

Edinburgh Supported Living Services Housing Support Service

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Type of inspection: Announced (short notice)
Inspection completed on: 20 April 2018

Service provided by:
Autism Initiatives (UK)

Service provider number:
SP2004006462

Care service number:
CS2005090961

About the service

Edinburgh Supported Living Service is a housing support and care at home service. It provides support and care to people with autism spectrum conditions (ASC). The service works with people at five locations across Edinburgh and has an office base in Granton. The service is available twenty-four hours each day, seven days per week.

People using the service have their own tenancies although some parts of the houses are shared.

Edinburgh Supported Living Service is part of Autism Initiatives, a national provider of services for people with autistic spectrum conditions. Their mission is to 'meet the needs of people with autism, their families and carers by providing a range of services which are personal, professional and innovative'.

At the time of this inspection the service was providing care to twenty-one people.

What people told us

We received three care standard questionnaires back before the inspection. Overall, people said they were happy with the quality of care and support.

However people also told us they were unhappy or concerned about staff shortages which meant there was inconsistency in how the service was given.

We visited four parts of the service and also met with one person individually. We saw that there were good relationships in place with regular staff and that people were well treated and supported, in ways that gave them choices.

We went to a meeting of 'I'm Heard'. This group is made up of people using the services in different parts of the country, including Edinburgh. They were asked about what they thought about their service and people seemed happy with the support they received. Staff supported people to take part in the group and a discussion took place about the new Health and Social Care Standards, hopefully helping people understand about their rights to good quality care.

Self assessment

We did not ask for a self assessment this time. We did look at the service's development and improvement plans to see how they evaluated their work and planned for needed changes. These will be looked at in future inspections and linked to the new Health and Social Care Standards from April 2018.

From this inspection we graded this service as:

Quality of care and support	4 - Good
Quality of staffing	3 - Adequate
Quality of management and leadership	not assessed

What the service does well

Some good work was being done in the service. The staff we met were enthusiastic, committed and keen to help people have good outcomes in their lives. Some staff demonstrated very good knowledge about the people they worked with and positive ways to work with them. This meant that good care and support was provided and that this in turn helped people achieve their own goals. We also thought that, for some people, the number of incidents they experienced had reduced and they were more settled in their own homes and that, too, was good to see.

Staff talked about good team work in each of the services we visited. This was good to hear as we had some concerns about this in the past. We found the atmosphere in the services friendly and helpful. Newer staff said it was easy to ask questions and be supported in the work.

We saw some good examples of practice development in some team meetings. Some agency staff told us about the good support they received.

Working files were, overall, up to date and contained a lot of useful information that helped staff get to know the person they were working with. Some documents still needed signatures to show plans were agreed. Reviews of Working Files had been completed (although we suggested some could be in more depth). We saw that some reviews of the support plans themselves had been completed, which helped staff evaluate the work being done. This meant that when a person learned a new skill this was written into the 'About me' as something they were able to do. Therefore this document provided a holistic picture of the person, their strengths and support needs.

We were given 'showcase folders' that told us about what people had achieved in the last year. We saw that there were lots of good outcomes that helped them live more fulfilling and varied lives. We saw that there were positive outcomes for most of the people who had moved into their own flats last year.

We saw that most services had well established relationships with health and other professionals such as the dietician, local general practitioners, speech and language and occupational therapy. Regular visits took place and this meant that any health concerns could be discussed. Work was being done to improve oral health and we discussed the 'caring about smiles' campaign and how the service monitored oral healthcare. We also saw that some medication reviews were taking place to ensure people were on the correct medication.

The service uses lots of visual and social stories to help the people they are working with understand what is happening, plan for the day, manage changes to their day or to help support people as they develop a particular skill such as travelling by themselves. Overall, this was working well for people who had some difficulties with communication and we saw some improvements in this work, for the individuals. We also saw that staff had good understanding of what peoples' signs and gestures and facial expressions might mean. These measures all improved communication.

What the service could do better

We discussed the service's use of paperwork at some length during feedback. In particular we thought the 'About Me' was become very wordy and that it did not always relate easily to the Health Action plan (HAP). Cross referencing was not accurate enough and the HAP had significant gaps. We wondered if there was too much different paperwork. The manager told us that this was being reviewed. Positively they also said that they were looking at different, visual ways to present information, such as DVD's and that they would involve service users in this task. We look forward to seeing the outcomes of this at the next inspection.

We saw that medication errors had reduced. We saw that some agency staff had also been trained to help support the service in this task. We did see some recording errors in medication administration records (MARs), such as gaps left or start dates for medication not recorded. There were also some errors in the auditing system. The manager agreed to remind staff of the need for accuracy. We have made an amended requirement.

We remain concerned that there are significant staff shortages in some services and this would lead to poorer relationship development and inconsistencies in practices. There was some evidence, for example, that some people were losing skills or not having these maintained or developed. While gaps were covered by relief workers or agency staff to some degree, there was some shortfall in hours and this led to inconsistency and placed additional pressure on the permanent workers (requirement 2).

This also had an effect on support and supervision 1:1 meetings and team meetings as staff were needed to carry out support work. It is important the service ensures these take place and that there is good attendance (recommendation 5).

