

## 16 Barlink Road, Elgin Housing Support Service

16 Barlink Road  
Elgin  
IV30 6HL

Telephone: 01343 548622

Type of inspection: Announced (short notice)  
Inspection completed on: 9 March 2017

**Service provided by:**  
The Moray Council

**Service provider number:**  
SP2003001892

**Care service number:**  
CS2012306398

## About the service

The Barlink Road service is provided by Moray Council and is located on the outskirts of Elgin. The service operates with one staff team who provides support to four adults within a shared house.

The service has an office base, which is located in the centre of Elgin. The service is registered with the Care Inspectorate as a housing support service and support service with care at home for adults with learning disabilities.

We wrote this report following a short notice announced inspection carried out by one inspector. We telephoned the manager on Wednesday 22 February to arrange an initial visit on Monday 27 February 2017 where we met with the service co-ordinator and assistant manager at the office base. We arranged letters to be given to guardians in order to obtain permission to visit the service. We met with guardians on 6 March and visited the service on 8 and 9 March 2017. We gave feedback to the service co-ordinator and provider services manager for Moray Council on 9 March 2017 at the office.

## What people told us

Due to the complex nature of the tenants' level of ability, it was not always possible to gain verbal feedback from all supported people, though in some instances signing and objects of reference were used. However, we spent time with tenants and found they seemed happy, often smiling and laughing in response to staff and each other.

We used the Short Observational Framework for Inspection (SOFI2). SOFI2 is a specific way of observing care to help us understand the experience of people who could not talk with us. The observations from this were passed to the manager during feedback.

Carers include guardians, relatives, friends and advocates. They do not include care staff.

We met with all three guardians during our inspection. Overall, the guardians were happy with the care and support provided. Some comments included:

"Happy with the recent changes in management, sometimes you do not realise a change is needed until it has happened."

"Feeling positive about improvements and staffing is getting better."

"We take turns helping with recruitment."

"Feel some staff are not as confident in their work as others."

"Much more friendly, respectful and open door feel now with management."

"Lots of activities on the go, especially with everyone having a mobility car."

We noted one comment made by an external professional on a recent questionnaire which said, "staff at Barlink Road are a dedicated staff team who are a pleasure to work with".

We asked the manager to give out 25 care standards questionnaires (CSQs) to staff and we received 13

completed CSQs before the inspection. This was an improvement from last year, when no questionnaires were returned.

We passed on to management staff comments such as, still being concerned about vacancies and some of the changes being made, such as the office no longer being on site. The management were aware of issues we discussed and were working hard to make things better.

When asked if the service provided good care and support to the people who use it, eight staff strongly agreed and five agreed the support was good.

## Self assessment

The Care Inspectorate received a fully completed self-assessment document from the provider. This is a form that asks the provider to give some key information about the service, what the service does well and improvements they plan to make.

We were satisfied with the way the provider completed this and with the relevant information included for each heading that we grade services under. We also reviewed information we had received from the provider since our previous inspection.

## From this inspection we graded this service as:

Quality of care and support	4 - Good
Quality of staffing	4 - Good
Quality of management and leadership	4 - Good

## Quality of care and support

### Findings from the inspection

At this inspection, we found the service's quality of care and support to be good. We thought this after we observed interactions between staff and people using the service and looking at records. We also spent time with people who used the service and spoke to their guardians to gain their views.

Staff were friendly and welcoming. We observed interactions, which were warm and sensitive to people's needs. Supported people seemed to be relaxed and comfortable in their surroundings. Some areas had been redecorated and there were plans to update décor.

There was a garden area to each side of the house, which was easily accessible for people using the service and we saw one person using his shed, which staff said he does when wanting to 'get away'. This was important to the supported person and meant that he could have time to himself when the house was busy.

Staff were knowledgeable about people's individual preferences and choices and newer staff said they learned a lot when shadowing staff who had been there longer. There were opportunities to take part in social activities, which reflected people's individual likes and dislikes. Guardians we spoke to said they thought the activities were varied and catered to supported people's preferences.

We thought medications were being managed in line with good practice guidance. One staff member had become the medication 'champion' and ensured policies, procedures and guidance were followed. Management were also doing a competency check with staff along with spot checks and audits for quality assurance. This means people using the service can be assured staff are giving medicines in a safe way.

People were being supported to maintain their health and wellbeing. We saw in personal plans tenants had eye and dental examinations. Health professionals such as speech, language, and occupational therapy were involved providing support. Risk assessments were in place and were reviewed regularly.

We saw support plans were reviewed on a regular basis and supported people and families were included in this process. However, we discussed with the management how care plans could be more outcome focussed instead of output focussed. For example, a tenant was assisted to go swimming, the output was swimming but the outcome was enjoying the day out, relaxing and being around others in the community. This could have been better reflected in the plan.

We had made a recommendation at our last inspection for staff to record the supported people's communication and views in their daily recordings and use these to inform the development of their support. Various training for staff was being sourced and talking mats and other tools were being implemented. We thought the recommendation had been worked on but not fully met, therefore it will be restated. **See recommendation 1.**

## Requirements

**Number of requirements:** 0

## Recommendations

**Number of recommendations:** 1

1. Staff record the supported people's communication and views in their daily records and use these to inform the development of people's support.

