

Care service inspection report

Follow-up inspection

Sense Scotland - West Housing Support Service

43 Middlesex Street
Kinning Park
Glasgow

Service provided by: Sense Scotland

Service provider number: SP2003000181

Care service number: CS2004061986

Inspection Visit Type: Unannounced

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Contact Us

Care Inspectorate
Compass House
11 Riverside Drive
Dundee
DD1 4NY

enquiries@careinspectorate.com

0345 600 9527

www.careinspectorate.com

 [@careinspect](https://twitter.com/careinspect)

1 About the service we inspected

Sense Scotland - West provides an integrated housing support and care at home service to adults with sensory impairment and other disabilities. The service is provided to people in their own homes and it currently covers the Pollok, Craigton and Strathbungo areas of Glasgow. Support offered to service users varies according to assessed need. Most service users receive 24 hour support.

The Care Inspectorate regulates care services in Scotland. Prior to 1 April 2011, this function was carried out by the Care Commission. Information in relation to all care services is available on our website at www.scswis.com.

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

2 How we inspected this service

We compiled the report following an unannounced visit on 25 January 2016 by one inspector. We fed back to managers during the course of the inspection.

During the inspection we visited three service sites in the Craigton and Pollok areas of the city. We met and spoke with four people who used the service and spoke with a family carer by phone.

We also spoke with two managers, two locality managers and three staff.

We sampled some documents including:

- Staffing rotas
- Minutes of team meetings
- Supervision records
- Personal plan information including review paperwork
- Year planners for reviews and meetings
- Training records and training plans
- Induction resource pack
- Keygroup meeting records
- Adults with Incapacity (Part 5) Certificates

3 Taking the views of people using the service into account

We met four people who were receiving the service. They were not able to communicate verbally with us, but we noted that they appeared content with the support they received from staff and that they were relaxed and comfortable in staffs' company.

4 Taking carers' views into account

We spoke with a family carer by phone. We noted that she was very pleased with the service and particularly with a resolution to the problem of staff shortages which she had highlighted as a problem at the last inspection. She confirmed to us that current staffing levels had improved her family member's quality of life, for instance, it had meant that outings and other activities took place more often.

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

Previous requirements

1. The provider must having regard to the size and nature of the care service, the statement of aims and objectives and the number and needs of service users ensure that at all times suitably qualified and competent persons are working in the care service in such numbers as are appropriate to the health, welfare and safety of service users. This is to comply with:

The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/210), Regulation 4(1)(a)Welfare and Safety of service usersand 15(a) Staffing

This requirement was made on 14 July 2015

We spoke with managers, sampled staffing rotas and spoke with a family carer by phone.

From this evidence we could see that appropriate staffing levels and cover arrangements were being maintained since the last inspection. The family carer highlighted to us that this meant that service users were achieving positive outcomes as agreed in their support plans. Managers also gave us reassurances that, going forward, agreement had been reached with the providers' Human Resources Department for staff recruitment to take into consideration staff cover and training requirements to reduce the risk of future staff shortages. The service now needed to show sustained improvement with regards to staffing levels and cover arrangements.

This requirement was now met.

Met - Within Timescales

2. The provider must ensure that staff receive training/refresher training appropriate to the work they perform without undue delay, including appropriate and timely induction training for new staff.

This is in order to comply with: The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations, Scottish Statutory Instruments: SSI 2011/210 regulation 15(b) - requirement about staffing.

This requirement was made on 14 July 2015

We could see from training records, training plans and other information that the provider was making a lot of effort to address this requirement to ensure that staff were appropriately trained.

For instance, we found a more systematic approach to providing face to face learning, online E-Learning and use of training workbooks. A number of training events had taken place and robust plans were well in hand to ensure all staff had undertaken essential training by the end of February 2016. Gaps in staff induction training were being addressed and this training now took place timeously for new staff. The provider's plan was for the forthcoming training events in February 2016 to establish a baseline for going forward and managers assured us that the provider was committed to sustaining the improvements made in this area.

This requirement was met.

Met – Outwith Timescales

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

Previous recommendations

1. Managers should ensure that all service users have a six monthly review of their support and that the review discussions and agreement is always clearly evidenced in personal plan records.

