
To: Renfrewshire Integration Joint Board Audit, Risk and Scrutiny Committee

On: 24 March 2023

Report by: Head of Health and Social Care

Subject: Inspection of Care at Home Services by the Care Inspectorate

1. Summary

1.1 Social care services are subject to a range of audit and scrutiny activities to ensure that they are undertaking all statutory duties and are providing appropriate care and support to vulnerable individuals and groups.

1.2 This report summarises the latest findings from Inspection concluded on 14 September 2022. A follow up inspection was also concluded on 1 December 2022.

2. Recommendations

2.1 It is recommended that the IJB Audit, Risk & Scrutiny Committee:

- Note the performance of Renfrewshire Health and Social Care Partnership's Care at Home services, with services graded on 14 September 2022 as Adequate (3) for How Good is our Leadership? and Weak (2) for How well do we support people's wellbeing?; and
 - Note the follow up inspection concluded on 1 December 2022. This inspection revised grading for How well do we support people's wellbeing from Weak (2) to Good (4). How good is our leadership was not inspected at follow up as there were no requirements placed on this against the initial inspection in September 2022, so remains Adequate (3).
-

3. Background and Context

3.1 The Care Inspectorate are the official body responsible for inspecting standards of care in Scotland. They regulate and inspect care services to make sure they meet the right standards.

3.2 The Care Inspectorate use a quality framework that sets out the elements that address key questions about the difference care is making to people and the quality and effectiveness of the aspects contributing to those differences. The quality framework is framed around six key questions. The first of these is:

- How well do we support people's wellbeing?

To try and understand what contributes to that, there are four further key questions:

- How good is our leadership?
- How good is our staff team?
- How good is our setting?
- How well is our care planned?

The final key question is:

- What is our overall capacity for improvement?

3.3 There are up to 5 quality indicators associated with each question, with key areas identifying practice covered by each indicator.

Quality indicators are evaluated against a six-point scale:

- | | |
|----------|---|
| 6 | Excellent - Outstanding or sector leading |
| 5 | Very Good - Major strengths |
| 4 | Good - Important strengths, with some areas for improvement |
| 3 | Adequate - Strengths just outweigh weaknesses |
| 2 | Weak - Important weaknesses and priority action required |
| 1 | Unsatisfactory - Major weaknesses and urgent remedial action required |

3.4 On conclusion of an Inspection, the Care Inspectorate publish a report which details: feedback from families/carers; their observations throughout the Inspection including strengths and areas for improvement; any requirements, recommendations, or enforcement; and an evaluation. In addition, the Care Inspectorate will also consider

any areas for improvement or requirements identified in previous inspections of the Care at Home service when concluding a grading.

4. *Inspection of Care at Home Services – September 2022*

- 4.1 Renfrewshire's Care at Home Services were subject to unannounced inspection on 5 September 2022, with this inspection concluding on 14 September 2022.
- 4.2 The inspection period reviewed the service between September 2021 and September 2022. Throughout this period, Care at Home services operated against varying restrictions aligned to COVID-19. The outbreak of COVID-19 Omicron variant in November 2021 placed increased pressures on Care at Home services and this variant peaked for several months until cases reduced across Scotland in April 2022.
- 4.3 Enhanced use of PPE remained in social care settings whilst the Scottish Government confirmed that the law requiring the wearing of face coverings would end from Monday 18 April 2022. Other restrictions such as self-isolation guidance was replaced by "stay at home" advice in May 2022, however, HSCP's across Scotland continued to take a cautious approach to reducing any measures within Social Care and Health settings. This aimed to ensure the continued safety of staff and service users alike. This approach had a direct impact on engaging and developing the workforce face-to-face within this period.
- 4.4 Following conclusion of the inspection, it was noted that 1 previous requirement and 1 previous area for improvement from inspection in 2019 were not met.

The breakdown of the key questions considered during the inspection and the quality indicators are as follows:

How well do we support people's wellbeing? 2 - Weak

How well do we support people's wellbeing?	2 - Weak
1.1 People experience compassion, dignity and respect	3 - Adequate
1.3 People's health and wellbeing benefits from their care and support	2 - Weak
1.5 People's health and wellbeing benefits from safe infection prevention and control practice and procedure	2 - Weak

How good is our leadership? **3 - Adequate**

How good is our leadership?	3 - Adequate
2.2 Quality assurance and improvement is led well	3 - Adequate

4.5 In making their evaluation of the service, the inspectors:

- Spoke with 24 people using the service and four of their family members.
- Spoke with 37 staff and management.
- Received 8 emails from staff.
- Observed practice and daily life.
- Reviewed documents.

