

Queensferry Churches Care in the Community Support Service

The Haven 25b Burgess Road South Queensferry EH30 9JA

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**Type of inspection:** Unannounced

**Completed on:** 6 March 2023

**Service provided by:** Queensferry Churches Care in the Community

**Service no:** CS2003043908 Service provider number: SP2003003302



#### About the service

Queensferry Churches Care in the Community (QCCC) provides day care to older people in the community. The service users live locally and are supported in either a day care service or in their own home. The service is for older people who are frail or living with dementia. The day care service is located at The Haven in South Queensferry. Facilities included kitchen, dining and social areas. An enclosed garden to the rear offered seating and raised beds. A supper club also operated from this location for service users and family/ carers to attend.

## About the inspection

This was an unannounced which took place on 22nd, 23rd February 2023. 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:

- met twenty people using the service and spoke with five of their families
- · spoke with twelve staff, volunteers and management
- observed practice and daily life
- reviewed documents
- spoke with three involved professionals

## Key messages

- People were supported by a team that knew them well.
- People enjoyed the time they spent at the service.
- People were treated with kindness, dignity and respect.

## 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?	4 - Good
How good is our leadership?	5 - Very Good

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

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

We evaluated this key question as good. There were a number of strengths which outweighed areas for improvement.

People were warmly welcomed into the service by a staff team who knew them well. Volunteers worked in the service and assisted with refreshments, taking part in the activities. Staff were aware of people's individual needs and abilities. People were all treated with compassion dignity and respect. The atmosphere on arrival over a warm drink was friendly with lots of laughter. We observed caring interactions from staff with people, there was no sense of rush over the day. People told us they 'looked forward to coming'. Some people also have support in their own home, or community. This meant people felt at ease as they were supported by a team who knew them well.

People had a personal plan. Plans contained personal information, health information, and likes / dislikes. Risk assessments for those who needed them were completed and reviewed on a regular basis. Personal plan audits took place, any actions were shared by the team for completion. Daily notes of attendance were completed and signed. The staff team had recognised that people's outcomes could be more accurately captured in the personal plans and were in the process of reviewing these. This will be monitored at the next inspection.

People had regular reviews, which included family/carers. An involved professional told us that the staff were thorough and trained to undertake referral assessments for people. The local General Practitioners were involved in offering sessions to the staff on health related topics. In addition, staff also received regular training and development in relation to health related topics. This meant that people were receiving responsive care and support because staff and professionals worked well together.

Management were undertaking a review of the catering arrangements, seeking feedback from the people. Menus were discussed with people in advance, if on the day they wished another choice a substitute was available. Dining tables were set with napkins, decoration and condiments. The room allowed for staff to be part of the lunchtime experience. We observed lots of chat and laughter between people and staff. This meant that people were spending time with staff who understood them and the people experienced warmth and kindness.

People managed their own finances. For those people who had powers of attorney in place, they were supported by their families. This was recorded within the personal plans. People were not routinely supported with medication whilst at the service. A policy was in place and staff received training. If support was required the service had access to a secure locked cabinet for storage of any medication during their visit. This meant that if people needed help they were supported by a team who were trained and skilled.

Activity planners were created weekly for members. They were flexible and open to change. People told us they had recently enjoyed the singers who had visited. We observed people taking part, making the music choices for gentle chair gym and group activities. We observed that activities were adapted to suit members choices on the day. People also brought activities they had completed at home to share in the group. One person we spoke with told us 'they had created and delivered a few valentine cards'. A display board had evidence of recent activities. People had space in the service to take part in activity or spend time one to one with staff. Some people and their family/carer attended 'supper club', an evening event. This gave them the opportunity to meet other people and build relationships.

Families told us they looked forward to supper club and speaking with other people. This meant that people had experiences and took part in activities that were meaningful to them.

The service has local community links, one professional told us the service provided a 'personal touch, helps locals, its a fabulous service'.

The service was clean. Schedules of cleaning and maintenance were in place. Throughout the pandemic a robust process was in place for infection prevention control. The service had access to personal protective equipment (PPE) if required. The service had recently updated the Infection Prevention and Control Policy. This meant that people experienced a space that was looked after, clean and maintained.

#### How good is our leadership?

lership? 5 - Very Good

We evaluated this key question as very good. The strengths outweighed the few areas for improvement.

The staff team worked in key worker roles and accessed the personal plans to support people who attended the service or received visits at home. The service seek feedback/opinions from the people through casual conversations and activities. The service uses social media platforms regarding local events as well as the service activities. This meant that people were involved in how the service developed by providing feedback.

Polices were in place with regular review at board level, the strategic plan was under development. The service produced an annual report. Audits of the personal plans took place and actions were noted. Equipment was checked and maintained regularly within the service. The service had recently been successful in receiving monies, which it was going to invest in the front garden makeover for people to enjoy in better weather. Incidents, accidents and complaints were held centrally with actions recorded as well as any follow up. This meant that people benefited from quality assurance processes in place.

The service had clear processes in place for recruitment, induction and training. A training matrix was in place, staff told us that management encouraged them to seek out new learning opportunities. Staff received regular supervision. Team meetings were regular, staff contributed to these. Staff told us that the management team were 'supportive and approachable'. Involved professionals told us that the management team were 'dedicated and motivated'.

Volunteers that supported the service told us 'they felt like part of the team'. A volunteer coordinator managed this aspect of the service. This meant the peoples well being was supported by a service that was well led and managed.

# 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 service should ensure that overdue reviews are undertaken and any updated information relating to risk assessments is fully recorded. This is to meet National Care Standard 4 - Support Services - Support Arrangement

#### This area for improvement was made on 29 May 2017.

#### Action taken since then

Staff completed reviews & risk assessments for people who required them, along with regular review thereof.

## 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?	4 - Good
1.1 People experience compassion, dignity and respect	4 - Good
1.3 People's health and wellbeing benefits from their care and support	4 - Good
1.5 People's health and wellbeing benefits from safe infection prevention and control practice and procedure	4 - Good

How good is our leadership?	5 - Very Good
2.2 Quality assurance and improvement is led well	5 - Very Good

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