

NHS Forth Valley Area 2 Housing Support Service

2B Sunnyside Road Camelon Falkirk FK1 4BG

Telephone: 01324 639936

Type of inspection: Announced (short notice) Inspection completed on: 6 November 2017

Service provided by:

Forth Valley NHS Board

Care service number:

CS2004063373

Service provider number:

SP2003002712



Inspection report

About the service

NHS Forth Valley Area 2 is registered to provide housing support services to people with learning difficulties who live in the Forth Valley area. At the time of inspection the support was provided to five people, living in two shared flats. One staff team supported all five people. The service was provided by NHS Forth Valley and all staff were employed by the NHS. The team leader and manager were registered nurses.

The service aims to provide a quality service to widen the experience and opportunities of people with a learning disability within their own choice of lifestyle where possible. Part of the Vision Statement states that "individuality is celebrated".

The service provided both housing support and care at home; however the current registration was only for housing support. This was because there was no legal requirements for a NHS care at home service to register with the Care Commission when the provider first applied to the Care Commission in 2004. However we discussed that should the NHS now wish to register with the Care Inspectorate, the new regulatory body, as a care at home service, then this was now within the Care Inspectorates authority to process the application. The service manager was keen to do this and an application will be forthcoming.

This inspection therefore has taken into consideration the elements of the service that would be relevant for a care at home registration, including personal care and support with health and medication.

What people told us

We met and spoke with five people using the service at the inspection. The people we spoke with were very confident in being able to say how happy they were with the support given. One person told us that they felt safe "as the staff were people you could trust". It was very clear that the people supported were involved in all aspects of decisions. People were very enthusiastic to show the inspector their person plans, the photos of what they had achieved and talk about their support. It was also evident from spending time in both flats that the staff had excellent relationships with the people supported. Everyone was relaxed and confident in each other's company. The people supported told us that the staff could not be any better and they were very happy with their support.

We also spoke with three relatives by phone. All three felt the support could not be made any better. They said the communication between themselves and the staff was very good and felt that their views were sought and listened to by staff. All said that their relatives were very happy in the service and that their lives had been enhanced by the support given.

Self assessment

We did not request a self-assessment at this inspection. However we discussed the development of the service with the manager, which reflected the outcome of this inspection.

From this inspection we graded this service as:

Quality of care and support6 - ExcellentQuality of staffingnot assessedQuality of management and leadership5 - Very Good

What the service does well

We saw excellent outcomes for the people supported. Staff had very positive relationships with the people supported and this greatly benefited each person in helping them achieve what they wanted from their support. The people were enabled to make choices about how they wanted to be supported and what they wanted to achieve. The people achieved very successful outcomes from their support which enriched their lives. We saw that feedback from the people supported and their relatives influenced both the direct support and service operation.

We saw that the people supported were fully involved in all aspects of support planning, including reviews of their support. We also found that people had continued to be encouraged to record goals/outcomes in a way that they could understand. This included photos, pictures and symbols. This enabled people take ownership of their own goals. Personal plans were detailed, person centred documents. Everyone we met showed us their plans, which they kept, and discussed how they had been involved in saying what went in these. We saw that as much as possible the plans had been explained in symbols and pictures to support each person understanding of what was written in these. This showed us that the staff team encouraged and enabled people to be part of decisions made about how they wanted to be supported.

All the people supported had been allocated a keyworker who met with them every month to discuss their support. This helped them to talk about any problems and discuss any goals. Everyone knew who their keyworker was and spoke very highly of them. We saw that the people supported were relaxed and confident when speaking with staff. It was clear they had mutual respect for each other.

Forth Valley NHS had a range of policies and procedures in place which underpinned the values of their services. We saw that staff practice reflected the values of the organisation. It was clear from speaking to staff that they had a strong commitment to provide the best outcomes possible for the people supported. We found staff were supportive of each other and shared ideas to improve the service.

We found that staff were very well supported by the team leader and were actively encouraged to source relevant training which was of benefit to the people they supported. We saw that staff met regularly with their line manager to discuss any issues and the people supported also had the opportunity to take part in the one to one meetings to give feedback. We thought this was excellent practice and empowered people using the service. Staff had the opportunity to reflect on their work and develop their own goals through a yearly appraisal. The team leader told us that the people supported would also take part in the yearly appraisals for staff.

