

# Care service inspection report

Full inspection

## Tailor Maid Homecare Housing Support Service

Unit 1, Spiersbridge Way  
Thornliebank  
Glasgow



HAPPY TO TRANSLATE

Service provided by: Tailor Maid Homecare Ltd.

Service provider number: SP2010010906

Care service number: CS2010273048

Inspection Visit Type: Unannounced

Care services in Scotland cannot operate unless they are registered with the Care Inspectorate. We inspect, award grades and set out improvements that must be made. We also investigate complaints about care services and 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.

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## Summary

This report and grades represent our assessment of the quality of the areas of performance which were examined during this inspection.

Grades for this care service may change after this inspection following other regulatory activity. For example, if we have to take enforcement action to make the service improve, or if we investigate and agree with a complaint someone makes about the service.

### We gave the service these grades

Quality of care and support	6	Excellent
Quality of staffing	5	Very Good
Quality of management and leadership	5	Very Good

### What the service does well

The service continued to be excellent at involving their service users in assessing and improving the quality of care and support.

We found that the service continued to be excellent in meeting the health and welfare needs of their service users.

The service provided a very good level of protection for service users in relation to the recruitment of staff as well as excellent support and training opportunities for staff in order to provide the required level of care and support.

We found that the service was very good at involving their workforce in the direction and future objectives of the service.

The systems and processes used had continued to provide a very good level of quality assurance.

### What the service could do better

The service should continue to offer service users and their relatives the opportunities to be involved in staff recruitment, training and development.

Some of the recruitment and induction processes should be reviewed and updated in line with best practice.

Induction and supervision records could be further enhanced by reflecting feedback from colleagues and service users.

### What the service has done since the last inspection

The service had issued a questionnaire to their current service users in January 2015 about the quality of care, staff and management.

The service had continued to develop the range of training available for staff.

Staff meetings and supervisions had been further developed since the last inspection.

The 'quality check' visits carried out by supervisors to service users' homes now included observations of staff and any areas of improvement were seen to have been addressed.

### Conclusion

The service continued to be responsive and flexible to the needs of service users and had addressed any areas for improvement highlighted at the last inspection. This had resulted in an increase in the quality grades awarded to some quality statements. Very positive feedback was received from service users and relatives in relation to the staff and level of care provided.

# 1 About the service we inspected

The Care Inspectorate regulates care services in Scotland. Information about all care services is available on our website at [www.careinspectorate.com](http://www.careinspectorate.com).

The service was previously registered with the Care Commission and transferred its registration to the Care Inspectorate on April 2011.

Tailor Maid Homecare is registered to provide support to adults living in their own homes. The service had provided care and support to up to 85 adults over the last year and were currently providing care and support to 71 adults.

The service "firmly believe that home care offers a realistic opportunity for many people who require care to remain living in their own homes. It is our goal to ensure that those people who choose to take this option should receive the maximum information and support to enable them to lead their lives as independently as possible, in comfort and safety".

## Recommendations

A recommendation is a statement that sets out actions that a care service provider should take to improve or develop the quality of the service, but where failure to do so would not directly result in enforcement.

Recommendations are based on the National Care Standards, SSSC codes of practice and recognised good practice. These must also be outcomes-based and if the provider meets the recommendation this would improve outcomes for people receiving the service.

## Requirements

A requirement is a statement which sets out what a care service must do to improve outcomes for people who use services and must be linked to a breach in the Public Services Reform (Scotland) Act 2010 (the "Act"), its regulations, or orders made under the Act, or a condition of registration. Requirements are enforceable in law.

We make requirements where (a) there is evidence of poor outcomes for people

using the service or (b) there is the potential for poor outcomes which would affect people's health, safety or welfare.

Based on the findings of this inspection this service has been awarded the following grades:

**Quality of care and support - Grade 6 - Excellent**

**Quality of staffing - Grade 5 - Very Good**

**Quality of management and leadership - Grade 5 - Very Good**

This report and grades represent our assessment of the quality of the areas of performance which were examined during this inspection.

