

The No1 Care Agency Support Service

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Service provided by:
AWG Care Limited

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About the service

The No1 Care Agency has been registered as a support service with care at home since June 2018. It is registered to provide a service to older people, adults with care needs associated with ageing/physical disabilities and people with learning disabilities, living in their own homes and in the wider community.

The service currently covers a wide geographical area across the central belt of Scotland and the Western Isles. The office base is in Glasgow. The provider is AWG Care Limited. The manager has overall responsibility for the service, and is supported by a team leader who is responsible for supervising support workers who provide direct care to people. At the time of the visit, there were six people using the service.

The provider states that the service aims "to provide consistently high standards of professional care in order that those we care for (the service user) can live as normally as possible where their individuality, independence and dignity are respected and upheld."

What people told us

We gathered the views of people using the service and their relatives. We heard that staff were courteous, always arrived on time and communication throughout was to a high standard. People praised the service for making a difference in their life. The following are some of the comments made:

"They really do go above and beyond. There's many examples where they do more than expected".

"I trust them and it feels good being reassured that [person's name] is safe and happy".

"They ask what we want to achieve, what skills we want to develop, and our needs and wants are seen as important".

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 care and support during the COVID-19 pandemic?	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**

Our focus in this inspection area was to establish how well people's wellbeing was supported. We found the performance of the service in relation to this key question to be very good.

The No1 Care Agency demonstrated person-centred practice well by placing the needs, wishes and interests of people at the heart of the service. Each person had a comprehensive and inclusive assessment period in which people highlighted what they wanted to achieve from their support, and how these goals would be met. This made support highly personal, focused, and aspirational leading to very good outcomes. A family member told us: "The service has helped [person's name] confidence and independence. It's more than just tasks, the whole approach has been life improving".

The service continuously sought people's views through regular surveys, questionnaires, and telephone calls. Opinions were then used to inform service improvement, ensuring people's views helped shape changes in their support and the wider service. For example, it was identified that some people could experience isolation during the pandemic. The service helped people contact local charitable organisations to access computers and set up regular digital meetings, promoting contact and friendships.

Relatives told us about the kindness and commitment of staff. There was also praise for staff knowledge of people's health needs, which were varied and complex. Management ensured that staff had access to appropriate training and there were frequent team meetings to discuss practice. We saw evidence of staff working closely with health professionals, listening to guidance, and updating their approach. The service's competence in meeting people's health needs was confirmed by a family member who told us: "staff have handled some emergency situations very well, that's reassuring to us".

Each person that used the service had a care plan. These plans were well balanced, capturing people's health needs as well as their personal interests and goals. The content was clear and available digitally, which helped guide staff well. The plans were regularly reviewed to ensure they were accurate and meeting needs. In some ways, the service showed that they were forward thinking. For example, risk assessments asked probing questions and ensured that people's rights were considered during decision making.

Some of the language used in care plans was dated. It appeared medical rather than social in nature, and this was inconsistent with the person-centred practice experienced across the service. Management identified this as a training need and stated they would arrange appropriate sessions and update plans to better reflect the values of the service.

How good is our care and support during the COVID-19 pandemic?**4 - Good****7.2 Infection control practices support a safe environment for both people experiencing care and staff.**

Our focus in this inspection area was to establish if infection prevention and control practices supported a safe environment for both people experiencing care and staff. We found the performance of the service in relation to this quality indicator to be very good.

At the time of the inspection, there was no one in the service positive to Covid-19. People we spoke with had confidence in the staff because they always observed high standards of infection prevention practices.

When we spoke with staff and reviewed staff training records, we were satisfied that staff had a good knowledge and understanding of best practice surrounding Covid-19. Staff spoke clearly about using personal protective equipment (PPE) appropriately and of good hand hygiene, in line with current guidance. Staff we spoke with had no recollection of ever being short of PPE. Staff knew where and how to access PPE when levels were running low. This ensured that the people who use the service and the staff themselves were safe and protected from risk of infection. One person told us: "Staff are professional and kind."

