

Care service inspection report

Strathcarron Project Housing Support Service

Housing Support Service

Howard Doris Centre

Millbrae

Lochcarron

Strathcarron

IV54 8YQ

Telephone: 01520 722541

Type of inspection: Unannounced

Inspection completed on: 4 July 2014



HAPPY TO TRANSLATE

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Service provided by:

Strathcarron Project Ltd

Service provider number:

SP2003003535

Care service number:

CS2003053345

If you wish to contact the Care Inspectorate about this inspection report, please call us on 0845 600 9527 or email us at enquiries@careinspectorate.com

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 Environment	6	Excellent
Quality of Staffing	6	Excellent
Quality of Management and Leadership	6	Excellent

What the service does well

The Strathcarron Project provides an excellent person centred service to the tenants and clients who attend the centre.

We saw excellent systems in place to encourage, support and ensure that tenants, clients, staff and external health and social care professionals could comment on and influence the service provided.

There is a stable management and care team in place and we observed positive team working with staff working collaboratively and supportively. Staff were always visible around the service and we saw that they were approachable, knowledgeable and involved.

Staff support people to maintain links with the local community. Activity provision both within and outwith the service are of a very high standard, with a strong emphasis on maintaining and enhancing skills and interests.

What the service could do better

The format used for the recording of the administration of medication was to be reviewed and guidance shared with staff to support a consistent approach in this practice.

What the service has done since the last inspection

A new personal profile form has been introduced which the clients who attend the centre are encouraged to complete themselves to identify what is important to them and their aims and objectives in attending the centre.

A generator has been installed to ensure that in the event of a power cut this does not adversely affect the tenants or clients.

Further development of the quality assurance systems has taken place and the manager has introduced the use of the 'Progress for Providers' assessment tool.

Conclusion

The Strathcarron Project continues to provide an excellent service which is highly valued by those who use it.

During the inspection we experienced a welcoming, caring and innovative service with dedicated and committed staff. Activities provided by the service are of a very high standard.

There are robust processes and procedures covering all aspects of the service provided to ensure high standards are met and maintained.

The service provided is person centred and staff are respectful towards all tenants and clients with each person being treated as an individual.

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

This service was previously registered with the Care Commission and transferred its registration to the Care Inspectorate on 1 April 2011.

Requirements and recommendations

If we are concerned about some aspect of a service, or think it could do more to improve, we may make a recommendation or requirement.

- A recommendation is a statement that sets out actions the care service provider should take to improve or develop the quality of the service, but where failure to do so will not directly result in enforcement. Recommendations are based on the National Care Standards, relevant codes of practice and recognised good practice.

- A requirement is a statement which sets out what is required of a care service to comply with the Public Services Reform (Scotland) Act 2010 and Regulations or Orders made under the Act or a condition of registration. Where there are breaches of Regulations, Orders or Conditions, a requirement must be made. Requirements are legally enforceable at the discretion of the Care Inspectorate.

The Strathcarron Project is registered to provide Housing Support, Care at Home and Support Services to adults and older people. Housing Support and Care at Home services are provided to the tenants living within specified sheltered housing accommodation. The Support Service provides day care for up to forty adults and/or older people living within the areas of Lochcarron, Applecross, Shieldaig and Torridon.

All of the services are managed from the Howard Doris Centre in Lochcarron. All of the clients are supported by the centre manager and identified named nurses and key workers.

The aims and objectives of the service include the following:

'Our primary aim is to improve the quality of life and maintain independence for the predominantly older members of our community who require support in their daily living.'

'To provide a service that will enable those who so desire to remain in the community.'

'To respect and promoted the social and cultural background of the service user.'

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 Environment - Grade 6 - Excellent

Quality of Staffing - Grade 6 - Excellent

Quality of Management and Leadership - Grade 6 - Excellent

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 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 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

At this inspection we looked at quality statements which covered all four of the Quality Themes.

This was an unannounced inspection which took place on 2nd and 3rd July with feedback provided to the manager at the end of the inspection.

During the inspection we spent time with tenants and clients whom we also joined for lunch.

We observed staff practice throughout the inspection. We observed and participated in activities.

In addition we looked at:

- Care and Support Plans and Profiles including reviews.
- Risk Assessments
- Minutes of Meetings
- Staff training and supervision records
- Procedures for administration and management of medication
- Staffing rotas
- Activity records
- Photographs
- Information brochures and newsletters

We spoke with staff on duty and the manager.