Grades for this care service may change following other regulatory activity. You can find the most up-to-date grades for this service by visiting our website [www.careinspectorate.com](http://www.careinspectorate.com) or by calling us on 0345 600 9527 or visiting one of our offices.

## 2 How we inspected this service

### The level of inspection we carried out

In this service we carried out a low intensity inspection. We carry out these inspections when we are satisfied that services are working hard to provide consistently high standards of care.

### What we did during the inspection

This report was written following an unannounced inspection which was carried out on 4 and 8 December between 9.30am and 6pm. Feedback was provided to the management at the end of the visit.

As requested by us, the care service submitted a self assessment and an annual return.

We sent 20 questionnaires to the manager to distribute to service users. Five service users and 10 relatives returned completed questionnaires.

We also sent 10 staff questionnaires for the manager to distribute. Six completed questionnaires were returned.

In this inspection we gathered evidence from various sources, including the relevant sections of policies, procedures, records and other documents. These included:

- service user personal plans
- questionnaires
- staff recruitment and training records
- staff rotas and meetings
- discussions with management.

## **Grading the service against quality themes and statements**

We inspect and grade elements of care that we call 'quality themes'. For example, one of the quality themes we might look at is 'Quality of care and support'. Under each quality theme are 'quality statements' which describe what a service should be doing well for that theme. We grade how the service performs against the quality themes and statements.

Details of what we found are in Section 3: The inspection

## **Inspection Focus Areas (IFAs)**

In any year we may decide on specific aspects of care to focus on during our inspections. These are extra checks we make on top of all the normal ones we make during inspection. We do this to gather information about the quality of these aspects of care on a national basis. Where we have examined an inspection focus area we will clearly identify it under the relevant quality statement.

## **Fire safety issues**

We do not regulate fire safety. Local fire and rescue services are responsible for checking services. However, where significant fire safety issues become apparent, we will alert the relevant fire and rescue services so they may consider what action to take. You can find out more about care services' responsibilities for fire safety at [www.firescotland.gov.uk](http://www.firescotland.gov.uk)



## The annual return

Every year all care services must complete an 'annual return' form to make sure the information we hold is up to date. We also use annual returns to decide how we will inspect the service.

**Annual Return Received:** Yes - Electronic

## Comments on Self Assessment

Every year all care services must complete a 'self assessment' form telling us how their service is performing. We check to make sure this assessment is accurate.

The Care Inspectorate received a fully completed self assessment document from the manager. We were satisfied by the way this had been completed which included relevant information for each heading that we grade services under.

The manager identified what they thought the service did well, some areas for development and any changes that were planned. The manager told us how the people who used the care service had taken part in the self assessment process.

## Taking the views of people using the care service into account

Five Care Inspectorate questionnaires were completed and returned from service users prior to the inspection visit. They were all very satisfied with the quality of care received. Additional comments received were:

'with the first class care of Tailor Maid Home Care I am able to stay happily in my own home and enjoy a good quality of life'

'this company have given me excellent support for almost two years and can't thank them enough for the help given to enable me to live happily in my own home'.

## Taking carers' views into account

Ten Care Inspectorate questionnaires were completed and returned from relatives prior to the inspection visit. They were all very satisfied with the quality of care received. Additional comments received were:

'I have found the staff all very pleasant and helpful. It has given me most welcome time to myself. One particular carer has such a lovely way with my relative and they always remark what a lovely lady she is'

'extremely happy with standard of care'

'the carer that gives my relative care is very well matched. They have a lot in common'

'the girls from Tailor Maid are like part of the family, don't know what we would do without them. Cannot praise them highly enough'

'Tailor Maid Care have taken away the stress and worries I had concerning my friend's welfare. They have taken the time to get to know what I expect and want for my friend. Everything I ask is immediately taken care of and they are looked after so well. Their personal care is of the highest standard and they take time to stimulate their mind by playing music and dancing'

'although all staff are kind and caring their skills can be variable'.

## 3 The inspection

We looked at how the service performs against the following quality themes and statements. Here are the details of what we found.

### Quality Theme 1: Quality of Care and Support

Grade awarded for this theme: 6 - Excellent

#### Statement 1

“We ensure that service users and carers participate in assessing and improving the quality of the care and support provided by the service.”