We noted that new staff were provided with a good induction that introduced them to the work. However, inexperienced staff also need to be well supported during the induction period, to help them develop good understanding of how each person they work with thinks and manages their life, to provide the best support. (see recommendation 1).

Staff told us that they thought the induction to Autism Initiatives had been good although many also said it was a lot of information to take in at such an early stage. Some said a refresher in the first few months would be useful, to help consolidate their learning. Staff also identified different training they would like. These included mental health awareness, mental health first aid, ASIST, Positive Behaviour Support (PBS) related directly to the people they work with and moving and assisting training. We also thought that a more in-depth training on personal and continence care and infection control would be helpful. We noted that the mental health training had been reviewed to make it more effective and that some staff had attended 'safetalk', to help support people with suicidal thinking.

The Manager told us about the continuing review of night shift working at one service and the possible changes to try to improve the service. We suggested that the needs and dependency of all the people using the service are measured and collated, to ensure that there is adequate staffing available to them. This work should also consider how the layout of the building affects staffing and ensure that safety measures are completed, to ensure everyone is kept safe.

At the last inspection we discussed the need to develop continence care plans for people who needed these. We saw that some information had been written into the 'About Me'. We discussed more suggestions with to help improve consistency of care in this work and the need to highlight specific care needs, to ensure these are managed consistently and suggested may be written into another document, for easy access. We also said this remained a training issue that was both a general issue and specific to individuals.

Most mandatory training had been completed, but there were significant gaps for some staff. There is ongoing work to develop a comprehensive training programme so we have carried forward a recommendation (recommendation 3). We have also continued a recommendation about agency staff (see recommendation 2).

We looked at the audits of financial recording for personal money and saw that mistakes were made in the records, recording and auditing within each team. Internal, organisational audits also identified concerns. Support was being offered to teams to help resolve concerns (see recommendation 4).

Requirements

Number of requirements: 2

1. The provider must ensure that the administration of medication is well-managed. They must ensure that:

- Medication records and auditing records must be completed accurately
- Where short-term or other medication is administered, the dates for starting and stopping are recorded in the MAR.

SSI 2011/210 4(1)(a): a provider must make proper provision for the health, welfare and safety of service users.

Timescale: from receipt of this report.

2. Care and support is provided in such a way that it meets the identified needs of the people experiencing care. In order to achieve this, the provider must;

- ensure the care and support is provided at a time which is appropriate to meet the person's needs and for the duration it has been assessed as necessary to meet those needs.
- ensure the support is provided at the agreed times, and in such ways that it meets the needs of the person as agreed in the support plan.
- ensure that the service is consistent and reliable in who is giving the care and also in the way and timing of how it is given.

This is in order to comply with SSI 2011/210 Reg 4(1)(a) - a regulation regarding the welfare of users,

Timescale: from receipt of this report.

Recommendations

Number of recommendations: 5

1. The service should ensure that staff know people using the service well and follow support plans consistently, to ensure service users get the best outcomes possible.

This is to ensure care and support is consistent with the Health and Social Care Standards that state I have confidence in the people who care and support me (HSCS 3.14).

2. The service should ensure agency staff are adequately supported in their work.

This is to ensure care and support is consistent with the Health and Social Care Standards that state I have confidence in the people who care and support me (HSCS 3.14).

3. The service should ensure that staff are trained in ways that help them understand and meet the needs and wishes of the people they support.

This is to ensure care and support is consistent with the Health and Social Care Standards that state I have confidence in the people who care and support me (HSCS 3.14).

4. The service should ensure that accurate financial records are maintained. Staff should ensure that financial transactions are recorded accurately and the audits completed are thorough.

This is to ensure care and support is consistent with the Health and Social Care Standards that state I have confidence in the people who care and support me (HSCS 3.14).

5. The service should ensure that 1:1 support and supervision meetings take place at least every three months and that the attendance at team meetings is improved.

This is to ensure care and support is consistent with the Health and Social Care Standards that state I have confidence in the people who care and support me (HSCS 3.14).

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	Type	Gradings
22 May 2017	Announced (short notice)	Care and support 4 - Good Environment Not assessed Staffing Not assessed Management and leadership 4 - Good
4 May 2016	Announced (short notice)	Care and support 5 - Very good Environment Not assessed Staffing 4 - Good Management and leadership 5 - Very good
30 Apr 2015	Announced (short notice)	Care and support 5 - Very good Environment Not assessed Staffing 5 - Very good Management and leadership 4 - Good
7 May 2014	Announced (short notice)	Care and support 5 - Very good Environment Not assessed Staffing 5 - Very good Management and leadership 4 - Good

Date	Type	Gradings	
17 Jun 2013	Announced (short notice)	Care and support Environment Staffing Management and leadership	4 - Good Not assessed 4 - Good 4 - Good
27 Jul 2012	Announced (short notice)	Care and support Environment Staffing Management and leadership	5 - Very good Not assessed 4 - Good 4 - Good
22 Oct 2010	Announced	Care and support Environment Staffing Management and leadership	5 - Very good Not assessed Not assessed 4 - Good
10 Nov 2009	Announced	Care and support Environment Staffing Management and leadership	5 - Very good Not assessed 4 - Good 5 - Very good
26 May 2008	Announced	Care and support Environment Staffing Management and leadership	4 - Good Not assessed 3 - Adequate 3 - Adequate

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