We reviewed the environment and any equipment used within the service.

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

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

No recommendations were made at the last inspection.

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 manager completed a self-assessment which gave detailed, informative and accurate information on the considered strengths of the service. She also gave details as to any areas for improvement and timescales within which these would be achieved.

Taking the views of people using the care service into account

All of the tenants and clients we spoke with were very positive about their experiences at the Strathcarron Project. Comments included:

'We are truly lucky to have a centre such as this in the community.'

'Everything is excellent.'

'This has been a life-saver for me.'

'I always look forward to coming.'

'we have laughs and fun.'

'I enjoy the companionship.'

'You cannot fault the place.'

'The food is excellent.'

'The staff are fantastic.'

Taking carers' views into account

We spoke with a number of tenants and clients. We did not speak with family members at this inspection.

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

We found that the Strathcarron Project continues to perform at an excellent standard for its participation practice. We decided this after we spoke with people who use the service, management and staff and looked at various records including minutes of meetings and other related documentation.

We found that the service had effective systems in place to obtain the views, ideas, suggestions and preferences of people who use the service, their carers, relatives and friends in relation to all aspects of the service provided. There was very good evidence that the service positively responded to feedback, advice and suggestions received.

There is a participation strategy in place which outlines how the service is to engage with people, and the methods they will use to seek the views of interested stakeholders on all aspects of the service provided.

For anyone looking to use either the Housing Support or Day Centre services an information pack is available. This provides details on how the services are organised and managed, the staff team, catering arrangements, planned activities and outings for the current month. It described the level of service they should expect to receive and there was an emphasis on the well-being of the people who use the service and recognition of individual needs and preferences. It also contains information about wider community services and the Care Inspectorate including the booklet 'Making Every Moment Count'. This guide highlights how making the most of every moment can make a real difference to a person's quality of life in simple but very meaningful ways.

The entrance and reception area of the Howard Doris Centre from which the service operates were both welcoming and informative. A range of information is available for anyone visiting the centre, photos showing activities enjoyed and a large display board detailing all of the planned activities for the current month.

We could see that the manager was available to speak with people who use the service, their relatives and the staff team throughout the day. Everyone we spoke with during the inspection confirmed that they felt able to speak with the manager and staff team about any issues and were confident that they would be addressed quickly, thoroughly and appropriately.

Everyone using the service had a personal care profile or plan in place. A profile sheet giving pertinent information including contact details, interests and hobbies, what is important to them and how the service can support them is completed by the clients themselves. A review is held quarterly and the plans are updated to reflect any changes to support needs or individual wishes.

The service continues to hold its 'Three Degree' meetings. Every three months different clients are chosen to act as the attending representative to these meetings which are held monthly. A representative of the Board of Directors for the service also attends the meetings. We could see from minutes of the meetings that they discuss any aspect of the service and updates and feedback are provided for issues and areas discussed at previous meetings. The representative from the Board will take ideas and suggestions back to Board meetings for further discussion as required. Minutes of the meetings are displayed on notice boards.

Staff have worked on developing even more activity opportunities for both day centre attendees and tenants. We viewed evidence which confirmed that people who use the services are consulted and encouraged to participate in planning activities and events within the Centre and this was further confirmed by people we spoke with during the inspection. There was also confirmation from both attendees and in documentation that individual's capabilities and interests were discussed and taken into account.

Following the last inspection of the service the tenants and attendees were provided with feedback as to the outcome of this and the report was shared. A copy of the report is kept within the lounge area. As part of the inspection process all services complete a self-assessment which identifies strengths of the service along with any planned areas for development and improvement. People who use the service contribute to this assessment through the Three Degree meetings.

Questionnaires are used to obtain feedback and suggestions are encouraged from the people who attend the Centre, the tenants and their families. Questionnaires used cover all aspects of the service provided and the manager has also developed specific questionnaires which focus on a particular topic or client group. The completed questionnaires are evaluated by the manager and the outcome of them shared and

displayed within the service.

Since the last inspection a working group of people who attend have been meeting to develop a newsletter for the centre, the first edition of which was printed in May. We saw that this contained a number of interesting articles, profiles of staff and attendees and lots of input from the people who attend the centre.

