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Care service inspection report

Capability Scotland - Fife Community Based Services

Housing Support Service

Unit 1
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Inspected by: Susan White

Type of inspection: Unannounced

Inspection completed on: 13 June 2012

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Service provided by:

Capability Scotland

Service provider number:

SP2003000203

Care service number:

CS2003055021

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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	5	Very Good
Quality of Staffing	2	Weak
Quality of Management and Leadership	2	Weak

What the service does well

Service users and their relatives appreciate the care and support from Capability staff. The organisation responds promptly and effectively when problems arise.

What the service could do better

The service was found to breach of the conditions of registration. This needs to be carefully addressed and time is allowed for consultation.

What the service has done since the last inspection

A change in manager and two serious incidents have had a major impact on the management of the service. The quality of health and wellbeing, care and support has continued to a very good standard.

Conclusion

Capability - Fife Community Based Services is appreciated by service users and their representatives.

Responses to serious incidents have been prompt and effective in maintaining support for the service users.

Interim management arrangements have steadied the service through these difficult times.

Who did this inspection

Susan White

1 About the service we inspected

Capability - Fife Community Based Services provides a Housing Support Service and a Care at Home service for fifteen adults with a learning disability in and around Dunfermline. There is a staff team of up to 90 including relief staff to deliver care and support to the service user group.

The service has been registered with the Care Inspectorate since April 2011.

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

Quality of Care and Support - Grade 5 - Very Good
Quality of Staffing - Grade 2 - Weak
Quality of Management and Leadership - Grade 2 - Weak

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.scswis.com or by calling us on 0845 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 high intensity inspection. We carry out these inspections where we have assessed the service may need a more intense inspection.

What we did during the inspection

This report was written following an unannounced inspection of the service on 28 May 2012 and a follow up visit on 13 June 2012. The inspection was carried out by Susan White, Care Inspectorate.

The manager of the care service sent us an annual return and a self assessment form. We talked to the manager, staff in the service and service users during the inspection.

We sent questionnaires to service users/relatives and received 14 responses which we took into account for this report.

We inspected a range of documents during the inspection including:

- certificate of registration
- public liability insurance
- written risk assessments
- a sample of six care and support plans
- complaints to the service
- audits and quality assurance systems
- information on the office noticeboard.

We talked to the manager and senior staff.

We reminded the manager about recent changes to legislation - The Public Services Reform (Scotland) Act 2010 and we discussed the need to update policies and procedures in light of these changes. We explained our Regulatory Support Assessment which is part of our preparation for the inspection visit.

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.firelawscotland.org

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 service provider. We were satisfied with the way the service provider had completed this and with the relevant information they had given us for each of the headings that we grade them under.

The service provider identified what they thought they did well, some areas for development and any changes they had planned. The service provider 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

We met with seven of the thirteen service users. Most people were unable to give verbal comment on their views of the service but were seen to rely on staff to give comment. Service users all seemed comfortable in staff presence and some of the relationships had been formed over several years.

One comment received was 'Overall, I am very happy with my support from this service.'

Taking carers' views into account

We received comments from eight relatives, on behalf of service users. Comments included:
'The staff I think are well trained and friendly.'

'My relative receives wonderful support which I and my family greatly appreciate. These are people like nursing staff are greatly underpaid for what they do. They are to be admired for their dedication.'

'My relative is severely incapacitated and cannot communicate, but staff can monitor his moods by observing him and his actions. Standard of care is excellent and seems happy and contented.'

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: 5 - Very Good

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 user group is well supported by family members. This is particularly helpful for service users who have some difficulty in making their views known. We sampled four care and support plans. These confirmed that support is agreed with service users and/or their representatives and the support needs are reviewed at least every six months. In questionnaires returned to us, relatives confirmed that they are involved in decision making.

We saw evidence of managers contacting families to update them on changes within Capability. For example, while the registered manager was on leave, letters were sent to relatives with contact details of the interim managers.

One comment from a relative was 'My relative is severely incapacitated and cannot communicate, but staff can monitor his moods by observing him and his actions. Standard of care is excellent and seems happy and contented.'

Areas for improvement

The service should continue to look at ways of gathering the views of service users to develop continued improvements to the service.

Grade awarded for this statement: 5 - Very Good

Number of requirements: 0

Number of recommendations: 0

Statement 3

We ensure that service user's health and wellbeing needs are met.

Service strengths

A sample of four care and support plans was inspected. Records confirmed that regular health checks are undertaken by GP service. Contact by physiotherapy, dentist, health screening, speech and language therapy occupational therapy and optician were seen in some of the files. This confirms that major aspects of health are monitored and actions taken when required for service users in question.

The service was helping service users have their capacity assessed so that the required protections could be put in place to enable staff to continue to meet their individual needs.

Areas for improvement

Training for staff teams in aspects of the Adults with Incapacity Act will help them to understand about who is in a legal position to make decisions. In particular legal decisions about care and finance must be made on behalf of a service user who appears to lack capacity.

The service complaints procedure explains that complaints can also be made to us. The documents should be updated for Care Inspectorate.

Grade awarded for this statement: 5 - Very Good

Number of requirements: 0

Number of recommendations: 0

Quality Theme 3: Quality of Staffing

Grade awarded for this theme: 2 - Weak

Statement 3

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

Service strengths

The service and staff teams have worked steadily to gain the qualifications to help them deliver very good care. The staff training plan has also been updated and plans are in hand to ensure that training is available to bring all staff up to date with their competence in all aspects of the care and support they deliver.