4.6 Key messages from the inspection:

- People did not have a personal plan.
- People did not receive medication safely.
- People were at risk due to the Infection Prevention and Control (IPC) practices.
- People did not receive care and support from a consistent staff team.
- Staff treated people with kindness, compassion, and dignity.
- A robust quality assurance process will improve people's outcomes.

4.7 As part of the Inspection against key question, 'how well do we support people's wellbeing?', the Care Inspectorate considered recommendations and requirements from the previous inspection undertaken in October 2019. These areas were noted in the most recent inspection as follows:

- Previous area for improvement 1 – 'The service should ensure that care plans are accurate and up to date. Reviews of care and support should take place no less than six monthly. Care plans and reviews should be made available to people if they wish. This ensures care and support is consistent with the Health and Social Care Standards'

Action taken since last inspection:

- ‘This area for improvement was the subject of an inspection report issued on 31 October 2019. At the time of this inspection, the provider did not have support plans in place for people using the service or staff to access. This area for improvement has not been met.’
- Previous requirement 1 – ‘The provider must ensure when people are supported with medication this is done in ways that keep them safe and well. To do this the provider must review current policies, procedures, and guidance to staff as a matter of priority. This should include making clear the distinctions between people self-managing their medication, staff prompting and staff administering or assisting people. The revised guidance should make clear the distinction between people self-managing their medication, staff prompting and staff administering or assisting. Staff should be appropriately briefed on their roles and receive training if appropriate. The level of support people receive should be clearly detailed in their care plans and should be regularly reviewed and updated. This is to comply with: The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011. 4-(1) A provider must- (a) make proper provision for the health, welfare, and safety of service users. This requirement was made on 31 October 2019. What the service has done to meet any requirements we made at or since the last inspection’

Action taken since last inspection:

- ‘This requirement was the subject of an inspection report issued on 31 October 2019. The provider had created a robust procedure for prompting and assisting with medication. However, people did not have a medication assessment or support plan. This meant that staff could not safely prompt or assist people with their medications. This requirement has not been met.’

The care inspectorate concluded that requirements should be made for the service and placed the following three requirements at September 2022 inspection report:

- **Requirement 1** - ‘By 28 November 2022, the provider must ensure they keep people safe by implementing risk assessments and support plans for individuals using the service. To do this, the provider must, at a minimum:

- complete the relevant risk assessments needed to inform safe care and support
- ensure the support plan is clear and contains all relevant information to support someone safely
- ensure all staff have ready access to people's risk assessments and support plans
- ensure all relevant documentation, including legal power documentation is in place
- This is to comply with Regulation 4(1)(a) (Welfare of users) and 5(1) (Personal Plans) of the Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/210) This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that: 'My personal plan (sometimes referred to as a care plan) is right for me because it sets out how my needs will be met, as well as my wishes and choices.' (HSCS 1.15); and 'I am fully involved in developing and reviewing my personal plan, which is always available to me.' (HSCS 2.17)'
- **Requirement 2.** 'By The 28 November 2022, the provider must ensure they keep people safe and healthy by implementing medication risk assessments and support plans for every individual using the service. To do this, the provider must, at a minimum:
 - complete the relevant risk assessments needed to inform safe medication management
 - ensure the support plan is clear and contains all relevant medication information, and legal documentation, including the level of support required by the individual
 - ensure all staff have access to people's medication support plan
- This is to comply with Regulation 4(1)(a) (Welfare of users) and 5(1) (Personal Plans) of the Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/210). This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that: 'My personal plan (sometimes referred to as a care plan) is right for me because it sets out how my needs will be met, as well as my wishes and choices.' (HSCS 1.15); and 'Any treatment or intervention that I experience is safe and effective.' (HSCS 1.24)'
- **Requirement 3.** 'By 28 November 2022, the provider must ensure staff's knowledge and practice in infection prevention and control

(IPC) reduces the risk of infection to keep people and staff safe. To do this, the provider must, at a minimum, ensure:

- all IPC policies and procedures for the service are updated and in line with current guidance
 - staff receive regular information and training in IPC practice relevant to their role
 - staff IPC observations take place regularly
-
- This is to comply with Regulation 4 (1) (a) and (d) (Welfare of users) of The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/210). This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that: 'I experience high quality care and support based on relevant evidence, guidance and best practice' (HSCS 4.11); and 'I have confidence in people because they are trained, competent and skilled' (HSCS 3.14).'

