

# **Angus Council Supported Housing**Housing Support Service

Ravenswood New Road Forfar DD8 2AF

Telephone: 01307 473137

Type of inspection: Announced (short notice) Inspection completed on: 8 December 2017

Service provided by:

Angus Council

Service provider number:

SP2003000043

Care service number:

CS2004076776



#### About the service

This service provides a combination of housing support with the option of unplanned care, 24 hour cover, and in some cases supports service users with their medication. This service is provided from sheltered housing complexes in Brechin, Forfar and Montrose.

### What people told us

Eleven service users, one relative and one care manager for a tenant were spoken with during the inspection. Eleven Care Service Questionnaires (CSQs) were also returned. The views expressed were very positive about the service. Here are some of the things people said:-

#### Service Users:-

- Staff attend to me quickly if I use my pendant for assistance.
- · Yes, staff always wear gloves and aprons when assisting me with personal care.
- There are some social activities like bingo, carpet bowls, trips out organised but there could be more.
- The staff are lovely helpful and always have time for a chat.
- · I feel safe and supported living here.
- · The staff are excellent.
- · I like the seated exercises.
- · There's a real community feel here.
- Staff respect my privacy and that I don't often go to the social events they organise.
- · They do ask my views at tenants meetings.
- If I had a complaint about the staff I would go to the senior in charge.

#### Relative:-

- · They support my mother really well.
- · When I have met the staff they are friendly and welcoming.

#### Care Manager:-

- · I think it's an excellent service.
- They will contact me appropriately when they need to discuss anything.
- · Always hold reviews.
- The lady I placed there is very happy with the service they respect her wishes.
- · The work well with the power of attorney.

### Self assessment

A self assessment was not required to be completed at this inspection; however the service spoke about their goals and aspirations for the forthcoming year. The management team had identified some of the strengths and areas that they wanted to develop and had their own service development plan.

## 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

The service had a good level of care and support for its tenants. We were impressed with the person centred and outcomes focussed approach to support. Here are some examples of the strengths:-

- The service had a good tenant participation strategy which included tenants meetings, use of independent advocates, questionnaires to families and informal one-to-one discussions with tenants.
- Support plans used by the service were outcome focussed and person centred. There was a high level of detail in relation to specific support, risk assessments and monitoring outcomes via reviews.
- There was evidence of the service working well with external health and social work professionals such as community nurses, care managers and other care providers.
- Observation of staff practice showed them to be confident and compassionate in their relationships with people. People who used the service felt staff, too, were good at helping them to achieve the things they wanted.
- Tenants felt safe and secure in their homes; that staff were professional and friendly. It was reported by all tenants interviewed by the inspector that when they used their alarm pendant staff responded quickly.
- Where medication was administered staff were highly trained and systems were in place to monitor for, and ensure, good practice.
- There were many examples of social activities going on at the different complexes. These included seated exercises, carpet bowls, trips out, chippie teas, movie nights, quizzes, karaoke and other entertainments.

Overall tenants were happy with the service they received though some wanted more activities to take place. Tenants were well supported, kept as safe as possible and were assisted to maintain their tenancies. Complexes were all different but all had a sense of friendly community. The service has worked hard since the last inspection to improve the quality of care and support and it is hoped that this continues over time. This is why a grade of good has been given at this inspection.

Areas for improvement.

- It was noted that in some case tenants medication was kept in lockable boxes which were stored out in people's dwellings. While this is down to tenant choice the inspector felt that tenants should be encouraged to stored their medication in lockable cupboards (which many already did.) This would increase security of medication in people's homes. See Recommendation 1.
- It was noted that several tenants felt there were not enough social activities going on. It was also noted that the staffing levels limited what could be done in this area but the inspector felt that the service could look at social activities as an improvement project.

#### Requirements

Number of requirements: 0

#### Recommendations

#### Number of recommendations: 1

1. Tenants should be encouraged to store their medication in lockable cupboards within their homes.

See National Care Standards 8 Care at Home - Keeping Well - Medication.

If your service includes help with taking your medication, the provider has arrangements in place for this to be done safely and in the way that suits you best.

Grade: 4 - good

## Quality of staffing

#### Findings from the inspection

The service had good quality of staffing. Relevant supports and training were in place to ensure good practice. Here are some examples of the strengths:-

• Staff spoken with were well-trained. The service had a training matrix in place which showed what training they had provided to which staff. This included mandatory training such as adult protection, first aid and moving and handling. It also provided situation specific training such as mental health, learning disability and autism. All staff had undertaken, or were undertaking an SVQ unit in medication, as well as having or undertaking their full SVQs.

- Staff were well supported via supervision, appraisal and regular team meetings. Staff themselves reported that they were in a supportive team and that there was always an effective handover of information when they came on shift.
- Staff were able to express the provider's way of working with people and its person centred and outcomes focus. They all spoke with positive regard towards the people they worked with and were able to show how they promoted outcomes such as independence and respect.
- Senior staff were also well supported to undertake their supervisory roles via training, supervision and senior's meetings.
- Observation of staff practice showed them to be compassionate, listening and professional in their dealing with tenants who had a range of needs to be met.

The service ensured that staff were well supported to undertake their roles by the management. They felt valued by the provider and were valued by service users. This is why a grade of good has been given at this inspection.

Areas for improvement:-

• Some staff were not able to freely access the council's intranet in order to access emails, the internet and all the practice guidance and legislation changes that are always happening in the care sector. The inspector felt that staff would be able to be kept up-to-date more effectively if they had access to the intranet. See Recommendation 1.