#### Service Strengths

The service had continued to be excellent at involving their service users in assessing and improving the quality of care and support. We focused on the information provided and how the service involved service users.

In the personal plans viewed, we found written agreements and the 'confirmation of instructions' were evident and signed by either the service user or next of kin following the initial assessment and commencement of service. This confirmed agreement with the care to be provided as well as the general terms and conditions of the service. Where there had been any subsequent changes to care needs or service provision, the 'confirmation of instructions' had been updated and signed.

A communication diary and a copy of the personal plan were kept in the service user's home. The communication diary reflected the care provided by staff and any discussions with service users and their families.

Regular communication with relatives via telephone and email was evident. Records showed discussions about the day to day care provided and any concerns highlighted.

The service continued to issue a care plan review letter every five months asking service users if they wished a review of their care package or if they were satisfied with their current service. The service had a system which monitored that care reviews were carried out within the required timescale and we could see that care reviews were up to date.

The service had issued their second newsletter in the summer of 2015. This gave good information about Self Directed Support, Care Inspectorate, the current staff team and new staff, achievements in staff training and East Renfrewshire 2015 business awards for Outstanding Performing Business. Feedback from service users and the opportunity to give feedback or be involved in staff recruitment was also evident. Very positive feedback about the care, staff and newsletter was seen.

The service had issued a questionnaire to their current service users in January 2015 about the quality of care, staff and management. Responses were collated and reflected that service users found the service to be very good or excellent. Comments included:

'all aspects of care receive individual attention and care workers are kind and thoughtful'

'the company is very professional and well organised and the quality of the staff reflects this'

'excellent timekeeping'

'nothing is too much effort, the girls are very good and very reliable'

'I can relax knowing my loved one is being treated with the love and dignity they deserve'

'communication methods are excellent and keep me well informed'.

The questionnaire also asked for any questions that they would like to be included at staff interviews and a few were suggested.

All of the Care Inspectorate questionnaires returned from service users and relatives indicated that they had a support plan which detailed their support needs and that the service checked with them regularly that they were meeting their needs.

The service had a detailed brochure and website which gave good information about the services provided, the options available and what to do to enquire about the support they needed.

We saw service users' involvement and feedback in relation to planning their care, staff and quality checks.

### **Areas for improvement**

The service should maintain this level of quality and continue to offer service users and their relatives the opportunities to be involved in staff recruitment, training and development.

### **Grade**

6 - Excellent

**Number of requirements - 0**

**Number of recommendations - 0**

### Statement 3

“We ensure that service users' health and wellbeing needs are met.”

#### Service Strengths

We found that the service continued to be excellent at meeting the health and welfare needs of their service users.

We viewed three personal plans which reflected person centred detail in risk assessments and care planning with any changes to care recorded. Personal information and preferences were detailed and the aims of the package were clearly recorded. Time periods for each planned visit were indicated on the service plan and we saw that the minimum time period was half an hour.

For the plans viewed, we saw that staff had completed the daily checklist and communication diary to reflect the time of the visit and the care carried out. Where a task had not been completed or the planned visit had not taken place, the reason for this was recorded. Any changes to care were communicated to staff.

Where meal preparation was part of the support provided, we saw clear information about who provided the food for the meals, the service user's food preferences and weekly menu planners.

Any assistance required with prompting medication or applying creams was recorded. Staff involved in applying creams had received training on how to apply and record the application.

Any health professionals involved in the service user's care were also recorded as was any contact with them.

Photos of the staff team supporting the service user were contained within the plan and we were told that staff never provided care to a service user without first being introduced by a staff member that the service user knew.

The service had developed staff profiles to help with matching the most appropriate staff to service users.

Staff rotas reflected the regular group of staff who provided the support for each service user. Service users and their relatives were given the option to be told which staff member was visiting each time and this information was given via email or at the previous visit.

The service recorded any accidents or incidents sustained by their service users while staff were providing care. None were recorded since the last inspection.

### Areas for improvement

The service should maintain this level of quality.

