

Care service inspection report

Full inspection

Fair Deal Housing Support Service

355a Tormusk Road
Castlemilk
Glasgow

Service provided by: Fair Deal

Service provider number: SP2004006487

Care service number: CS2004071123

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	5	Very Good
Quality of staffing	5	Very Good
Quality of management and leadership		N/A

What the service does well

When we visited Fair Deal (the service) we found that staff and management were motivated, experienced, friendly and committed to delivering a high standard of care.

We thought that staff worked well as a team, displaying a positive attitude and working to support clients get the most benefit from the service. Examples of this can be found when clients are: supported to make choices, set up a business, be independent, live in their own home and be involved in the community and community groups such as: Gal Gael, Castlemilk Community Spaces, Fernhill Community Centre, a community garden and accessible leisure activities.

Clients told us that staff were reliable, consistent and quick to act on their comments.

What the service could do better

The service has identified areas for development which include using the self assessment to highlight positive outcomes for clients.

What the service has done since the last inspection

The service had received money from Action Earth to build raised flower beds at Kennyhill allotments.

We were told that the service had scored highly on the Local Authority Framework agreement and that this had resulted in increased referrals.

A new management duty system had been introduced.

The service continues to expand its services to people who previously attended Local Authority day centres and support young people through the move from children's to adult services.

Conclusion

We thought that everyone we spoke with during the inspection was very committed to making sure that the service meets client's expectations and needs.

When speaking with staff and observing their practice it was evident that they work to make client's support enjoyable and meaningful.

We thought that clients were very confident about exercising choice, and that they were provided with individualised care and support.

1 About the service we inspected

From the 1 April 2016 the way in which we carry out an inspection has changed. We choose which quality themes and statements are inspected for better performing services, to be more proportionate and targeted in our work. In highly performing services, inspections will consider Quality Theme 1: Quality of Care and support, Quality Theme 1, Statement 3 "We ensure that service user's health and well-being needs are met" will be considered during all inspections.

Fair Deal is a combined Housing Support/Care at Home service that supports clients with a range of support needs.

There are two distinct parts to the service. The "core support" team provide assistance with household tasks, medication and shopping while the "community connections" team help people socialise, set up a gardening group, access further education, volunteer and build friendships in their local area.

Fair Deal's Social & Leisure group supports clients to take part in a range of activities, such as a News & Media group, Day Trips, "Blether" drop in café, Sunday Lunch Club and Art. To make sure that clients are not isolated, groups are open to anyone in the community who wishes to join.

The Care Inspectorate regulates care services in Scotland. Information about all care services is available on our website at www.careinspectorate.com.

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

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 5 - Very Good

Quality of staffing - Grade 5 - Very Good

Quality of management and leadership - N/A

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 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 on 15, 16 and 17 June 2016. Feedback was given to the manager on the latter date.

From the 1 April 2016 the way in which we carry out an inspection has changed. We choose which quality themes and statements are inspected for better performing services, to be more proportionate and targeted in our work. In highly performing services, inspections will consider Quality Theme 1: Quality of Care and support, Quality Theme 1, Statement 3 "We ensure that service user's health and well-being needs are met" will be considered during all inspections.

During this inspection information was gathered from a number of sources:

We spoke at length with the manager, staff, clients and visited community based groups and clients in their own home.

We looked at:

Outcome Based Support plans (My support my choice).

Review minutes.

Daily notes.

Risk Assessments.

Returned staff, client and carer questionnaires.

Ten recruitment files and associated references, application forms and PVG checks.

Training records and planner.

Evidence of staff supervision and appraisal.

Cluster/team meeting minutes.

Complaints records.

Complaint investigation records.
Returned self assessment and annual return.
Registration Certificate.
Insurance Certificate.
Notifications to the Care Inspectorate.

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

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.

We received a fully completed self assessment from the manager.

We were satisfied with the way this had been completed and with the information provided.

The manager identified what the service did well, areas for development and any planned changes.

We discussed how the self assessment could be used to highlight how the service has helped clients achieve positive outcomes and have their goals worked towards.

