

Family Circle Care Ltd - Care at Home Support Service

22 Tower Street
Edinburgh
EH6 7BY

Telephone: 01315 549 500

Type of inspection:
Unannounced

Completed on:
26 August 2024

Service provided by:
Family Circle Care Ltd

Service provider number:
SP2003002483

Service no:
CS2004080727

About the service

Family Circle Care Ltd is registered as a support service with care at home and provides support to adults and older people in Edinburgh.

The service is managed from an office in Leith and has dedicated teams of staff who work in specific areas throughout the city.

At the time of inspection, support was being provided to 105 people.

About the inspection

This was an unannounced inspection which took place on 19 August 2024. Our visit was then followed by time examining evidence remotely and having discussions via phone with relatives and staff.

The inspection was carried out by one inspector from the Care Inspectorate.

To prepare for the inspection we reviewed information about this service. This included previous inspection findings, registration information, information submitted by the service and intelligence gathered since the last inspection.

In making our evaluations of the service we:

- Spoke with people using the service and members of their family
- Spoke with or had correspondence from staff and management
- Observed practice
- Reviewed documents .

Key messages

- People told us they were very happy with their care and support.
- People were very complimentary of the carers who visited them.
- Dedicated teams meant people had consistency from staff who knew them well.
- People's health and wellbeing was monitored well. Where concerns were identified referrals were made to appropriate professionals in a timely manner.
- Management had good oversight of people receiving support and working for the service.
- A new electronic system meant staff could access care plans and communicate with office staff and management quickly.
- We made some areas for improvement in relation to care planning and quality assurance.
- As part of this inspection, we assessed the service's self-evaluation of key areas.

We found that the service was not yet undertaking self-evaluation. We discussed the benefits of self-evaluation and how this approach should be adopted to support improvement in the service.

From this inspection we evaluated this service as:

In evaluating quality, we use a six point scale where 1 is unsatisfactory and 6 is excellent

How well do we support people's wellbeing?	5 - Very Good
How good is our leadership?	4 - Good
How good is our staff team?	4 - Good
How well is our care and support planned?	4 - Good

Further details on the particular areas inspected are provided at the end of this report.

How well do we support people's wellbeing?

5 - Very Good

We made an evaluation of very good for this key question. The service demonstrated major strengths in supporting positive outcomes for people.

People told us their staff team were kind, respectful and would 'do more than they are supposed to do'. We observed staff who were caring and made the visit enjoyable for people. One relative told us: 'the carers have a great rapport when they visit'.

People received support from consistent teams of staff. This meant people could be reassured staff knew them well and were very observant of any changes to their health needs.

A new electronic recording system meant any concerns raised by staff were dealt with timeously with the right people, be that family; health professionals; social work or emergency services.

Detailed correspondence evidenced actions were followed up and outcomes reported back to the staff to ensure any changes to support were put in place immediately.

This positive duty of care meant people could be confident their health and wellbeing was monitored well.

People told us they were very happy with their support and one person told us: 'they always come back to check in on me, they're a lifeline.'

Visiting health professionals had praised the staff for the proactive support they provided and for escalating concerns quickly. This enabled additional support to be enacted to benefit outcomes for people in crisis.

People were supported well with taking their medication. We asked for the recording of this task, within communication notes, be reviewed as part of staff development. This would ensure all staff recorded the same clear and accurate information.

How good is our leadership?

4 - Good

We made an evaluation of good for this key question. Whilst some improvements were needed, the strengths identified had a significant positive impact on people's experiences.

Management had good oversight and knowledge of people receiving support and were proactive in communicating with other professionals to ensure the best support was provided.

Regular management meetings enabled good discussions of various topics which covered oversight of people receiving support, the service and of service development.

People could be reassured the service continued to be responsive to their changing needs.

A new electronic system had enabled management to have access to a range of audit reports for quality assurance purposes. This information included good oversight of staff training and supervisions.

A new training officer was in post. This enabled good continuity for staff development and provided opportunities for further topics to be introduced.

There were a few supervisions outstanding, however most staff had received dedicated time to reflect on their work practices and discuss their further skills development. Staff had completed or were enrolled to complete their Scottish Vocational Qualifications (SVQ) in line with their Scottish Social Service Council (SSSC) conditions.

A previous area for improvement in relation to training and supervision has now been met.

The new electronic system had enabled easier access to areas of quality assurance, however, there had been some areas where information had not been up to date so reports were not accurate for auditing.

We discussed with management about using the new systems to their full potential so information is accurate and available to drive further improvements for the service and for those receiving support.

We have reworded a previous area for improvement to acknowledge areas met and where areas for improvement still remain (see AFI 1).

Areas for improvement

1.

To ensure there is good oversight of learning from quality assurance audits within a culture of continuous improvement, the provider should ensure:

- Accurate information is uploaded into electronic care planning and recording systems so available reports are up to date.
- Audits are signed off as having been completed and identified actions are recorded within the improvement plan.
- Improvement actions have achievable timescales and identify people responsible.
- Quality assurance links to self-evaluation.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS), which state:

HSCS 4.19 - 'I benefit from a culture of continuous improvement, with the organisation having robust and transparent quality assurance processes'

How good is our staff team?

4 - Good

We made an evaluation of good for this key question. Whilst some improvements were needed, the strengths identified had a significant positive impact on people's experiences.

People could be confident staff were recruited in line with safer recruitment practices with any necessary checks completed prior to any new staff starting in post.