The day care co-ordinator continues to produce a monthly article for the local magazine 'An Carrannach'. This provides information for the local community as to what has been happening at the centre and also the current month's activities and events to keep the local community informed.

A suggestion box is available for people to use, which they do and changes to the service which have resulted from suggestions made in this way have included proposals to extend the alarm call system within individual toilets and installing protective snow boards above the entrance to the centre.

Other changes that have been made to the service as a result of the participation carried out include;

- * Planned replacement of garden furniture
- * Additional outings
- * Additional activities within the centre
- * Visiting guest speakers and obtaining microphone for their use
- * Ideas for themed events
- * Staging a play within the centre
- * Meal suggestions

The service has recently held an evening supper to which the families of the tenants were invited. The tenants were consulted as to what they would like served and those spoken with confirmed that it was an enjoyable evening.

We could see that the clients, their views, ideas and suggestions were central to service provision and that they are encouraged and supported to be involved in all aspects of the centre. People we spoke with confirmed this and felt that they were listened to their wishes acted upon. The manager and staff team are pro-active in promoting choice and they keep the people who attend up to date with progress made towards meeting ideas and suggestions.

Areas for improvement

We could see that the manager has further developed the participation strategy and is committed to ensuring that everyone who uses the services is able to participate in all aspects of service provision.

Grade awarded for this statement: 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

The manager and staff team at the Strathcarron Project have maintained the excellent standards in ensuring the health and wellbeing needs of the clients and tenants are met.

To assess this statement, we reviewed how care and support is provided, looked at care and support plans, activity provision and spoke with tenants, clients and the staff team. From the evidence we saw we considered that the service was performing to a high level in the areas covered by this statement which led to excellent outcomes for all who used the services provided.

We looked at three care and support plans for the tenants, one care and support plan for a respite client and four care profiles for people who attended the day care service.

Within individual care and support plans, it was clear that the tenants were actively involved in the development and review of each plan. Within the files we sampled, we could see documentation to confirm that all aspects of the tenants' health and wellbeing needs had been considered and discussed and planned for.

The profile sheets for day care clients had, wherever possible, been completed by the clients themselves. These profile sheets have been introduced since the last inspection to replace the previous ones. They identify the person's main reasons for attendance and clients themselves confirmed that their main reasons for attending was to support them to maintain their independence, to socialise and enjoy the company of others. The profiles are evaluated each month and this identifies what the individual clients have particularly enjoyed.

In speaking with both tenants and clients we considered that the care and support plans and profiles provided an accurate picture of each person who was using the service, their capabilities, strengths and personal preferences. There was an emphasis on promoting and maintaining independence by supporting people to maximise their abilities and strengths.

Within the records we looked at we could see that both tenants and clients were supported where necessary to access external health and other professionals such as doctors, occupational therapist, community nurses and social workers. In addition the staff meet with the doctors, community psychiatric nurse, care manager and

community nurses which enables a consistent approach in the care and support for everyone who uses the service. This was confirmed by an external professional who considered that communication between staff and other professionals was very good and effective. We concluded that the service worked in a very personal, caring and collaborative way with a variety of different professionals.

The service promotes a risk enabling policy and procedure. Potential risks to both tenants and clients are identified and assessed and staff support individual service users to maintain independence as far as possible.

At the last inspection we considered that both tenants and day care clients benefitted from a wide range of activities. At this inspection we could see that the number and range of different activities had been further expanded.

A number of themed events have been provided over the past twelve months. These have included a Robert Burns lunch, Chinese New Year, Easter, St Andrews Day, Guy Fawkes, Harvest Festival, Ascot Lady's Day and World Cup celebrations. Menus are developed to reflect the event. For example they recently had a visiting opera company who performed Madame Butterfly and the meal served had a Japanese theme. The dining room and other areas are decorated to match the theme, there are table place settings provided with quizzes or topics for discussion. Music is usually provided by visiting musicians and again is linked to the theme of the event. Everyone we spoke with confirmed that they always enjoy the themed days and confirmed that staff work very hard to transform the centre to reflect the theme.

The physical activity programme 'Fit as a Fiddle' has been reviewed and developed further. There are regular exercise classes. We were able to observe one of these and it was evident that participants enjoyed it very much, with lots of participation, humour and laughter.

Sample sessions have been provided for yoga and tai chi and these are to be included within the activity programme.