National Care Standards Care at Home – Standard 11: Expressing Your Views

**Grade:** 4 – good

## Quality of staffing

### Findings from the inspection

To ensure staff work to the service's expectations the provider, Moray Council, operated to a range of policies and procedures that supported staff practice and development including adult protection, whistleblowing, supervision and appraisal, health and fire safety to name a few. We saw that these were regularly reviewed and updated.

The new support and assistant manager were registered with the Scottish Social Services Council (SSSC). Since starting at the service, both had been proactive in giving more responsibility to staff in order to help build confidence and promote leadership skills. This was still in the very early stages. Staff morale was slowly improving. Some staff had or were working on qualifications in line with their job role.

To make sure staff maintained good practice there was a programme of team meetings, supervision and appraisal. We saw staff discussed a range of practice and service issues at these meetings. We discussed with the management team the use of reflective practice at team meetings, for example talking about what was or was not working in relation to behaviour guidelines. This means staff can find ways to be more consistent in supporting people who are using the service.

We saw staff received a range of training including: adult protection, induction, medication, food hygiene and behavioural support, among others. However, we noted some gaps in staff training refreshers. The manager of the service was aware of this and was able to show us the system in use and staff who were booked or awaiting a place to attend and update their training.

We looked at staff support records and noted staff support was happening on a regular basis. The support manager and assistant manager had dates identified for staff to get their yearly appraisal completed in the coming weeks. On questionnaires returned to us, staff said they had individual supervision with their line manager and all but one said they were asked for their opinion on how the service could be improved. We passed comments on to the management team during feedback.

The service had been experiencing some challenging staffing issues around long-term absence and recruitment, which had proved difficult and affected morale. However, due to the experience and support of some long-term staff a level of consistency was maintained. Staff we spoke with said they enjoyed working at Barlink Road.

## Requirements

**Number of requirements:** 0

## Recommendations

**Number of recommendations:** 0

**Grade:** 4 - good

## Quality of management and leadership

### Findings from the inspection

At this inspection, we found the performance of the service for this quality theme to be good. We reached this conclusion after we spoke with staff and guardians of the people who used the service and looking at quality assurance records made available to us.

The management team was open and honest about the service's current challenges. Everyone seemed to be working towards resolving problems and making changes to bring about improvements. One staff member commented "it is the best it has ever been" with a "more open culture and management team who are involved and person-centred".

Guardians said they all felt confident to speak to the management or staff if they had any concerns or problems. Guardians met with the support manager every three months to talk about things such as communal spending, activities or holidays and involvement in recruitment. The guardians were aware of the complaints procedure and

felt management would deal with issues appropriately.

An organisation-wide quality assurance framework was seen to be in place. Strengths and areas for development were highlighted to support continuous improvement. This had already identified priorities for the service, which had resulted in changes to practice, communication and involvement. We noted when we looked at accidents and incidents these were managed well.

During our inspection, we spoke at length to the support manager and assistant manager. We found them to be actively involved in all areas of service delivery and improvement. They had a clear vision of how the service should look and operate to the benefit of supported people and their families in order to promote positive outcomes.

We discussed various best practice initiatives, including accessing websites such as the Care Inspectorate's 'The Hub', the Social Services Knowledge Scotland (SSKS) and Scottish Social Services Council (SSSC) step into leadership pathway. We asked the service to look at 'Keys to Life, Jenny's diary and supporting Derek to help increase staff awareness of these issues.

## Requirements

Number of requirements: 0

## Recommendations

Number of recommendations: 0

**Grade:** 4 - good

**What the service has done to meet any requirements we made at or since the last inspection**

## Previous requirements

There are no outstanding requirements.

## What the service has done to meet any recommendations we made at or since the last inspection

### Previous recommendations

#### Recommendation 1

Staff record the supported people's communication and views in their daily records and use these to inform the development of people's support.

National Care Standards Care at Home – Standard 11: Expressing Your Views

**This recommendation was made on 4 May 2016.**

#### Action taken on previous recommendation

The management and staff had worked really hard towards meeting this recommendation. Personal plans had been updated and documents archived. Communication needs were being assessed and six-monthly reviews were happening, but the plans were still lacking in information about meaningful personal outcomes for each person. The service had appointed a communication champion, but the staff member had moved on and no one had taken over the role as of yet. We discussed the 'Involve Me' guidance that was available with the new manager. We do not consider the recommendation has been met, so we will restate it in this report.

#### Recommendation 2

The provider will not use the supported people's home as an office base.

National Care Standards for care at home – Standard 9: Private Life

**This recommendation was made on 4 May 2016.**

#### Action taken on previous recommendation

The service co-ordinator had moved the office provision within the service to an office space with Moray Council in the town centre. There was no longer an office base at the service, all team meetings and supervisions were taking place outwith the service. We consider the recommendation had been met.

## Complaints

There have been no complaints upheld since the last inspection. Details of any older upheld complaints are published at [www.careinspectorate.com](http://www.careinspectorate.com).

## Enforcement

No enforcement action has been taken against this care service since the last inspection.

## Inspection and grading history

Date	Type	Gradings	
21 Mar 2016	Announced (short notice)	Care and support Environment Staffing Management and leadership	4 - Good Not assessed 3 - Adequate 4 - Good
25 Feb 2015	Announced (short notice)	Care and support Environment Staffing Management and leadership	4 - Good Not assessed 4 - Good 4 - Good
3 Oct 2013	Unannounced	Care and support Environment Staffing Management and leadership	3 - Adequate Not assessed 4 - Good 4 - Good



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