

Hamilton Towers Resource Centre Support Service

Hamilton Towers
Floor 1, Office 2
54 Castle Street
Hamilton
ML3 6BU

Telephone: 01698 459337

Type of inspection:

Unannounced

Completed on:

18 June 2018

Service provided by:

Scottish Autism

Service provider number:

SP2003000275

Service no:

CS2003047729

About the service

The Care Inspectorate regulates care services in Scotland. Information about all care services can be found on our website at www.careinspectorate.com

The service was previously registered with the Care Commission and transferred its registration to the Care Inspectorate on 1 April 2011.

Hamilton Towers Resource Centre is owned and managed by Scottish Autism and provides a support service for up to ten adults with Autism Spectrum Disorder. The centre is based in an office complex in the centre of Hamilton.

The overall aim of the service is to provide a facility which can accommodate as wide a range of needs for people on the autistic spectrum as possible. The mission statement for this service states that, "The society seeks to ensure the provision of the best possible education, care, support and opportunities for people of all ages with autism in Scotland and to support families to improve their understanding of autism".

What people told us

I have included people's views in the body of the report.

Self assessment

The self assessment was not required for this inspection year.

From this inspection we graded this service as:

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

Quality of care and support

Findings from the inspection

We found the care plans to have progressed in relation to being person centred. The content offered an insight into who the person was and their likes and dislikes. However we found the information could be repetitive throughout the plan which contributed to the lack of flow when reading. Reviews of the plans took place every six months which involved people who used the service and their relatives.

We observed respectful and warm engagement between the staff and the individuals attending Hamilton Towers. We could see that staff were familiar with people's personality and their needs which resulted in good responses from people.

We heard from families who were very positive about the service delivery which also reflected what relatives fed back in the Care Inspectorate's questionnaires.

We saw evidence of progress in relation to people's involvement in the induction of staff. This offered a tailored experience to staff in relation to getting to know the person understanding how the person wants to be supported. However we advised the service that this process could be improved to ensure all staff are aware of people's rights and capacity to change their choice of activity and how this impacts on the person's behaviour.

Daily activities were structured as agreed in the care plan. We witnessed people using technology to understand what their activity for the day was going to be. This offered consistency and security for people who require this level of organisation in their lives. We saw good examples of people meeting their outcomes such as independent shopping and preparation of meals.

Requirements

Number of requirements: 0

Recommendations

Number of recommendations: 0

Grade: 4 - good

Quality of environment

Findings from the inspection

We found Hamilton Towers to be bright in relation to natural light and to have a relaxed vibe about it. This created a good environment for people to be around. Added to this was the information on the walls to help people orientate themselves around the building.

We saw very nice visual creations hanging on the walls which were colourful and most importantly created by the people who attended Hamilton Towers. This contributed to people feeling proud of what they had achieved.

The various rooms had different functions such as the computer room, the snooze room and the relaxing rooms. This offered up the opportunity for people to move around and to access rooms depending on how they were feeling or to have space away from others.

We looked at the weekly Health and Safety checks which were carried out by one of the people who uses the service. We found this to be a positive move and a role that the individual enjoyed however we found that the actions were repetitive and on going due to the lack of response to the actions required.

During our walk around we found the wide toilet to have a lingering and unpleasant odour. We were told what had caused this and what had been done to try and fix this. However the odour was still present. we saw that the carpets throughout were very stained due to various spillages which could not be erased. The linoleum in the kitchen was badly stained from rust off the bottom of the table. We made a recommendation regarding these issues. **(See recommendation 1).**

People who used the service stored their food in their individual cupboards and the fridge freezer. We found that some foods were out of date and labels had not been applied as best practice. We advised the Health and Safety representative that the chopping boards should be renewed. Within an hour of these checks the staff and Health and Safety representative had responded to all that was required to bring the kitchen area to a good standard. We considered this as a positive move in our assessment of the grade for this theme.