Comments made in questionnaires returned to the Care Inspectorate included: 'The staff I think are well trained and friendly'. 'Overall, I am very happy with my support from this service.'

Staff comments included: 'I feel service users get good support from the service as all of workers get good training and support from Capability to ensure best service and support.'

Areas for improvement

There was evidence that staff failed to use the procedures put in place to protect service users and individual staff. This is discussed further under Quality Theme 3, Statement 4.

Grade awarded for this statement: 4 - Good

Number of requirements: 0

Number of recommendations: 0

Statement 4

We ensure that everyone working in the service has an ethos of respect towards service users and each other.

Service strengths

The service has an excellent range of policies, procedures and training to support staff to deliver the aims and objectives of the service.

Observations made during the inspection showed that individual staff have very good and supportive relationships with service users. At some times, verbal communications are difficult. Staff were seen to give time for each service user to communicate in a method suitable for that service user.

Areas for improvement

The Care Inspectorate was notified of a major theft from a service user. Police and Capability managers investigated the incident. The financial loss was refunded by the provider. The investigation concluded that staff did not follow the procedures put in place to protect service users and staff. This lack of protection followed from a lack of care and is serious concern about respecting service users' property. It is recognised that Capability and the management team has responded very positively to the issue. Never the less, a serious lack of respect for the employer and the service user has had an impact on the quality assessment in this inspection.

Grade awarded for this statement: 2 - Weak

Number of requirements: 1

Number of recommendations: 0

Requirements

1. Capability has explicit procedures to protect service users and staff. Staff must follow the policies and procedures developed to ensure the safety and protection of service users and colleagues working in the service.

   This is to comply with Scottish Statutory Instrument No. 210, Regulation 4 (1)(b) A provider must make proper provision for the health, welfare and safety of service users.

   Timescale: within one month of publication of this report.

Quality Theme 4: Quality of Management and Leadership

Grade awarded for this theme: 2 - Weak

Statement 3

To encourage good quality care, we promote leadership values throughout the workforce.

Service strengths

At this inspection, the named manager had been on leave and other senior staff managed the inspection process. Training records confirmed that senior staff had accessed training to help them in their management role.

The temporary senior staff arrangements had steadied the service through recent challenging times.

Concerns about serious incidents have been dealt with skillfully.

Areas for improvement

The inspector was invited to meet a group of service users at their home. During the visit, it was observed that staff used one of the areas of the house as an office base. This means that staff meetings, supervision meetings and business on behalf of Capability was carried out in the service users home. This is a breach of one of the service's conditions of registration, and is reflected in the grade of this statement.

This was discussed with the manager of the service who agreed that meetings with service users and their representatives would explain the changes needed to continue to give very good care within the conditions of registration.

Grade awarded for this statement: 2 - Weak

Number of requirements: 1

Number of recommendations: 0

Requirements

1. Capability must site the office base outwith the service users' home.

   This is to comply with condition 5 on the Certificate of Registration ' Staff will not use a service user's home as an office base or as a venue for supervision/appraisal or other staff meetings.'

   Timescale: 3 months.

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

Capability Scotland have systems in place to monitor the quality of service provision. Managers have worked hard to ensure that staff training remains up to date so that the care and support delivered to a good standard. Managers have an active presence in the service. Staff and service users visit the office where the managers are based. This helps service users to feel comfortable in raising any concerns with staff or managers of the service.

Comments from relatives include:

'It is a large team with a number of relief staff so don't always meet everyone. But I do know the names of care staff'

'The staff I think are well trained and friendly.'

'My relative receives wonderful support which I and my family greatly appreciate. These are people like nursing staff are greatly underpaid for what they do. They are to be admired for their dedication.'

Areas for improvement

The service should continue to monitor that procedures are always followed in order that service users and staff are protected.

Grade awarded for this statement: 4 - Good

Number of requirements: 0

Number of recommendations: 0

4 Other information

Complaints

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

Enforcements

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

Additional Information

Not applicable.

Action Plan

Failure to submit an appropriate action plan within the required timescale, including any agreed extension, where requirements and recommendations have been made, will result in SCSWIS re-grading the Quality Statement within the Management and Leadership Theme as unsatisfactory (1). This will result in the Quality Theme for Management and Leadership being re-graded as Unsatisfactory (1).

5 Summary of grades

Quality of Care and Support - 5 - Very Good	
Statement 1	5 - Very Good
Statement 3	5 - Very Good
Quality of Staffing - 2 - Weak	
Statement 3	4 - Good
Statement 4	2 - Weak
Quality of Management and Leadership - 2 - Weak	
Statement 3	2 - Weak
Statement 4	4 - Good

6 Inspection and grading history

Date	Type	Gradings	
9 Jul 2010	Announced	Care and support Staffing Management and Leadership	5 - Very Good 5 - Very Good Not Assessed
24 Sep 2009	Announced	Care and support Staffing Management and Leadership	4 - Good 5 - Very Good 4 - Good
19 Feb 2009	Announced	Care and support Staffing Management and Leadership	4 - Good 4 - Good 4 - Good

All inspections and grades before 1 April 2011 are those reported by the former regulator of care services, the Care Commission.

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