Taking the views of people using the care service into account

Returned care standard questionnaires and discussions with clients showed a high level of satisfaction with the service. There comments are included in the report.

Taking carers' views into account

No family members were available to comment during the 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: 5 - Very Good

Statement 3

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

Service Strengths

At this inspection we spoke with: the manager, staff and clients, read: support files, support plans and review minutes and visited community based services. We found that clients were keen to be involved in the inspection. We decided that the service supported client's health and well being very effectively and continued to work to a very good standard.

To improve client's wellbeing the service emphasised community involvement. We saw that it was always looking for new, innovative ways to provide support and establish joint working with both statutory and voluntary organisations.

When we spoke with clients they were positive about the commitment shown by staff and about the quality of the service they receive. People told us how the quality of their lives had improved since receiving support from:

"It's the best."

"Far better than my old day centre."

"Everyone is so positive."

"Never had any concerns."

"So many groups and things to do."

"Very supportive."

By talking to staff, observing practice and reading support plans we saw that they, staff, worked to support, maintain and improve people's health and wellbeing. Staff did this by: providing personal care, supporting/reminding people to take their medication, attend appointments, maintain a family life and be involved in a wide range of community based groups and activities. When we observed staff it was evident that they were aware of client's rights and individuality.

When we read support plans (My Life My Support) we saw that they were: focused on positive outcomes, clearly written, easy to follow and contained a range of information about - the client's preferences and routine, who will provide support and at what time, support needs and risk assessments. This made sure that staff were consistent in their support and approach.

Support plans are reviewed on an ongoing basis with a formal meeting being held every six months. We saw that plans were updated with progress being recorded and outcomes changed to meet client's developing wishes.

The manager has asked care managers to review the support needs of all clients. She has done this to help plan service development and support requirements. We thought that this showed that the service wanted to continue to support clients as they, clients, would wish.

To make sure that clients get as much from the service as possible they are involved in deciding who will provide their support and can ask for a change of staff. They said that this helped them feel comfortable with the support being provided as personal relationships played an important part in people's confidence and wellbeing.

When we visited community based groups and spoke with clients it was apparent that they, the client, had a relaxed and comfortable relationship with staff. The latter were seen to be respectful and attentive.

Areas for improvement

To continue to liaise with other agencies and consult with clients to learn and build upon very good practice.

Grade

5 - Very Good

Number of requirements - 0

Number of recommendations - 0

Statement 5

"We respond to service users' care and support needs using person centered values."

Service Strengths

After observing and talking to staff, speaking to and visiting clients and looking at support files, risk assessments and review minutes we found that the service continued to work to a very good standard for this statement.

To make sure that the service is right for them and before receiving support people are given information about the support that can be provided, staff, how to complain, opportunities for participation, and their rights and responsibilities.

When we spoke with clients they commented positively about the quality of the service they receive:

"Nothing is ever an issue."

"I know my team and they know me."

"Very good team."

"Staff are always willing to do that wee bit more to make your day better."

We found that staff were experienced, knowledgeable, friendly and very respectful. We decided that they worked well at both team and organisational level to meet client's needs, displaying a positive and open approach to each other and the job in hand. To help people get the most benefit from the service each client has a core group of workers, who liaise with: social, health and housing agencies and families and make sure records are up to date and that the client has their goals and aspirations worked towards and met.

When we visited clients in their own home and at community groups we were very impressed with staffs' approach and manner. We saw very good examples of friendship and respect, with the client being the focus of attention. It was obvious that staff were aware of individuals communication and general support needs, undertaking these in a discrete, non intrusive manner.

We found that staff placed an emphasis on the rights of clients as citizens, encouraged client's entrepreneurial spirit and promoted person centred practice. They did this by ensuring people maintained a community presence, and were supported to be active members of society by: setting up a business, advocating for others, volunteering, establishing close links with a number of voluntary and statutory agencies, leading community based groups and being involved in developing the service and their support.

Areas for improvement

The service should continue to develop their system of outcome based support plans.