National Care Standards (NCS) 4 Care at Home – Management and staffing and NCS 11 – Expressing Your Views

This recommendation was made on 14 July 2015

We spoke with managers, looked at annual planners tracking reviews and sampled some review minutes.

We noted that reviews were taking place at least six monthly for many of the supported individuals, but a small number of reviews were falling outwith this timescale. We noted from speaking with the manager and the review planner that the aim was to address this shortcoming in the year ahead and ensure review meetings met the statutory duty of six monthly intervals or less.

This recommendation was not fully met at the point of this inspection and will continue. We will monitor progress at the next inspection.

2. Support plan paperwork, including care plans, review minutes and risk assessments should be signed off by the service user or their representative to show agreement and involvement and service user keyworker meetings should take place on a regular basis across all of the service sites.

NCS 11 - Expressing Your Views

This recommendation was made on 14 July 2015

From discussion with managers and sampling records we found that support plan paperwork was not yet being signed off to show agreement and involvement by the service user or their representative.

Managers outlined plans being developed to address this going forward. For instance, we understood that discussions were happening with the Joint Improvement Team and the Partners in Communication service to look at meaningful ways to involve service users in their support plans. Keyworker meetings were happening and the annual planner for 2016 indicated the intention to ensure these took place on a regular basis during the year.

This recommendation was not fully met at the point of this inspection and will continue. We will monitor progress at the next inspection.

3. Managers should implement local audits of care plans and medication management so that staff maintain standards of practice and issues can be quickly identified and dealt with.

NCS 4 Care at Home - Management and Staffing

This recommendation was made on 14 July 2015

From speaking with managers we concluded that this recommendation was not met and will continue. We will monitor progress at the next inspection.

4. Adults with Incapacity (Part 5) Certificates and accompanying treatment plans should be put in place for those service users who require them.

NCS 4 Care at Home - Management and Staffing and NCS 7 Care at Home - Keeping Well - Healthcare

This recommendation was made on 14 July 2015

We noted that Adults with Incapacity (Part 5) Certificates were now in place.

Managers reported difficulties with obtaining accompanying treatment plans from GPs and we understood arrangements had been made to meet with the Community Learning Disability Team nurse to take this matter forward. We viewed one certificate which had expired and this needed attention.

This recommendation was not fully met at the point of this inspection and will continue. We will monitor progress at the next inspection.

5. Meaningful ways should be found to involve service users and/or their representatives in the supervision and appraisal of staff and managers.

NCS 11 Care at Home - Expressing Your Views

This recommendation was made on 14 July 2015

This recommendation remained unmet. We discussed this further with the manager who may find the following good practice material helpful in addressing this recommendation:

SCIE, Effective Supervision in a Variety of Settings: People who Use Services and Supervision: Impact, Outcomes and Involvement. Available at, <http://www.scie.org.uk/publications/guides/guide50/peoplehouseservices/index.asp>

SCIE. (2013). Service User and Carer Involvement in the Supervision of Health and Social Care Workers: Seminar Report. Available at, <http://www.scie.org.uk/publications/guides/guide50/files/supervisionseminarreport.pdf>

SCIE, (2013). Practice Enquiry into Supervision in a Variety of Adult Care Settings where there are Health and Social Care Practitioners Working Together. Available at, <http://www.scie.org.uk/publications/guides/guide50/files/supervisionpracticeenquiry.pdf>

This recommendation was not met at the point of this inspection and will continue. We will monitor progress at the next inspection.

6. A formal system of observational monitoring should be introduced and this should provide the opportunity to include the verbal and nonverbal views of service users and/or their representative.

NCS 4 Care at Home - Management and Staffing and NCS 11 Care at Home - Expressing Your Views

This recommendation was made on 14 July 2015

This recommendation was not met. We discussed this further with the manager who may find the following good practice material helpful in addressing this recommendation:

Mansell, J. (2012). Structured Observational Research in Services for People with Learning Disabilities. Available at, [http://eprints.lse.ac.uk/43159/1/SSCR_Methods_review_10_\(Isero\).pdf](http://eprints.lse.ac.uk/43159/1/SSCR_Methods_review_10_(Isero).pdf)

This recommendation was not met at the point of this inspection and will continue. We will monitor progress at the next inspection.

