

Adult Services, Resources - Housing Support and Care At Home Service Housing Support Service

4th Floor Rothesay House Glenrothes KY7 5PQ

Telephone: 03451 555555 446893

Type of inspection:

Unannounced

Completed on:

29 June 2018

Service provided by:

Fife Council

Service provider number:

SP2004005267

Service no:

CS2004084447



Inspection report

About the service

The service provider is Fife Council, a local authority provider of a wide variety of registered care services throughout Fife. Adult Services, Resources - Housing Support and Care at Home registered with SCSWIS, known as the Care Inspectorate on 1 April 2011.

Adult Services, Resources - Housing Support and Care at Home currently provides a combined Housing Support / Care at Home service to adults with learning disabilities, physical disabilities and to adults with other vulnerabilities. Support is provided over 24 hours to people in their own tenancies.

The Housing Support and Care at Home service aims to 'enable people to live an ordinary and independent life in their own home and to participate as far as possible within their own local community'. The service has supported accommodation in Dunfermline, Kirkcaldy and Glenrothes. During this inspection we visited houses in all three areas. Questionnaires were sent to people and staff.

What people told us

People we spoke to did appear happy and satisfied with the quality of care and support and were very happy with the staff that supported them. Comments include:

'I'm happy with the support I get.'

'My support is reviewed with me - about twice a year.'

'I'm very satisfied.'

'They have a good life.'

'Staff are terrific.'

'We work together - it's a partnership.'

'I'm invited to reviews.'

'I think the support is really good.'

'Overall quite happy they look after X well, as long as they are happy I am happy.'

'I think X has got excellent support, communication is really good, I am welfare guardian and I am fully involved.'

'Staff are most definitely skilled and are respectful to both X and me, I speak to staff daily.'

After our visits to the service we received four completed care standards questionnaires all which strongly agreed that people were happy with the care and support they received.

Self assessment

The service had not been asked to complete a self assessment in advance of the inspection. We looked at their own improvement plan and quality assurance paperwork. These demonstrated their priorities for development and how they were monitoring of the quality of the provision within the service.

From this inspection we graded this service as:

Quality of care and support5 - Very GoodQuality of staffingnot assessedQuality of management and leadership5 - Very Good

What the service does well

People should expect their personal plans to be right for them because it sets out how their needs will be met and reflects their wishes and choices. During this inspection we saw that personal plans were presented in an accessible and easy to read format although in some areas they lacked detail. For example, plans described the persons needs but not the support that they required. This information was found in other documents and records within support folders which all together provided a more complete picture. In some areas staff had started to bring the information together which meant that the personal plan was more reflective of what people expected. The management team confirmed this was included in their own development plan.

People were involved in agreeing and reviewing any restrictions to their independence, control and choice. We saw that care programme approach meetings had been held at least once every six months to consider potential risks and how these should be managed. A range of professionals contributed to these meetings. There was very good evidence of how people had been involved and supported to prepare for their meetings. This information as used to review any restrictions and consider further enablement with people.

If people need help with medication, they should be able to have as much control as possible. We saw that where possible people were supported to manage their own medication with minimal assistance whilst others needed full assistance from staff. Medication folders provided a range of information including an assessment of need and information about prescribed medication. We saw some protocols for medication prescribed as required for described symptoms. (PRN Protocols).

If people need help managing money their money and personal affairs they should expect to be able to have as much control as possible and that their interests are safeguarded. We looked at peoples finance folders and saw that the provider had a system in place for helping to manage people's finances which evidenced that best practice was followed when people were supported to spend their money.

People using the service should have confidence in the staff because they are trained, competent, skilled, are able to reflect upon practice, and follow their professional and organisational codes. Staff training records showed staff had access to a variety of training to support them to carry out their role.

Staff had access to formal qualifications such as Scottish Vocational Qualifications (SVQ) two, three, and four. Staff were registered or were aware of the need to register with the Scottish Social Services Council (SSSC). This has become a focus because some staff who were required to do so had not completed their registration within the required timescales.

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To support staff they had access to team meetings, supervision and appraisals. Staff had been given Adult Protection training and were able to describe the actions they would take if they had, or witnessed any concerns.

