

## Contrast Care Limited Support Service

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Type of inspection: Unannounced  
Inspection completed on: 16 April 2018

**Service provided by:**  
Contrast Care Limited

**Service provider number:**  
SP2015012617

**Care service number:**  
CS2015342597

## About the service

Contrast Care Limited is a service which is registered with us to provide a care at home support service to adults or older adults who live in their own homes.

At the time of inspection the service was supporting around 30 people. Services were arranged through NHS Highland and people were being supported to manage their Self Directed Support budget under option 2, which is often referred to as an Individual Service Fund. The service had a mission statement which said:

***We are dedicated to providing a team of compassionate carers to work in partnership with and provide quality care to people in the community. We will work to the highest standards of care and focus on employee excellence by implementing a culture of learning in the workplace.***

Contrast Care Limited aims and objectives were:

- 1. Deliver a high quality, person-centred care service that is responsive to individual service user's needs and improves overall quality of life.***
- 2. Ensure care delivered is respectful of each service user's rights to make informed decisions, promoting independence, equality and diversity and ensuring the right to privacy and dignity at all times.***
- 3. By adopting an outcome-focused approach, aim to achieve the goals and priorities identified by the service users at a time that suits them.***
- 4. Provide continuity of care with one key member of staff to be assigned to each individual service user.***
- 5. Ensure the development of knowledge and skills through formal qualifications and by implementing a programme of training and development.***
- 6. Provide leadership, guidance and support for staff at all times and encourage staff involvement and ideas.***
- 7. Complaints and feedback mechanism in place for both staff and service user to ensure continual improvement.***

Contrast Care Limited was registered with the Care Inspectorate on 7 April 2016.

## What people told us

For this inspection, we gathered people's views in a variety of different ways. We asked the service to hand out the following prior to inspection:

- Ten care standards questionnaires for people who experience care from the service. Nine questionnaires were returned from people who experience care from the service.
- Ten staff questionnaires. Eight staff responses were received back.

During the inspection we met with three people who experienced support from the service and some family members who were present when we visited. This meant through the course of our inspection we gained the views of:

- Thirteen people who experience support from the service,
- two family members.

Some of the views shared with us were:

- 'I can't find fault with the carers. They are loyal, adaptable and caring'.
- 'I've had some new staff, and they shadow existing staff so I get to know them'.
- 'I wouldn't be able to do without them'.
- 'Has been very good for me. All do what they should'.
- 'In my book I couldn't ask for any better, in fact you couldn't get any better'.

Views shared with us were all comparable. People valued and greatly appreciated the service they were receiving and that the service was of high quality.

## Self assessment

A self-assessment is no longer requested from this type of service. When we inspected we reviewed the service's improvement and strategic objective plans. The manager was asked to consider how the outcomes for the people who experience support from the service would improve. The manager should consider how developments and improvements could be measured or evaluated.

## From this inspection we graded this service as:

Quality of care and support	5 - Very Good
Quality of staffing	4 - Good
Quality of management and leadership	4 - Good

## Quality of care and support

### Findings from the inspection

The overall rating for the care and support was to a very good standard. However, the care and support people experienced from the service was excellent.

People who experienced support from Contrast Care spoke very highly about the service they received. People were supported by small groups of carers which meant they were able to get to know them, which enabled the carers to get to know the person they were supporting as well. Care and support people experienced was tailored to the individual's needs and people said they were getting the service they wanted. Unfamiliar staff were introduced to people before commencing support on their own. This approach provided opportunities for the new staff to shadow existing staff members, who were able to demonstrate how the care and support was to be carried out. Prior to staff carrying out support on their own, the manager checked with staff to ensure they were comfortable and able to provide excellent care. People receiving the service felt this was a very good approach as they weren't being supported by strangers.

The manager of the service met everyone who was being supported, be this through initial visits, or through delivering direct support. This enabled the manager to complete the necessary support plans for the person which was based on their needs. The staff and the manager kept in contact regularly which meant any issues were being addressed. If there were changes to support, this was being communicated to people who were being supported, keeping them up to date when necessary.

Some comments which reflected this evaluation were:

- 'So far the service has been excellent. They keep me informed of any changes. Communication is very good'.
- 'The care team are friendly, good natured, highly skilled and provide an excellent service'.
- 'They treat XXX with respect, are kind and compassionate and XXX trusts them and is very comfortable with them'.

There had been some developments within the care and support plans which meant the documents were very strongly linked to the outcomes for the person. The documentation reviewed what the outcomes were for the person; what the person was able to do; what support was required and how this should be done. It was clear to see how outcomes were to be measured and it was clear to see how people were consulted and involved in their plans.

Some documents we reviewed were overdue review, and this was something the manager was taking action to improve. The manager was introducing the role of key workers within the team who would carry out some reviewing responsibilities. There had been work on the risk assessments which had addressed the areas raised at the last inspection. This meant risk assessments were person centred and reflected the risks for an individual.

## Requirements

**Number of requirements:** 0

## Recommendations

**Number of recommendations:** 0

**Grade:** 5 - very good

## Quality of staffing

### Findings from the inspection

The quality of the staffing theme was to a good standard.

Staff were being recruited in a safe manner and were introduced into the organisation in a planned and considered way. Staff were allocated shadow shifts with existing staff members, or the manager, to get to know people they would be supporting and how they preferred their care and support to be delivered. This meant staff were competent in the support they would be offering prior to commencing lone working. The induction process worked well to enable staff to deliver a high quality service. People who were being supported felt comfortable with their carers and they appreciated the opportunities to get to know the staff members during their induction.