7. The manager should adhere to guidance on notifications that the service are required to make to the Care Inspectorate and all notifications should then be made as appropriate.

NCS 4 Care at Home - Management and Staffing

This recommendation was made on 14 July 2015

We have been receiving notifications as appropriate since the last inspection. The manager should pay closer attention to timescales for submission given the lateness of the last one we received.

This recommendation is now met.

8. Managers should promote staff awareness of the Scottish Government's "Keys to Life" strategy for people with a learning disability and the Winterbourne View report across all the sites, and provide staff with access to websites which provide online resources to support staff's learning and development and their day to day work.

NCS 4 Care at Home - Management and Staffing

This recommendation was made on 14 July 2015

We saw evidence to indicate that managers were promoting the Keys to Life document and the Winterbourne View report. For instance, a new workbook had been devised and team meetings showed discussion on these topics. Managers recognised that this was a work in progress.

Staff access to websites, which include online resources to support their learning and development and day to day work, was proving more difficult to address. Managers could overcome this by bringing the learning material from these websites to staff supervision, team meetings and other forums to encourage, discussion, learning and development.

This recommendation was not fully met at the point of this inspection and will continue. We will monitor progress at the next inspection.

9. Regular team meetings should take place at all service sites and managers should ensure that staff are encouraged to attend these meetings.

NCS 4 Care at Home – Management and Staffing

This recommendation was made on 14 July 2015

We noted that the frequency and attendance at team meetings had continued to be an issue since the last inspection. However, we were shown the 2016 annual planner which showed that managers had reviewed the service's approach to holding meetings with a view to encouraging attendance and for regular meetings to take place.

This recommendation was not fully met at the point of this inspection and will continue. We will monitor progress at the next inspection.

10. Staff should receive regular formal supervision and appraisal.

NCS 4 Care at Home – Management and Staffing

This recommendation was made on 14 July 2015

This recommendation remained a work in progress as managers acknowledged that it was not yet fully met. We will monitor progress at the next inspection.

11. The manager should consider the use of methods which include external stakeholders in the process of quality assurance.

NCS 4 – Care at Home – Management and Staffing

This recommendation was made on 14 July 2015

Managers were unable to show us evidence that this recommendation had been met. It will continue and we will review progress at the next inspection.

7 Complaints

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

8 Enforcements

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

9 Additional Information

There is no additional information.

10 Inspection and grading history

Date	Type	Gradings
14 Jul 2015	Unannounced	<div>Care and support</div> <div>3 - Adequate</div> <div>Environment</div> <div>Not Assessed</div> <div>Staffing</div> <div>3 - Adequate</div> <div>Management and Leadership</div> <div>4 - Good</div>
7 Jul 2014	Unannounced	<div>Care and support</div> <div>4 - Good</div> <div>Environment</div> <div>Not Assessed</div> <div>Staffing</div> <div>4 - Good</div> <div>Management and Leadership</div> <div>4 - Good</div>
28 Jun 2013	Announced (Short Notice)	<div>Care and support</div> <div>4 - Good</div> <div>Environment</div> <div>Not Assessed</div> <div>Staffing</div> <div>4 - Good</div>

		Management and Leadership	3 - Adequate
27 Sep 2012	Announced (Short Notice)	Care and support Environment Staffing Management and Leadership	2 - Weak Not Assessed 2 - Weak 2 - Weak
27 Jun 2011	Unannounced	Care and support Environment Staffing Management and Leadership	5 - Very Good Not Assessed 5 - Very Good 4 - Good
8 Oct 2010	Announced	Care and support Environment Staffing Management and Leadership	5 - Very Good Not Assessed Not Assessed 5 - Very Good
21 Jul 2009	Announced	Care and support Environment Staffing Management and Leadership	4 - Good Not Assessed 4 - Good 4 - Good
12 May 2008	Announced	Care and support Environment Staffing Management and Leadership	4 - Good Not Assessed 4 - Good 4 - Good

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Contact Us

Care Inspectorate
Compass House
11 Riverside Drive
Dundee
DD1 4NY

enquiries@careinspectorate.com

0345 600 9527

www.careinspectorate.com

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