#### Requirements

Number of requirements: 0

#### Recommendations

#### Number of recommendations: 1

1. It is recommended that the service allow staff to have regular access to the intranet in order to be kept up-to-date more effectively with changes in legislation, practice and knowledge in the care sector.

See National Care Standards 4, Care at Home - Management and Staffing.

You experience good quality care at home. This is provided by management and the care staff who have the skills and competence to carry out the tasks you require.

Grade: 4 - good

## Quality of management and leadership

#### Findings from the inspection

The service had a good level of management. They had done a lot of hard work since the last inspection to improve. Here are some examples of the strengths:-

- The system of medication administration had been changed so that it was in line with Care Inspectorate advice and good practice guidance. The inspector observed medication practice in all complexes.
- There was now a full suite of training being given by the provider with systems in place to ensure all staff training was monitored and provided appropriately. There was mandatory, continuing development and situation specific training in place.
- The service had pulled together their quality assurance practice into one matrix to cover risk, support plans, complaints, Care Inspectorate feedback, induction of new staff, tenant participation and medication among other things. The registered manager did external audits of all the complexes.
- There were clear lines of demarcation between the roles of provider and the landlord of the Beech Hill complex: another improvement since the last inspection.
- Participation practice was taking place to ensure service users had a voice in their support.
- The service had a development plan which tied in with the quality assurance matrix and was visited regularly at management meetings and updated.

#### Areas for improvement:-

- The service should improve its participation practice to formally gather the views of service users, staff, carers and any other stakeholders. Especially stakeholders as this will help raise the profile of the service among care managers and any other commissioners. It should then collate any views expressed and use them in their improvement practice. See Recommendation 1.
- The inspector discussed widening out the use of observation of staff practice to align it with a more formal approach so that staff became used to having their practice observed and discussed. This could perhaps, be tied in with staff appraisal.

The inspector acknowledged that the service had worked very hard to address the issues raised at the last inspection and should be commended for their efforts. He hoped that this improvement would be sustained over time and built upon.

#### Requirements

Number of requirements: 0

#### Recommendations

#### Number of recommendations: 1

1. The service should improve its participation practice to formally gather the views of service users, staff, carers and any other stakeholders. Especially stakeholders as this will raise the profile of the service among care managers and any other commissioners. It should then collate any views expressed and use them in their improvement practice.

See National Care Standards 11 Care at Home - Expressing Your Views. You or your carer are encouraged to express your views on any aspects of the care service at any time.

Grade: 4 - good

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

## Previous requirements

#### Requirement 1

The provider must ensure that medication is managed and administered safely and to the standard of best practice guidance, including: 'Handling Medicines in Social Care' 2007 and the Care Inspectorate's Health Guidance 'Maintenance of Medication Records'.

This is in order 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 of Users.

Timescale for completion - 30 June 2017.

This requirement was made on 4 May 2017.

#### Action taken on previous requirement

Met. The service has changed the way it administers medication so that it is in line with good practice guidance - after consultation with CI pharmacy advisor.

#### Met - within timescales

#### Requirement 2

The provider must take steps to ensure all staff working in the service receive appropriate training which will equip them with the necessary skills and competencies required to meet the care and welfare of all the service users.

This is in order to comply with: The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011, (SSI 2011/210) Regulation 15 - Staffing.

Timescale for completion - 30 June 2017.

This requirement was made on 4 May 2017.

#### Action taken on previous requirement

Training matrix now in place appropriate training being undertaken by all staff.

Met - within timescales

#### Requirement 3

The provider must ensure that quality assurance systems are improved to be more effective in providing information to enable the monitoring of the quality of care, support and outcomes experienced by tenants.

The provider must ensure that there is further development of the systems to ensure they are robust and effective so that identified actions can be demonstrated as being promptly met.

This is in order 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 of Users.

Timescale for completion - 30 June 2017.

This requirement was made on 4 May 2017.

Action taken on previous requirement

QA matrix in place.

Met - within timescales

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

#### Previous recommendations

#### Recommendation 1

It is recommended that the provider ensures that there are adequate systems and processes in place in relation to accessibility of records associated with the service being provided.

National Care Standards, Care at Home, Standard 4 - Management and Staffing.

This recommendation was made on 4 May 2017.

Action taken on previous recommendation

Records now accessible

## Complaints

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

## Enforcement

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

## Inspection and grading history

Date	Туре	Gradings	
16 Mar 2017	Announced (short notice)	Care and support Environment Staffing Management and leadership	3 - Adequate Not assessed 3 - Adequate 2 - Weak
3 Mar 2016	Announced (short notice)	Care and support Environment Staffing Management and leadership	4 - Good Not assessed 4 - Good 3 - Adequate
9 Mar 2015	Announced (short notice)	Care and support Environment Staffing Management and leadership	4 - Good Not assessed 5 - Very good 4 - Good
11 Feb 2014	Announced (short notice)	Care and support Environment Staffing Management and leadership	5 - Very good Not assessed 5 - Very good 5 - Very good
17 Oct 2012	Unannounced	Care and support Environment Staffing Management and leadership	5 - Very good Not assessed 5 - Very good 5 - Very good

Date	Туре	Gradings	
20 Jan 2011	Announced	Care and support Environment Staffing Management and leadership	4 - Good Not assessed Not assessed Not assessed
14 Apr 2009	Announced	Care and support Environment Staffing Management and leadership	5 - Very good Not assessed 5 - Very good 5 - Very good

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