

# Lifecare Outreach Care at Home Support Service

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Edinburgh  
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Telephone: 0131 343 0944

**Type of inspection:**

Unannounced

**Completed on:**

30 October 2019

**Service provided by:**

Lifecare (Edinburgh) Ltd

**Service provider number:**

SP2003002785

**Service no:**

CS2006118880

## About the service

This service has been registered since 2006.

The Lifecare Outreach Service is part of Lifecare (Edinburgh) Ltd care services and is registered as a Care at Home service. The service provides care and support to enable people to be involved in social interests within and outwith their home and as a respite arrangement for relatives/carers.

The service currently supports around 52 people living in the community.

The service has a statement of aims and objectives:

"Our service is tailored to those people living in the community and offers a friendly and safe service in a person's home. It is for those who struggle to get out and about on their own, or who enjoy company, who may feel isolated and alone and want to do something different - just for a change. It also provides respite for carers from their caring duties, not purely for those wishing to access community or have company in the home."

## What people told us

We received seven completed Care Standard Questionnaires from people using the service and/or their main carers in March and April 2019. Most people were happy with the service being provided.

Comments included: -

"The service I have received has been exemplary. I know my husband's needs were met respectfully, kindly and with dignity by well trained, caring individuals for whom I have great respect"

"Service generally good. Carer is positive, communicates well and treats my mother with respect and kindness. She is calm and caring. Sometimes visits have been cancelled at short notice, this creates risk for my mother and stress for me (daughter). This needs to be addressed to provide reliable care".

At this inspection we found cancelling of visits due to no carer being available had reduced considerably. Visits were better organised and more social care workers had been recruited.

During the inspection we met with supported people who used the service and their relatives. We also spoke with additional people and relatives on the phone. All expressed overall satisfaction with the service.

Their descriptions of the service included:

"tremendous"

"very very good service"

"workers are doing a vital job"

"very happy with lifecare"

"the service is much needed and I hope it continues - enables me to relax knowing my father is in good hands"

We have also included the views of people within the body of this report.

## Self assessment

We are not asking services to submit a self-assessment for this inspection year. During the inspection we discussed the service's current improvement plans. Issues relating to quality assurance, feedback from people using the service and their relatives along with the quality of the service's improvement plan were all considered throughout the inspection.

From 1 April 2018, the new 'Health and Social Care Standards' have replaced the National Care Standards. These seek to promote and improve outcomes for people who experience care.

Services should now be providing support in accordance with the guidelines outlined therein.

- 1: I experience high quality care and support that is right for me.
- 2: I am fully involved in all decisions about my care and support.
- 3: I have confidence in the people who support and care for me.
- 4: I have confidence in the organisation providing my care and support.
- 5: I experience a high quality environment if the organisation provides the premises.

<https://scotgov.publishingthefuture.info/publication/health-and-social-care-standards-my-support-my-life>.

## From this inspection we graded this service as:

Quality of care and support	5 - Very Good
Quality of staffing	5 - Very Good
Quality of management and leadership	3 - Adequate

## Quality of care and support

### Findings from the inspection

Lifecare Outreach was very good at achieving the aimed outcomes of the service. To provide care and support and company to people in their own homes; support to get out and about in the community; including attending appointments; and to provide much needed respite for relatives and carers.

Service management had developed effective visit scheduling systems. Visits were punctual, lasted the allocated length of time and were monitored to ensure none were accidentally missed. Previously the service had at times been unreliable with some visits being cancelled by the service due to being short staffed. Improvements had been made, particularly with planning ahead, and this practice had reduced considerably. Workers were given time to travel between visits. People were told if there was going to be any last-minute changes to visits either by the worker themselves or by the office staff. The service was responsive and flexible to people changing a visit time to allow for appointments or to make permanent changes to visit times to meet their changing needs. All this meant people were involved with their visit arrangements.

Consistency of staffing had also improved since we last inspected. This meant people could build up trusting relationships with the worker, with support being provided in a way they felt comfortable with. People's gender choices were met to ensure people's dignity and personal preferences.

Workers made good recordings of the support they had provided onto a tablet which was linked to the care planning system the service had purchased. Management also recorded communication on the system. This ensured people's health and well-being was monitored well. Any concerns were progressed by the worker or the management with either the person themselves, their representatives, social work and/or health professionals.