There was a training plan in place which addressed the previous recommendation made at the last inspection. The plan identified staff training needs and when this would be refreshed or updated. The courses were organised and delivered face to face to staff within the service, and this was carried out in small groups. From records we reviewed, staff were trained appropriately to carry out their job roles. Staff told us they felt the training was great and they felt appropriately skilled to do their jobs.

There were plans in place for supervision and annual performance reviews, which were happening. Supervisions and team meetings were not happening as frequently as the manager had intended and we had some discussions about how this could improve. The manager was taking steps to address this. Staff reported feeling very well supported and kept up to date about any changes or updates and they told us they could always get advice when this was needed. The manager should continue to develop the on-going staff support and role out their plan to develop team meetings. The manager was considering ways to record the practical observations and medication competencies more.

Feedback we received from people who experienced support from the service was very positive about the staff team. Some of the things people said about staff were:

- 'The carers are wonderful, always cheerful and so helpful. I could not manage without them'.
- 'Top marks 10/10'.
- 'Everyone who comes in is very nice, they are good to me and nothing is too much bother'.
- 'I can't find fault with the carers'.

## Requirements

**Number of requirements:** 0

## Recommendations

**Number of recommendations:** 0

**Grade:** 4 - good

## Quality of management and leadership

### Findings from the inspection

The quality of management and leadership was to a good standard.

Feedback received from staff and people who experienced support from the service was very complimentary of the management and leadership within the service. Many people who received support regularly saw the manager of the service when they were delivering direct support. The manager made sure that they were the first person to be introduced to any new people the service was to support. The manager set out their plan to continue this as it enabled them to get to know the person, building up positive, professional relationships.

There had been some improvements made around some of the quality assurance processes, but there had been a lack of management resources available to ensure the improvements were sustained. The manager was routinely carrying out direct care during the week, which limited the time available elsewhere.

The manager had identified some actions to take within their improvement and development plan which would address some of the areas identified. For instance, the introduction of key workers within the team, which would facilitate reviews for people the service supports. Trackers had been introduced to monitor reviews and staff supervisions, but again due to lack of time within the management and leadership these were not

establishing fully the necessary improvements. A previous recommendation will continue around quality assurance (**see Recommendation 1**).

As the manager worked with many of the people the service supports, this enabled them to gain feedback as they went along. People reported that the manager was very approachable and people who were being supported had got to know them well.

## Requirements

**Number of requirements:** 0

## Recommendations

**Number of recommendations:** 1

1. The provider should put in place comprehensive and robust quality assurance mechanisms that:
  - evaluate all areas of the service highlighting areas for improvement or development
  - then allows the provider to create an action plan to address areas that require improvement or development and
  - continually monitor performance within the service.

**Health and Social Care Standards, Standard 4.19: I benefit from a culture of continuous improvement, with the organisation having robust and transparent quality assurance processes.**

**Grade:** 4 - good

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

## Previous requirements

There are no outstanding requirements.

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

### Previous recommendations

#### Recommendation 1

The manager should review how they complete risk assessments to make sure they are:

- person centred in their completion,
- and the control measures are easily identifiable against the areas of assessed risk.

In making this recommendation we considered:

**National Care Standards Care at Home: Standard 3 - Your personal plan.**

**This recommendation was made on 27 April 2017.**

#### Action taken on previous recommendation

The provider had taken steps to review how they carried out risk assessments and had made these person centred. The risk assessments now reflected individual risks relevant to a person who received support.

**This recommendation has been met.**

#### Recommendation 2

The manager should consider creating a training needs analysis which sets out the following:

- what training is required for staff working within the service,
- who will be providing the training,
- and when does the training need to be renewed or refreshed.

In making this recommendation we considered:

**National Care Standards, Care at Home: Standard 4 - Management and staffing arrangements.**

**This recommendation was made on 27 April 2017.**

#### Action taken on previous recommendation

The provider had carried out a training needs analysis and had created a training plan. The training plan addressed all areas within this recommendation.

**This recommendation has been met.**

#### Recommendation 3

The manager should consider their supervision and staff support policies to ensure that:

- staff are offered a formal probationary review meeting to identify their performance and their on-going continued professional development needs,

- staff are offered formal staff support from their line manager regularly,
- staff team meetings are introduced and take place regularly.

In making this recommendation we considered:

**National Care Standards, Care at Home: Standard 4 - Management and staffing arrangements.**

**This recommendation was made on 27 April 2017.**

### Action taken on previous recommendation

The provider had established ways to ensure that probationary review meetings were taking place to confirm staff in post. Formal supervision was happening, although frequency should improve more. Team meetings had happened, and the manager was looking at ways to increase their frequency.

**This recommendation has been met.**

## Recommendation 4

The provider should put in place comprehensive and robust quality assurance mechanisms that:

- evaluate all areas of the service highlighting areas for improvement or development
- then allows the provider to create an action plan to address areas that require improvement or development and
- continually monitor performance within the service.

In making this recommendation we have considered:

**National Care Standards, Care at Home: Standard 4 - Management and staffing arrangements.**

**This recommendation was made on 27 April 2017.**

### Action taken on previous recommendation

The provider had put in place quality assurance processes. At this inspection these had not been established well enough to demonstrate to us that the necessary improvements or developments had been made.

**This recommendation will be repeated, so therefore has not 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](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
6 Apr 2017	Unannounced	Care and support 5 - Very good Environment Not assessed Staffing 3 - Adequate Management and leadership 4 - Good

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