One of the clients in particular is very active within the garden and she gave us a tour of the garden with all of the fruit and vegetables that she tends to. A number of other residents also get involved in the garden.

The service has good links with the local school. A discussion group 'Points of View' has been started. A number of pupils from the High School visit and a current news story is chosen from the television or newspaper and this is discussed.

Other activities were seen to include poetry, book club, singing, word games, table top games, bridge, cross stitch and tapestry, quilting and patchwork, 'knit and knatter' and quizzes. On the day of inspection a local artist was visiting and leading an art class. There is a regular IT computer class and clients and tenants are able to chat

with family and friends outwith the area through Skype.

There is also a play reading group and this year they put together a production and performed a play for clients and the staff team.

Other people visit to give talks on various subjects. We could see that in the forthcoming month there were to be talks on the wildlife of Costa Rica and an illustrated talk on Midges.

The staff were seen to make every effort to support the tenants and clients to their links with their local communities. Visits and trips out are arranged and these included shopping trips.

We found that both formal and informal communication within the staff team was very good. Tenants, clients and staff all confirmed that they considered communication was very good and effective and that there were regular discussions and conversations, as well as formal handovers and meetings.

Tenants and clients told us that the meals and food were very good.

We saw varied menus, which were developed with the tenants and clients and took into consideration individual preferences and health requirements.

The cooks and kitchen staff demonstrated a very good awareness of the tenants' and clients' dietary requirements and personal preferences and that they consulted with the people who use the service as to the meals served.

We were able to join the tenants and clients for lunch. The dining room is light and bright and provides an attractive area for dining. The tables were all well presented with fresh flowers, napkins, menus and condiments.

The meals were presented very well, staff were able to assist if required. The meal was a sociable occasion with conversation, lots of humour and a very pleasant atmosphere and we considered that residents had a very good dining experience.

All tenants and clients that we spoke with spoke highly of the staff team and considered them to be excellent. We considered that the staff team were dedicated and committed to providing the best level of care and support they could. They were knowledgeable and we could see that they had caring, supportive and positive relationships with tenants and clients.

Areas for improvement

We discussed with the manager the way in which the administration of medication was recorded as there was an inconsistent approach to this. The form used for this

purpose is to be reviewed and the completion guidance shared with staff to address this.

Grade awarded for this statement: 6 – Excellent

Number of requirements: 0

Number of recommendations: 0

Quality Theme 2: Quality of Environment

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 environment within the service.

Service strengths

Please refer to Quality Statement 1.1 which identifies the strengths in the use of participation for this service.

Areas for improvement

Please refer to Quality Statement 1.1 which identifies any areas for improvement in the use of participation for this service.

Grade awarded for this statement: 6 – Excellent

Number of requirements: 0

Number of recommendations: 0

Statement 2

We make sure that the environment is safe and service users are protected.

Service strengths

We found that the Strathcarron Project had continued to perform at an excellent level in the areas covered by this Quality Statement. We concluded this after we viewed the premises, looked at maintenance and repair records and spoke with clients and tenants.

The environment is clean, light and welcoming. There is a large reception area with staff available to meet all visitors who are requested to sign into the building. The

manager's office is situated off the main reception area.

We found that there was a very good standard of cleanliness evident throughout the premises both within communal and individual rooms. Domestic staff are employed and follow agreed cleaning schedules. We spoke with domestic staff who demonstrated a good understanding of their role and the importance of infection control.

There is a range of communal areas and space so that people can choose where they wish to spend their time and different activities can be held throughout the communal lounge and dining spaces.

Tenants have their own garden areas and all tenants and clients have access to very well maintained garden areas with views over the loch. Clients are able to be very involved in the garden both in its maintenance and the growing of plants, flowers and vegetables.

The garden areas and outside environment were well maintained with level access. The external handrail has been extended all around the building to provide safe accessibility.

We also saw that there were effective maintenance procedures in place which ensure that the buildings and equipment used were maintained appropriately. We were advised that any repairs or maintenance issues were quickly carried out by the owners of the building, which meant that tenants, clients and staff were not inconvenienced or their safety compromised.

The service employs two handypersons who monitor and carry out minor repairs and maintenance and who have completed health and safety training. Both demonstrated a good understanding of their role within the service.

There was evidence to confirm that regular checks were made by outside agencies, such as environmental health and fire services and the manager confirmed that if any action was required this would be carried out.