Care plans and risk assessments were in the process of being further developed for some people. Plans we sampled were of good quality and up to date. They provided good information which included how the persons needs would be met, incorporating routines and choices. Good life history information gave the worker a sense of who the person was behind the condition. Guidance was given to workers as to how to respond to the person if they presented with behaviour which could be challenging. This meant care and support needs were being met and were right for each person.

## Requirements

**Number of requirements:** 0

## Recommendations

**Number of recommendations:** 0

**Grade:** 5 - very good

## Quality of staffing

### Findings from the inspection

Supported people and their relatives were very happy with the workers who provided the support. Workers were described as "good, kind, polite, cheerful, pleasant and well trained". People spoke about workers being good companions and very good company. One relative complemented a specific worker on their understanding of dementia, seeing the person beyond the condition.

The responsibility of care planning and risk assessment primarily lay with the care workers. This meant they were more involved and had a greater commitment to monitor and ensure the well-being of the people they were key workers for. One coordinator was providing support and training to workers to help them develop their skills in this area.

Training records evidenced workers were up to date with undertaking mandatory training topics. Some workers had also undertaken other training courses. We advised the service to source other client specific training to match people's support needs. We will follow this up at the next inspection.

Newly recruited workers shadowed more experienced workers as part of their induction process. They were given appropriate training to undertake and were supported well by management. The induction process was being reviewed to ensure support instances and checks were consistent for all workers. We will follow this up at the next inspection.

The competency of workers was now being observed and recorded. We have provided the service with template documents to help with this process.

The service ensured workers, who should, were duly registered with the Scottish Social Services Council (SSSC) and had a rolling programme for workers to achieve Scottish Vocational Qualifications (SVQ). This is a qualification required by the SSSC for all those employed and registered within social care services in Scotland.

Regular team meetings took place. They gave workers the opportunity to meet together to be given new information about best practice guidance and internal procedures and allowed for staff discussions and involvement.

There was a learning culture embedded in the service. Workers stated they were supported well by management. Lone working measures had recently been put into place to ensure their safety particularly when walking between visits.

## Requirements

**Number of requirements:** 0

## Recommendations

**Number of recommendations:** 0

**Grade:** 5 - very good

## Quality of management and leadership

### Findings from the inspection

We had made a requirement last year for the service to improve how they quality assured the service. At this inspection we found good improvements had been made with reviewing people's support packages. Care plans and associated risks were being reviewed and quality audited on a regular basis. We have advised the service to use the computerised report system to check on service delivery on a monthly basis. We will follow this up at the next inspection.

At previous inspections we had identified the management team, comprising the registered manager and service manager, had insufficient time to meet their job responsibilities. Since the last inspection, and following an independent audit in January 2019, a part time administrative assistant and two temporary coordinators were appointed. The registered manager was able to focus on their role and, with the additional resources, improvements had been made to the service, particularly in relation to service delivery, care planning and training.

However over recent months the registered manager had been given additional organisational tasks which had not allowed them enough time to undertake important tasks for this service. This had resulted in poor recruitment of new staff. Those errors have now been rectified however the registered manager's roles and responsibilities, some of which could be delegated out, need to be reviewed.

Lifecare (Edinburgh) Ltd are commencing an internal review of the organisation. However the two coordinators posts expire at the end of March 2020 which will be before decisions have been made in relation to the restructuring of the organisation. The service manager left in September 2019 and the post remains vacant. Workers told us of their anxiety and insecurity in relation to future management of the service after March 2020.

Improvements made have laid the foundation for future growth of the service. However, we are concerned those improvements could slide due to the current challenges to management capacity and future uncertainties. We recommend the provider addresses these issues now. (see Recommendation 1).

Throughout the inspection we identified policies and procedures which needed to be updated to reflect how the service was currently operating. Written information for clients about the service should be reviewed and revised. We will follow this up at the next inspection.

## Requirements

**Number of requirements:** 0

## Recommendations

**Number of recommendations:** 1

1. The provider should prioritise an immediate review of the roles and responsibilities of the registered manager and other members of the management and administration team.

This ensures the service is well led and managed effectively and is consistent with the Health and Social Care Standards:

(HSCS 4.23) I use a service and organisation that are well led and managed.

(HSCS 4.24) I am confident that people who support and care for me have been appropriately and safely recruited.

(HSCS 4.27) I experience high quality care and support because people have the necessary information and resources.