Although there was no impact on the outcomes for service users, we found that some instructions about the application of creams could be more specific. This was discussed with the manager who agreed to address this.

### Grade

6 - Excellent

**Number of requirements - 0**

**Number of recommendations - 0**

## Quality Theme 3: Quality of Staffing

Grade awarded for this theme: 5 - Very Good

### Statement 2

"We are confident that our staff have been recruited, and inducted, in a safe and robust manner to protect service users and staff."

### Service Strengths

We found that the service provided a very good level of protection for service users in relation to the recruitment of staff. We looked at a sample of records of newly recruited staff and related policies.

We viewed three new staff files and found that recruitment practice was at a very good level in relation to the processes undertaken by the service and documentation obtained.

Induction records viewed, showed that various and relevant topics including policies, procedures and mandatory training were covered. We saw that supervisory visits and a six week review were carried out and signed off by the employee and their supervisor over a three month period. A 12 week review was carried out by the directors at the end of the probationary period and a contract issued.

Staff were issued with an Employee handbook which gave relevant information about the service's management structure, services provided, policies and procedures.

The manager was aware of the timescales for the registration of staff with the Scottish Social Services Council (SSSC) and was supporting staff to achieve the relevant qualifications.



## Areas for improvement

The following areas were highlighted to improve the recruitment of staff.

In the staff files viewed we noted that:

- the references obtained did not always relate to the applicant's most recent full-time employer or recent professional character reference where there had been no employment for some years
- interview records could have reflected more discussion about what the job entailed and the applicant's attributes/abilities particularly where there was no previous care experience. Also where there were issues about obtaining references from current employers this should have been recorded
- only relevant information from the Protection of Vulnerable Group (PVG) records should be kept and the original destroyed.

The service's recruitment policy reviewed in July 2015 should reflect up to date guidance about the keeping of PVG information and checks with relevant registration bodies. It should also reflect that one reference should be obtained from the last/most recent employer. This was discussed with the manager who was advised to refer to the Scottish Executive 2007 best practice document, 'Safer recruitment through better recruitment'.

Induction records could reflect who the new employee's 'buddy' was and record feedback from them and service users about the new staff's performance.

## Grade

5 - Very Good

**Number of requirements - 0**

**Number of recommendations - 0**

### Statement 3

“We have a professional, trained and motivated workforce which operates to National Care Standards, legislation and best practice.”

#### Service Strengths

We found that the service provided excellent support and relevant training opportunities for staff in order to provide the required level of care and support to service users. We looked at training records.

The service's training records showed that there was an excellent range of on-going training for staff following their induction training. This included moving and assisting, food safety, first aid and medication. The service had a system which highlighted when refresher training was due.

Staff had continued to be supported through the six part self-study dementia course, from Stirling University, for domiciliary care staff. The fourth group of staff were nearly complete and then only new staff remained to receive this training.

Visual awareness training in relation to eyesight conditions and their effects from an optician and inhaler techniques shown to carers by a pharmacist and practice nurse for specific service users was also evident.

Other useful information, which related to their service users, such as Bi-polar disorder, Parkinson's disease, warfarin medication and catheter care was also discussed with staff.

One of the supervisors had attended a trainer's course and was responsible for carrying out training and ensuring that all training was up to date. Two supervisors had attended a two day stroke management course provided by the Stroke Association and the information was being cascaded to all staff.

#### Areas for improvement

The service should maintain this level of quality.

**Grade**

6 - Excellent

**Number of requirements - 0**

**Number of recommendations - 0**

## Quality Theme 4: Quality of Management and Leadership

Grade awarded for this theme: 5 - Very Good

### Statement 2

"We involve our workforce in determining the direction and future objectives of the service."

### Service Strengths

We found that the service was very good at involving their workforce in the direction and future objectives of the service. We looked at on-going staff learning, development and supervision records.

From records viewed, we saw that staff had received regular supervision meetings since the last inspection.

Individual records sampled, showed discussions relating to training needs, practice, and performance.

We saw that three staff meetings had been held in 2015. This gave staff a good opportunity to meet to discuss any training, practice issues and new policies. Minutes of meetings reflected learning and development as well as sharing of information and the presentation of training certificates to individual staff. Open discussion and feedback from staff was also evident.