We saw there was a supportive management culture in place. We saw there were staff meetings where policy, development and practice issues could be discussed. We saw that quality audits were carried out by the team leader and discussed with the manager. There were systems in place to gather the views of the people supported and their families. We saw these were effectively used to look at any suggestions for improvements both individually and for the overall service.

In summary there was a well-managed, outcome focused service, with a qualified staff team who provided competent, knowledgeable care with the best interests of the people supported being at the heart of the support provided. We saw that the manager had a clear direction for the service with regard to future improvements and development.

What the service could do better

We saw that the provider's values and objectives underpin all aspects of operational practices. However we did not see the link to these within staff supervision or appraisal. We suggested that staff could be asked to give

Inspection report

specific examples of practice at appraisal to link into organisational objectives. This would show an understanding of the objectives in a practical way.

All staff will be eligible to register with the Scottish Social Services Council (SSSC) from October 2017 in housing support services. We discussed that further work would be of benefit in looking at how reflective accounts were used to show staff learning had been put into practice.

The manager told us that policies were under review at present. However we saw there was no policy on probation for new staff. As good practice all staff should be given clear expectation of what is expected from their role and guidance on the outcome if these expectations are not met. We will follow this up at the next inspection.

We also found that as NHS policies were used, often these were not appropriate to the service delivered. We discussed this at feedback. As the policies were under review we will also follow this up at the next inspection.

We discussed that some of the minutes of staff meetings could be better recorded with action points, responsibilities and timeframes. This would give clear expectations on responsibilities for completion of any actions. We also discussed that team meetings could be better used to discuss wider policy and developments.

Whilst we saw that audits were completed in the service, there was no overarching quality system used. As good practice the quality system would link objectives and expectations into the day to day running of the service and measure the success of achieving the agreed outcomes. We will follow this up at the next inspection.

Whilst there were underpinning policies from NHS Forth Valley, we discussed the current policy on the management of behaviour should be reviewed. We also discussed that there should be a policy on the use of restraint as guided by the Mental Welfare Commission document "Rights Risks and Limits to Freedom". (See recommendation 1)

Requirements

Number of requirements: 0

Recommendations

Number of recommendations: 1

1. An appropriate policy should be written which reflects the service delivered on behaviour which challenges (Stress and Distress) and on the use of restraint to positively keep people safe if required.

National Care Standards for Housing Support Services have been taken into account - Standard 3 - Management and Staffing Arrangements.

Complaints

There have been no complaints upheld since the last inspection. Details of any older upheld complaints are published at www.careinspectorate.com.

Inspection and grading history

Date	Туре	Gradings	
16 Oct 2015	Unannounced	Care and support Environment Staffing Management and leadership	5 - Very good Not assessed 5 - Very good 5 - Very good
3 Sep 2013	Announced (short notice)	Care and support Environment Staffing Management and leadership	5 - Very good Not assessed 5 - Very good 5 - Very good
22 Sep 2011	Announced	Care and support Environment Staffing Management and leadership	5 - Very good Not assessed 5 - Very good Not assessed
28 Aug 2008	Announced	Care and support Environment Staffing Management and leadership	5 - Very good Not assessed 5 - Very good 5 - Very good

To find out more

This inspection report is published by the Care Inspectorate. You can download this report and others from our website.

Care services in Scotland cannot operate unless they are registered with the Care Inspectorate. We inspect, award grades and help services to improve. We also investigate complaints about care services and can 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.

You can also read more about our work online at www.careinspectorate.com

Contact us

Care Inspectorate Compass House 11 Riverside Drive Dundee DD1 4NY

enquiries@careinspectorate.com

0345 600 9527

Find us on Facebook

Twitter: @careinspect

Other languages and formats

This report is available in other languages and formats on request.

Tha am foillseachadh seo ri fhaighinn ann an cruthannan is cànain eile ma nithear iarrtas.

অনুরোধসাপেক্ষে এই প্রকাশনাটি অন্য ফরম্যাট এবং অন্যান্য ভাষায় পাওয়া যায়।

ਬੇਨਤੀ 'ਤੇ ਇਹ ਪ੍ਰਕਾਸ਼ਨ ਹੋਰ ਰੂਪਾਂ ਅਤੇ ਹੋਰਨਾਂ ਭਾਸ਼ਾਵਾਂ ਵਿਚ ਉਪਲਬਧ ਹੈ।

本出版品有其他格式和其他語言備索。

Na życzenie niniejsza publikacja dostępna jest także w innych formatach oraz językach.