Regular spot checks confirmed that practice around infection prevention and control was safe and of a high standard.

7.3 Leadership and staffing arrangements are responsive to the changing needs of people experiencing care.

Our focus in this inspection area was to establish the responsiveness of leadership and staffing arrangements to the changing needs of people. We found the performance of the service in relation to this quality indicator to be good.

Staff spoke of a supportive management team who could be easily reached for support and advice whenever required. As a result, this ensured positive outcomes for people being supported.

The service had carried out a self evaluation, where they identified their strengths and areas for improvement. There was a clear Covid-19 contingency plan in place in case of an outbreak. People that we spoke with confirmed they had confidence in the management and that they felt in control of their care and support. Someone told us: "The manager is professional, calm and reassuring."

A quality assurance system that covered almost all aspects of the service and ensured that the views of the people who use the service influenced decisions taken, had also been developed. However, the manager should ensure that regular checks of staff registration with the Scottish Social Services Council (SSSC) are carried out and that records of the checks are kept. (See Area for improvement 1)

Within the minutes of staff meetings we saw evidence of staff reflection and lessons learnt from critical incidents. This clearly demonstrated that the service was keen to continually learn in order to improve outcomes for people.

Training records had not been updated to show all the training that staff had undertaken. The manager acknowledged this and agreed to address it.

Areas for improvement

1. The service should ensure that there is a system in place to demonstrate that staff registrations with SSSC are checked regularly and that records of the checks are kept.

This is to ensure care and support is consistent with Health and Social Care Standard 4.19 which states:

I benefit from a culture of continuous improvement with the organisation having robust and transparent quality assurance processes.

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

Requirements

Requirement 1

The service provider must ensure that there are systems in place that promotes consistency and continuity in the way the service is provided. The provider must ensure that a manager is available at all times to lead the service effectively. In their absence, clear and planned delegation must be in place with the staff team all knowing who to approach for guidance or support as families, service users, external agencies including the Care Inspectorate know when requested instantly who is managing the service.

This ensures care and support is consistent with the Health and Social Care Standards (HSCS) which state that: "I use a service that is well led and managed" (HSCS 4.23).

And, to comply with The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011. This is to comply with SSI 2011/210 Regulation 4 1)(a) - a requirement to make proper provision for the health, welfare and safety of service users.

Timescales to meet this requirement 01/08/2019.

This requirement was made on 13 August 2019.

Action taken on previous requirement

The service had a new structure of management that identified who would be the responsible person in the absence of the manager. People who use the service and their relatives and staff confirmed they knew who to go to if they could not get the manager in the first instance. There was also a range of personnel support that could be contacted.

Met - within timescales

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

The provider should carry out regular observations of each staff members' practice and increase supervisions to show that any actions identified have been carried out.

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)

This area for improvement was made on 13 August 2019.

Action taken since then

Records of spot checks were in place. People who use the service and/or their relatives confirmed that management carried out regular spot checks. This Area for improvement has been met.

Previous area for improvement 2

The manager and the service provider should develop a quality assurance policy which formalises the systems, responsibilities and processes used to assess the quality of service. This should include how service users and carers can contribute to the process.

This is to ensure care and support is consistent with the Health and Social Care Standards (HSCS) which state that: "I use a service and organisation that are well led and managed." (HSCS 4.23)

This area for improvement was made on 13 August 2019.

Action taken since then

A quality assurance system had been developed and implemented. We saw how people's views were sought and how these fed into the quality assurance system in order to improve quality. This Area for improvement has been met.

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
1.1 People experience compassion, dignity and respect	5 - Very Good
1.2 People get the most out of life	5 - Very Good
1.3 People's health and wellbeing benefits from their care and support	5 - Very Good
How good is our care and support during the COVID-19 pandemic?	4 - Good
7.2 Infection prevention and control practices are safe for people experiencing care and staff	5 - Very Good
7.3 Leadership and staffing arrangements are responsive to the changing needs of people experiencing care	4 - Good

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