Grade

5 - Very Good

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

After speaking with: the manager, staff and checking 10 staff files and recruitment records we decided that the service was operating to a very good standard for this statement.

We found that the service uses a recruitment tracker. This provided clear evidence of when PVG checks and reference requests were obtained.

When we read files we found that they all contained an application form, evidence of Disclosure Scotland/PVG checks and at least two references, of which one was from the most recent employer.

In conversation staff confirmed that they did not work alone with clients until they had a valid Disclosure/PVG in place and had undertaken induction training and shadow shifts.

Staff had started to complete "one page profiles" that gave information about themselves and likes and dislikes. These were used to ensure that there was a "good fit" between the client and their support team. We thought that this was a good idea as it highlighted areas where staff and client interest overlapped.

Areas for improvement

To continue to build on very good practice.

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

At this inspection we spoke with: the manager, staff and clients and read: training records and supervision and appraisal records we decided that the service was operating to a very good standard for this statement.

We found that staff spoke with respect and consideration of clients, reflected on their practice and had a clear understanding of the service's aims and objectives. Staff practice ensured that client's rights were respected. This can be evidenced when staff listen to people and change support to meet their requests and goals.

We were told that a team leader had linked with a local youth centre to undertake some work at "street level". By doing this the service hoped to challenge negative attitudes towards people with support needs, build a greater understanding of what it does and what clients can contribute to the community. We thought that this was a positive development demonstrating how the service promotes inclusion whilst challenging discrimination.

To make sure that staff maintain good practice there is a programme of training, supervision and appraisal. Supervision records showed that staff discussed client's support needs and that they, staff, were set clear goals and learning targets. This shows that the service is committed to making sure that the support staff provide has a positive impact on clients' lives.

Staff receive a range of training appropriate to individual's support needs such as: induction, shadow shifts, CALM (Crisis, Aggression, Limitation and Management), CALM escape, epilepsy, Codes of Practice, care standards and Scottish Vocational Qualifications in Social Care. Staff training is reviewed and updated through client comments and supervision.

Staff said that training is provided if a client has a support need that they have not previously had to address.

Staff were aware of the need to work towards SSSC registration and the management team were taking steps to make sure that registration took place when required.

Areas for improvement

To continue to build on very good practice.

Grade

5 - Very Good

Number of requirements - 0

Number of recommendations - 0

Quality Theme 4: Quality of Management and Leadership

Quality theme not assessed

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

9 Inspection and grading history

Date	Type	Gradings
7 Jul 2015	Unannounced	<div>Care and support</div> <div>Environment</div> <div>Staffing</div> <div>Management and Leadership</div> <div>5 - Very Good</div> <div>Not Assessed</div> <div>5 - Very Good</div> <div>5 - Very Good</div>
30 May 2014	Unannounced	<div>Care and support</div> <div>Environment</div> <div>Staffing</div> <div>Management and Leadership</div> <div>5 - Very Good</div> <div>Not Assessed</div> <div>5 - Very Good</div> <div>5 - Very Good</div>
31 May 2013	Unannounced	<div>Care and support</div> <div>Environment</div> <div>Staffing</div> <div>Management and Leadership</div> <div>5 - Very Good</div> <div>Not Assessed</div> <div>5 - Very Good</div> <div>5 - Very Good</div>
31 May 2012	Unannounced	<div>Care and support</div> <div>Environment</div> <div>Staffing</div> <div>Management and Leadership</div> <div>6 - Excellent</div> <div>Not Assessed</div> <div>5 - Very Good</div> <div>5 - Very Good</div>
22 Oct 2010	Announced	<div>Care and support</div> <div>Environment</div> <div>Staffing</div> <div>Management and Leadership</div> <div>6 - Excellent</div> <div>Not Assessed</div> <div>Not Assessed</div> <div>Not Assessed</div>

15 Jan 2010	Announced	Care and support Environment Staffing Management and Leadership	6 - Excellent Not Assessed 4 - Good Not Assessed
17 Dec 2008	Announced	Care and support Environment Staffing Management and Leadership	5 - Very Good Not Assessed 4 - Good 4 - Good

To find out more

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