprehensive action plan, with clear timescales and outputs to deliver the plan.

Support to achieve the action plan is being provided by Midlothian HSCP lead pharmacist. Oversight assurance for the action plan is in place via Midlothian HSCP Clinical and Care governance group.

## **Consultation**

Copies of the Inspection report has been communicated and available on Care Inspectorate website.

## **Equalities**

There are no apparent equalities issues.

## **Sustainability**

Service development planning remains a key focus to the HSCP. A new Service manager has taken up post, and will lead on the continued quality approach to further improving the service.

## **6 Technology issues**

There are no Technology issues arising from this report.