Within key question, 'how good is our leadership?', the Care Inspectorate provided 1 area for improvement:

- Area for Improvement 1. 'To support people's health and wellbeing and improve the quality of their experiences the provider should further develop, improve, and implement the current quality assurance systems and processes. This is to ensure care and support is consistent with the Health and Social Care Standards (HSCS) which state that: 'I benefit from a culture of continuous improvement, with the organisation having robust and transparent quality assurance processes' (HSCS 4.19); and 'I use a service and organisation that are well led and managed' (HSCS 4.23).

Follow Up Inspection of Care at Home Services – November 2022

- 4.8 Renfrewshire's Care at Home Services were subject to a follow up unannounced inspection on 28 November 2022 until 1 December 2022 which focussed on the key question of 'how well do we support people's wellbeing?', which was graded Weak in September 2022.
- 4.9 Following conclusion of the inspection, it was noted that the three previous requirements set in September 2022 report had been met.

The breakdown of the key questions considered during the inspection and a revised quality indicator is as follows:

How well do we support people's wellbeing? **4 - Good** (previously 2 – Weak)

How well do we support people's wellbeing?	4 - Good
--	----------

4.10 In making their evaluation of the service, the inspectors:

- Spoke with 15 people using the service.
- Spoke with 30 staff and management.
- Observed practice and daily life.
- Reviewed documents.

4.11 Key messages from the inspection:

- People told us they were treated with kindness, compassion, and dignity.
- The provider had implemented personal plans for people using the service.
- The provider had completed medication assessments and created medication plans for people using the service.
- Infection Prevention and Control (IPC) policy and practice had improved since the last inspection.

4.12 Following inspection in November 2022, the Care Inspectorate made two areas for improvement for key question 'how well do we support people's wellbeing? These are:

- **Area for improvement 1.** To continue to support people's health and wellbeing and improve the quality of their experiences the provider should further develop, improve, and implement the current risk assessments and personal plans for people using the service including their medication assessment and management.

This is to ensure care and support is consistent with the Health and Social Care Standards (HSCS) which state that: 'I am assessed by a qualified person, who involves other people and professionals as required' (HSCS 1.13); and 'I use a service and organisation that are well led and managed' (HSCS 4.23).

- **Area for improvement 2.** The provider should continue to support people's health and wellbeing through safe and robust Infection Prevention and Control (IPC) practices.

This is to ensure care and support is consistent with the Health and Social Care Standards (HSCS) which state that: 'I experience high quality care and support based on relevant evidence, guidance and best practice' (HSCS 4.11) and to ensure IPC practices are consistent with the National Infection Prevention and Control Manual (NIPCM) and the Healthcare Improvement Scotland Standards (HIS Standards).

- 4.13 While fully recognising the requirements and recommendations highlighted in the reports, it is noted that strengths were also identified throughout inspection. Feedback from service users was largely positive and highlighted that staff are very helpful, polite, and considerate. It was further noted that during the inspection the Care Inspectorate were very reassured with the management team, who provided a development plan outlining improvement, with well-coordinated actions within this.
- 4.14 Care at Home services continues to be committed to the strategic vision where "Renfrewshire is a caring place where people are treated as individuals and supported to live well". Care at Home services acknowledged the points raised in the Care Inspectorate reports and have taken action to address these.
- 4.15 Measures put in place around this work continues to be closely monitored and kept under review via a detailed action plan for the service. Care at Home are undertaking a range of development sessions to identify and implement improvements to support the service against challenges around increasing demand, recruitment and retention, whilst addressing the requirements and areas for improvement from the Care Inspectorate reports.

Implications of the Report

1. **Financial** – None
2. **HR & Organisational Development** – None
3. **Strategic Plan and Community Planning** – None
4. **Wider Strategic Alignment** – None
5. **Legal** – None
6. **Property/Assets** – None

- 7. **Information Technology** – None
- 8. **Equality & Human Rights** – None
- 9. **Fairer Scotland Duty** – None
- 10. **Health & Safety** – None
- 11. **Procurement** – None
- 12. **Risk** - Failure by services to meet and exceed the National Care Standards could lead to poor inspection results and enforcement action from the Care Inspectorate, as well as negative outcomes for service users and carers.
- 13. **Privacy Impact** – None

List of Background Papers

- (a) The Inspection reports for all Renfrewshire Council Care Homes are available to download from the [Care Inspectorate Website](#).

Author: Carron O’Byrne, Head of Health, and Social Care (Paisley)

Any enquiries regarding this paper should be directed to Carron O’Byrne, Head of Health and Social Care Services (carron.obyrne@renfrewshire.gov.uk)