We saw suitable risk assessments in place in both for individual tenants and clients and for the general environment. This identified any potential risk and the action required to minimise this. The service operates within a risk enabling approach. Staff support tenants and clients to maintain their independence for as long as possible.

Environmental audits are carried out. We saw that these covered aspects such as general cleanliness, furniture and health and safety. Tenants and clients were consulted as part of this audit which is carried out on a quarterly basis with action taken on any matters arising from it.

A further Health and Safety audit is also carried out quarterly which reviews all aspects of the building internally and externally, the garden, use of the bus, risk assessments and fire safety and again action is taken on any issues identified.

Since the last inspection a generator has been installed for the service to ensure that in the event of power cuts this does not impact on the tenants and clients who attend. In addition the fire within the small lounge has been replaced.

There were systems in place for the reporting of any accidents and incidents that occur within the service. We could see from the records that these were at a minimum. However, when they had occurred these were fully reviewed with risk assessments and guidance for staff put into place. Observations during the inspection showed that staff followed this guidance to support tenants and clients appropriately.

All of the above are supported by a range of policies and procedures which are available to staff. Staff were observed to follow best practice in relation to moving and handling and infection control throughout the inspection.

Areas for improvement

The manager was to ensure that all bins within both communal and individual toilets and bathrooms were foot operated.

Grade awarded for this statement: 6 - Excellent

Number of requirements: 0

Number of recommendations: 0

Quality Theme 3: Quality of Staffing

Grade awarded for this theme: 6 – Excellent

Statement 1

We ensure that service users and carers participate in assessing and improving the quality of staffing in the service.

Service strengths

Please refer to Quality Statement 1.1 which identifies the strengths in the use of participation for this service.

Areas for improvement

Please refer to Quality Statement 1.1 which identifies any areas for improvement in the use of participation for this service.

Grade awarded for this statement: 6 – Excellent

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

In assessing this quality statement we looked at staff training and supervision records, observed staff practice and interaction with tenants and clients, and spoke with tenants, clients and the staff team. We concluded that the service continues to operate at an excellent level for this quality statement.

All tenants and clients spoke very highly of the staff team. Tenants considered that they received all of the care and support they required in an effective and appropriate way. They spoke of the kindness of staff. Clients also considered that the staff were excellent and that they got on well with them all and that activities were provided in a fun and enjoyable way.

There are three staff employed within the service who provide and promote activity

provision. Tenants are supported by nursing and care staff. A social worker is based within the centre, who also provides support and guidance.

We saw that supervision and appraisal systems are in place. This provides a regular forum for staff to discuss all aspects of their role within the home, practice issues and training needs with all staff. Staff meetings were also held, and again this provided staff with regular opportunities to raise issues and put forward their own ideas and suggestions.

There was a training plan in place for the year. Through discussion and records seen we saw staff were encouraged and supported to attend regular and relevant training for all staff. We saw from the training plan that both mandatory and other training was provided. So far this year staff had received training in moving and handling, falls prevention and fire safety. Further training is planned for communications and exercise activities.

There is a commitment to providing care staff with opportunities to achieve a Scottish Vocational Qualification (SVQ). Currently five members of the staff team have a SVQ Level 3 and five others are working towards achieving Level 2.

All new staff complete induction training. This involves a four week programme and we saw that this included a general introduction to the service, the promotion of choice, rights and independence and the standards of care expected within the service. It was clear that the induction training follows the values of the service and places the tenants and clients at the forefront of this.

We saw staff consulting with each other. They also have very good working relationships with external health and social care professionals who can also provide additional guidance and support to the staff team.

There is a stable staff team in place with a low turnover of staff. We spoke a range of staff and they demonstrated a very good awareness and understanding of their roles within the service. They appeared very happy in their posts and considered that they received appropriate training to carry out their duties competently.

Areas for improvement

The service should continue to provide training, support and guidance to ensure the service continues to meet the needs of the clients and tenants.

Grade awarded for this statement: 6 - Excellent

Number of requirements: 0

Number of recommendations: 0

Quality Theme 4: Quality of Management and Leadership

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 management and leadership of the service.

Service strengths

Please refer to Quality Statement 1.1 which identifies the strengths in the use of participation for this service.