A staff feedback form had been developed to allow staff to reflect the benefits or improvements to training which they received. We saw that feedback about the induction training was very positive:

'course very detailed and comprehensive. Although a lot of information, it was all straightforward and pitched at the correct level'

'felt the course was definitely beneficial as there were lots of pieces of information I had not previously been aware of. Plenty of time and opportunity given to ask questions and give input'

'the course was beneficial as it will enable me to be a better carer and do things right'.

The service also now had four homecare supervisors who were allocated specific managerial jobs and on-call duties.

We were informed, by management, that all staff were involved in the development of service users plan of care, although initiated by the manager, staff input was invaluable.

Management reflected that they valued staff through listening to staff feedback, presenting training certificates and offering financial incentives for achieving qualifications. They were also planning to take account of the living wage and new pension guidance.

The Care Inspectorate questionnaires returned from staff were all very positive in relation to the support and training received from supervisors and management.

### Areas for improvement

The following areas were highlighted to provide further development for staff.

Supervision records could be further enhanced by reflecting feedback from colleagues and service users.

### Grade

5 - Very Good

**Number of requirements - 0**

**Number of recommendations - 0**

## Statement 4

“We use quality assurance systems and processes which involve service users, carers, staff and stakeholders to assess the quality of service we provide”

### Service Strengths

We found that the systems and processes used continued to provide a very good level of quality assurance. We looked at how the service gained feedback from various people, their quality checks and management meetings.

As previously stated, feedback from the service users, questionnaires and the Care Inspectorate's questionnaires was very positive.

There was evidence of the service working with other services and health professionals in relation to the care and support of service users. Feedback received from health professionals was seen to be very positive in relation to the service's input and care.

The supervisors had carried out 'quality check' visits to service users' homes throughout the year. The format had been developed and now included observations of staff and any areas of improvement were seen to have been addressed. Feedback from service users was very positive:

'happy with carers and communication with office'

'I like the rota being sent to our ipad with times and carers'

'delighted with all services from Tailor Maid Homecare, couldn't ask for more'

'feel very at ease with the carers and look forward to their visits'.

The service had a data base which included the relevant service users' details including visit times, allocated staff and any missed or delayed visits. There had been no missed visits and where the regular staff were on leave this had been covered by staff known to the service user.

There was evidence of regular management meetings which reflected discussions about:

- staff training and development
- quality checks
- ongoing recruitment and new staff
- care review meetings.

The service had no records of any complaints received since the last inspection.

An action plan had been developed following the last inspection in relation to areas for improvement and these areas had been actioned.

The service had been awarded Outstanding Performing Business at the 2015 East Renfrewshire Business Awards.

### Areas for improvement

Due to the areas for improvement reported in previous statements, we concluded that the quality assurance processes could be more used more effectively.

### Grade

5 - Very Good

**Number of requirements - 0**

**Number of recommendations - 0**

## 4 What the service has done to meet any requirements we made at our last inspection

### Previous requirements

There are no outstanding requirements.

## 5 What the service has done to meet any recommendations we made at our last inspection

### Previous recommendations

There are no outstanding recommendations.

## 6 Complaints

No complaints have been upheld, or partially upheld, since the last inspection.

## 7 Enforcements

We have taken no enforcement action against this care service since the last inspection.



## 8 Additional Information

There is no additional information.

## 9 Inspection and grading history

Date	Type	Gradings	
13 Jan 2015	Unannounced	Care and support Environment Staffing Management and Leadership	6 - Excellent Not Assessed 5 - Very Good 5 - Very Good
27 Jan 2014	Announced (Short Notice)	Care and support Environment Staffing Management and Leadership	5 - Very Good Not Assessed 4 - Good 4 - Good
9 Nov 2012	Announced (Short Notice)	Care and support Environment Staffing Management and Leadership	4 - Good Not Assessed 4 - Good 4 - Good
3 Jun 2011	Announced (Short Notice)	Care and support Environment Staffing Management and Leadership	4 - Good Not Assessed 4 - Good 4 - Good

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