**Grade:** 3 - adequate

## What the service has done to meet any requirements we made at or since the last inspection

### Previous requirements

#### Requirement 1

In order to make sure people are confident in the staff who provide their support and care because they are trained, competent and skilled the provider must ensure by **30 September 2018**:-

- a) all staff employed in the service undertake mandatory refresher training as per organisational timescales;
- b) all staff receive appropriate training and support with undertaking care planning, reviews and risk assessment;
- c) the competency of workers, particularly in relation to medication support and moving and handling, is checked in the field following training and on an on-going basis;
- d) management work cohesively to monitor the undertaking and completion of training;
- e) there are methods in place to evaluate the effectiveness of all training, particularly e-learning, to identify the impact of the training on staff practice and to allow for reflection on how the training has helped improve practice.

This is in order to ensure that care and support is consistent with the Health and Social Care Standard:- 3.14 which states "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".

It is also necessary to comply with Regulations SS1 2011/210 15(a) (b) of the Social Care and Social Work Improvement Scotland Regulations 2011.

**This requirement was made on 24 May 2018.**

#### Action taken on previous requirement

We found the service had made improvements in relation to each elements above to deem this requirement to be met.

**Met - within timescales**

#### Requirement 2

In order to make sure the service has robust and transparent quality assurance processes to support a culture of continuous improvement the provider must ensure by **30 September 2018**:-

- a) there is sufficient time available for management to undertake all their roles and responsibilities;
- b) communication is recorded and easily accessible for reference purposes;
- c) people who use the service have access to reviews six monthly or more frequently if individual circumstances require this;

d) appropriate auditing systems are developed for internal processes relevant to the service. This to include (but not restricted to) auditing:-

1. Visit reports;
2. Visit arrival and departure times and length of visits;
3. Missed visits;
4. Consistency of staffing;
5. Medication Administration records;
6. Six month reviews;
7. Care and support plans;
8. Risk assessments;
9. Supervision;
10. Competency checks;
11. Training undertaken;
12. Accidents and incidents;
13. Complaints and expressions of dissatisfaction.

This is in order to ensure that care and support is consistent with the Health and Social Care Standards:-

4.19 which states "I benefit from a culture of continuous improvement, with the organisation having robust and transparent quality assurance processes".

4.27 which states "I experience high quality care and support because people have the necessary information and resources".

It is also necessary to comply with Regulation SSI 2011/210 4 (1) (a) of the Social Care and Social Work Improvement Scotland Regulations 2011.

**This requirement was made on 24 May 2018.**

### Action taken on previous requirement

We found the service had made improvements in relation to most elements about quality assurance. We have advised the service to use the computerised report system to check on service delivery on a monthly basis.

Communication was now being better recorded and was accessible for reference purposes.

By January 2019 there was sufficient management resources in place to meet the requirement. However at this inspection we could see challenges occurring again. These have been further detailed under the Quality of management and leadership section of this report and a recommendation has been made.

**Met - within timescales**

## What the service has done to meet any recommendations we made at or since the last inspection

### Previous recommendations

There are no outstanding recommendations.



## Complaints

There have been no complaints upheld since the last inspection. Details of any older upheld complaints are published at [www.careinspectorate.com](http://www.careinspectorate.com).

## Enforcement

No enforcement action has been taken against this care service since the last inspection.

## Inspection and grading history

Date	Type	Gradings
9 May 2018	Unannounced	Care and support 4 - Good Environment Not assessed Staffing Not assessed Management and leadership 3 - Adequate
27 Apr 2017	Unannounced	Care and support 5 - Very good Environment Not assessed Staffing Not assessed Management and leadership 4 - Good
23 Jun 2016	Unannounced	Care and support 5 - Very good Environment Not assessed Staffing Not assessed Management and leadership 5 - Very good
23 Apr 2015	Unannounced	Care and support 5 - Very good Environment Not assessed Staffing 5 - Very good Management and leadership 4 - Good
26 May 2014	Unannounced	Care and support 5 - Very good Environment Not assessed Staffing 4 - Good Management and leadership 5 - Very good

Date	Type	Gradings	
25 Feb 2013	Announced (short notice)	Care and support Environment Staffing Management and leadership	5 - Very good Not assessed 5 - Very good 5 - Very good
29 Apr 2010	Announced	Care and support Environment Staffing Management and leadership	5 - Very good Not assessed 5 - Very good Not assessed
16 Apr 2009	Announced	Care and support Environment Staffing Management and leadership	4 - Good Not assessed 4 - Good 4 - Good

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