Audits were carried out by the senior support workers including peer audits, the peer audit had a strong emphasis on health and safety. This was under review to ensure these audits covered the care and support provided and other important areas to make them more informative.

Staff spoke positively about the changes to the management structure and the review of the service and its processes which was taking place at the time of the inspection and felt that the support they received to do their jobs had improved as a result of these changes.

Relatives spoken with gave us very positive feedback about the service and the support their loved ones receive.

What the service could do better

When looking at risk assessments and risk management plans in peoples files, these were not always up to date to reflect the current position. More up to date information was included in the minutes of care programme approach meetings. Care should be taken to ensure that the information in peoples files describing their support is the most up to date versions. The minutes of Care Programme Approach meetings were not always in flies though so there was no record of outcomes or actions - we would recommend that staff keep a brief note if there is a delay in obtaining the formal minutes.

We identified some areas for improvement around medication management which we discussed individually with senior support staff during the inspection, and collectively with the management team during feedback at the end of the inspection. These included ensuring that all prescribed medication is reflected on the medication administration sheets and that information about prescribed medication is complete and accurate - for example the name of the medication and the dose to be administered.

In addition where staff are transcribing direction by hand, these should be signed, dated, and referred to the prescribers instruction. This will help to ensure a more robust audit trail. As required protocols although in place these were not always in medication files and were generic in nature. We advised that in some instances there would be a need for more individualised information.

We found that the process of identifying when staff had, or required training was different across the service. The provider needs to develop a system for recording the training for staff, including any that is planned, when refresher training is due, external courses and any training provided by other agencies. This would allow the manager to have an oversight of staff training requirements and allow them to take proactive steps to ensure staff have the training required to meet the needs of people effectively and safely.

Staff spoken with also identified some training that they though was essential for them this included Autism and Forensic Awareness courses. Staff said these courses should be included on the services mandatory training list.

Some areas of the service had to contend with staff shortages and some support processes for staff had suffered as a result. The provider should ensure that effective support processes for staff are in place at all times such as regular supervision, appraisals and team meetings which would allow the team to reflect on their practice and development needs as well as the support they receive to do their jobs.

We also discussed introducing observed practice for staff and this could be used as part of their supervision and appraisals. This was also discussed at the previous inspection.

Requirements

Number of requirements: 0

Recommendations

Number of recommendations: 0

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	
12 Jul 2017	Announced (short notice)	Care and support Environment Staffing Management and leadership	5 - Very good Not assessed 5 - Very good Not assessed
12 Jul 2016	Unannounced	Care and support Environment Staffing Management and leadership	6 - Excellent Not assessed Not assessed 6 - Excellent
25 Aug 2015	Unannounced	Care and support Environment Staffing Management and leadership	6 - Excellent Not assessed 6 - Excellent 6 - Excellent
18 Jun 2014	Unannounced	Care and support Environment Staffing Management and leadership	6 - Excellent Not assessed 6 - Excellent 6 - Excellent

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Date	Туре	Gradings	
19 Jun 2013	Unannounced	Care and support Environment Staffing Management and leadership	6 - Excellent Not assessed 6 - Excellent 6 - Excellent
19 Sep 2012	Unannounced	Care and support Environment Staffing Management and leadership	5 - Very good Not assessed 5 - Very good 5 - Very good
1 Mar 2012	Unannounced	Care and support Environment Staffing Management and leadership	4 - Good Not assessed 4 - Good 4 - Good
30 Aug 2011	Announced	Care and support Environment Staffing Management and leadership	5 - Very good Not assessed 4 - Good 4 - Good
9 Mar 2011	Announced	Care and support Environment Staffing Management and leadership	4 - Good Not assessed 3 - Adequate 4 - Good
26 Aug 2010	Announced	Care and support Environment Staffing Management and leadership	3 - Adequate Not assessed 2 - Weak 2 - Weak
8 Mar 2010	Announced	Care and support Environment Staffing Management and leadership	4 - Good Not assessed 3 - Adequate 3 - Adequate
15 Dec 2008	Announced	Care and support Environment Staffing Management and leadership	5 - Very good Not assessed 4 - Good 4 - Good

Date	Туре	Gradings	

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