Areas for improvement

Please refer to Quality Statement 1.1 which identifies any areas for improvement in the use of participation for this service.

Grade awarded for this statement: 6 – Excellent

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 service had maintained its excellent standards in relation to quality assurance.

There are clearly stated aims and objectives for the service which promote quality of life and maintaining independence for those who attend.

We have already identified a number of ways in which the service monitors quality under the quality statements 1.1, 2.2 and 3.3. These include:

- * Regular care and support reviews with clients and tenants
- * On-going consultation with tenants and clients both formally and informally
- * A range of audits
- * Staff supervision, training and meetings

* Close and effective working relationships with external health and social care professionals

The Strathcarron Project is overseen by a voluntary Board of Directors and a management committee who play an identified and active role within the service. The Board and committee meet regularly and a representative from the Board meets with clients through the 'Three Degree' Meetings.

An annual business plan is produced and kept under review by the Board of Directors. This sets out the aims and objectives of the service and how these are to be achieved. The policies and procedures for the service are agreed with the Board and are kept under review and updated as required.

In addition to the audits already identified the manager completes a training and development audit which covers induction training, staff training, supervision and appraisal systems. This is to ensure that staff are receiving the training, support and guidance they need to support effective working practice and maintain standards.

A care and support audit is also completed to ensure that all records are accurate and up to date and that tenants and clients are happy with what is provided for them.

As a registered charity, the service completes and submits an annual return to the Office for Scottish Charity Regulator (OSCR) providing information on the services provided. The manager advised that the service has adopted the OSCR best practice guidance which informs and influences service provision. Contract monitoring visits are also undertaken by the commissioners of the service.

The service does have a formal complaints procedure which is shared with the tenants, clients and their relatives. The manager confirmed that no complaints have been received since the last inspection.

The manager was seen to be very involved in all aspects of the service provided and had a current and extensive knowledge of each area within the service.

We concluded that the service had excellent quality assurance system coverings all aspects of service provision which have resulted in the maintenance and further development of the excellent service provided.

Areas for improvement

The service should continue to work in this organised and inclusive way and continue to regularly seek the views and suggestions from all interested stakeholders and clients of the Strathcarron Project.

One of the ways the manager has identified to do this is the introduction of a new audit system 'Progress for Providers' which are a range of simple self-assessments

which enable providers and managers to deliver more personalised services. At the time of the inspection the manager had completed the majority of the assessment and was beginning to identify actions she could take to enhance the service's already person centred approach.

Grade awarded for this statement: 6 - Excellent

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

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 the Care Inspectorate re-grading a Quality Statement within the Quality of Management and Leadership Theme (or for childminders, Quality of Staffing Theme) as unsatisfactory (1). This will result in the Quality Theme being re-graded as unsatisfactory (1).

5 Summary of grades

Quality of Care and Support - 6 - Excellent	
Statement 1	6 - Excellent
Statement 3	6 - Excellent
Quality of Environment - 6 - Excellent	
Statement 1	6 - Excellent
Statement 2	6 - Excellent
Quality of Staffing - 6 - Excellent	
Statement 1	6 - Excellent
Statement 3	6 - Excellent
Quality of Management and Leadership - 6 - Excellent	
Statement 1	6 - Excellent
Statement 4	6 - Excellent

6 Inspection and grading history

Date	Type	Gradings
8 Jul 2013	Unannounced	Care and support 6 - Excellent Environment 6 - Excellent Staffing 6 - Excellent Management and Leadership 6 - Excellent
15 Aug 2012	Unannounced	Care and support 6 - Excellent Environment Not Assessed Staffing 6 - Excellent Management and Leadership 5 - Very Good
13 Jul 2010	Announced	Care and support 6 - Excellent Environment Not Assessed Staffing 6 - Excellent Management and Leadership Not Assessed

Inspection report continued

13 Oct 2009	Announced	<div>Care and support 6 - Excellent</div> <div>Environment Not Assessed</div> <div>Staffing 5 - Very Good</div> <div>Management and Leadership Not Assessed</div>
6 Nov 2008	Announced	<div>Care and support 5 - Very Good</div> <div>Environment Not Assessed</div> <div>Staffing 4 - Good</div> <div>Management and Leadership 5 - Very Good</div>

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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ہے بایں تسد یم ونابز رگی د روا ولکش رگی د رپ شرازگ تعاشا ہی

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