We reminded management to ensure all ID is signed as a copy of the original document.

Staff worked hard and were enthusiastic about their work. They were clear about their roles, what was expected of them and demonstrated a good knowledge of people's care and support needs. People told us 'they're all brilliant'.

Staff told us they felt supported and confident to raise any concerns if they occurred and these would be listened to by management. Support was available if needed for out of hours visits.

Good scheduling systems meant staff teams were consistent which maintained a good continuity of care and support and ensured positive outcomes for people.

Most staff told us they had enough time to provide care and support for people without rushing. This was confirmed by people who told us 'they do everything I need them to do'. Where a visit took longer this would be recorded for management to review. If this was a regular occurrence and if any changes to support were required this would be discussed with the Health and Social Care Partnership.

How well is our care and support planned?

4 - Good

We made an evaluation of good for this key question. Whilst some improvements were needed, the strengths identified had a significant positive impact on people's experiences.

Care and support plans were personalised and gave good guidance which enabled staff to provide support to meet the person's needs and wishes. The new electronic care planning system had a section where further information could be added which would enhance this guidance further. We made a new area for improvement for this to be completed (see AFI 1).

Supported people and their legal representatives were involved in regular reviews. Any new information was communicated to staff following any reviews however, some plans had not been updated. We discussed this with the manager to ensure any changes to care and support needs are updated within the electronic care planning system swiftly so information is always correct and up to date. We made a new area for improvement (see AFI 2).

Areas for improvement

1.
To ensure people's care and support is delivered effectively, the provider should use the available 'assessment' sections within the new electronic care planning system.

This is to ensure care and support is consistent with the Health and Social Care Standards (HSCS) which state:

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

2. To ensure information and guidance within care and support plans is live, the provider should update plans timeously following a review or when any other changes occur.

This is to ensure care and support is consistent with the Health and Social Care Standards (HSCS) which state:

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

What the service has done to meet any areas for improvement we made at or since the last inspection

Areas for improvement

Previous area for improvement 1

To ensure there is good oversight of learning from quality assurance audits within a culture of continuous improvement, the provider should ensure:

Audits are completed and recorded in an organised way.

Create clearly defined and measurable actions when improvements have been identified.

Establish clear lines of responsibility and accountability for identified improvements.

Implement robust plans to meet the service's performance targets.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS), which state:

'I benefit from a culture of continuous improvement, with the organisation having robust and transparent quality assurance processes' HSCS 4.19

This area for improvement was made on 19 October 2023.

Action taken since then

A new electronic recording system enabled better management oversight and access to reports for auditing purposes.

Learning from these systems had started and will further enhance development plans. We made a new area for improvement to reflect this.

See key question five for more information.

Previous area for improvement 2

To ensure people are confident they are receiving high quality care from suitably skilled and competent staff, the provider should:

Continue to update the training matrix to include any training undertaken out with mandatory training.

Continue to develop a supervision matrix which includes probationary meetings and identifies where changes are made.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state:

'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).

This area for improvement was made on 19 October 2023.

Action taken since then

New systems meant there was better management oversight of supervision and training. This area for improvement had been met at this inspection.

See key question two for more information.

Complaints

There have been no complaints upheld since the last inspection. Details of any older upheld complaints are published at www.careinspectorate.com.

Detailed evaluations

How well do we support people's wellbeing?	5 - Very Good
1.3 People's health and wellbeing benefits from their care and support	5 - Very Good
How good is our leadership?	4 - Good
2.2 Quality assurance and improvement is led well	4 - Good
How good is our staff team?	4 - Good
3.3 Staffing arrangements are right and staff work well together	4 - Good
How well is our care and support planned?	4 - Good
5.1 Assessment and personal planning reflects people's outcomes and wishes	4 - Good

To find out more

This inspection report is published by the Care Inspectorate. You can download this report and others from our website.

Care services in Scotland cannot operate unless they are registered with the Care Inspectorate. We inspect, award grades and help services to improve. We also investigate complaints about care services and can take action when things aren't good enough.

Please get in touch with us if you would like more information or have any concerns about a care service.

You can also read more about our work online at www.careinspectorate.com

Contact us

Care Inspectorate
Compass House
11 Riverside Drive
Dundee
DD1 4NY

enquiries@careinspectorate.com

0345 600 9527

Find us on Facebook

Twitter: @careinspect

Other languages and formats

This report is available in other languages and formats on request.

Tha am foillseachadh seo ri fhaighinn ann an cruthannan is cànan eile ma nithear iarrtas.

অনুরোধসাপেক্ষে এই প্রকাশনাটি অন্য ফরম্যাট এবং অন্যান্য ভাষায় পাওয়া যায়।

یہ اشاعت درخواست کرنے پر دیگر شکلوں اور دیگر زبانوں میں فراہم کی جاسکتی ہے۔

ਬੇਨਤੀ 'ਤੇ ਇਹ ਪ੍ਰਕਾਸ਼ਨ ਹੋਰ ਰੂਪਾਂ ਅਤੇ ਹੋਰਨਾਂ ਭਾਸ਼ਾਵਾਂ ਵਿਚ ਉਪਲਬਧ ਹੈ।

هذه الوثيقة متوفرة بلغات ونماذج أخرى عند الطلب

本出版品有其他格式和其他語言備索。

Na życzenie niniejsza publikacja dostępna jest także w innych formatach oraz językach.