Requirements

Number of requirements: 0

Recommendations

Number of recommendations: 1

1. The service should look at providing appropriate floor covering to fit the purpose of the service. The flooring should be clean and odour free both for cosmetic and hygiene purposes.

Health and Social Care Standards, My Support, my life, Standard 5 'I experience a high quality environment if the organisation provides the premises, 5.18, 5.22.

Grade: 4 - good

Quality of staffing

Findings from the inspection

We spoke with staff who on the whole were positive and felt that there had been improvements in the service since the manager and the service manager had taken up post.

They told us they felt supported and could approach their line managers if they wished to. This added to the team morale which had been low in the previous months. There had been a turnover of staff and some staff being moved to cover services in another area. However the senior manager assured us that this would not be a regular practice moving forward.

We saw evidence of team meetings taking place regularly and some good agenda items being discussed. We advised the service that the agenda items could be repetitive with no clear evidence of actions being carried out. Abbreviations should also be avoided in the minutes of the meeting to allow the reader to understand the context of the meeting.

We noted that some of the terminology used by staff when recording in various communication logs to be unprofessional in relation to people who used the service. The manager took this on board and stated that he would address this in relation to staff development.

We sampled some recruitment records which satisfied us that the safe recruitment of staff was in place. This included references and evidence of staff going through The Protection of Vulnerable Groups procedure.

Relevant training was in place and staff feedback that they had access to training regularly. We looked at the training matrix and the process for refresher training.

Requirements

Number of requirements: 0

Recommendations

Number of recommendations: 0

Grade: 4 - good

Quality of management and leadership

Findings from the inspection

We looked at an external audit carried out by an Service manager in March 2018. We found this gave an accurate picture of where the service was at in relation to strengths and areas for development. We found the grading to be very mixed across the different themes however these did reflect some of our findings too.

We looked at six surveys carried out by the service which were returned by relatives and mostly all were positive. Where it was not positive this pertained to social work and not the service.

Some comments:-

"professional, understanding, positive ethics with a friendly approach"

"perhaps the best asset available. My son owes an awful lot to the expertise and skillbase available at Hamilton Towers"

"all staff are lovely with my son and very professional and approachable"

- "the staff are innovative, creative and always seeking new opportunities and experiences"

"as previously mentioned, our daughter's communication skills have improved and she is a much more assertive person".

The service should collate this information and send results back to people who use the service and their relatives. Where they have been graded 'good' the follow up question to families should ask how they could improve. This would reflect further participation and empowerment to people and their families.

We advised the service that they should consider creating a localised development plan to offer vision and direction to the service in relation to improving.

We advised that staff being recruited into leadership and management roles should ensure that relevant training in management and leadership is offered and continually developed. The service manager advised us that this was being looked at in the near future by the organisation.

We looked at accidents and incidents and found these to be completed. We suggested that some improvement could be made in relation to the follow up actions for accidents. This would evidence lessons learned and any actions which should be followed up.

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

Requirement 1

The Provider must ensure that each service user has an accurate, up to date personal plan, which sets out how the service user's health, welfare and safety needs are to be met. The personal plan must reflect current individual health and care needs and be reviewed

- (i) when requested to do so by the service user or their representative or
- (ii) when there is a significant change in a service user's health, welfare or safety needs and
- (iii) at least once in every six month period whilst the service user is in receipt of the service.

This is in order to comply with The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI2011/210) Regulation 5 (2) (b) (i) (ii) (iii) Personal Plans; Scottish Regulators' Strategic Code of practice - made under section 5 of the Regulatory Reform (Scotland) Act 2014.

Timescale: Within eight weeks from receipt of this report.

In making this requirement we have taken into account the National care standards, Support services - Standard 4 Support arrangements.

This requirement was made on 22 January 2018.

Action taken on previous requirement

The care plans that we sampled contained all the information required.

Met - within timescales

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

Previous recommendations

Recommendation 1

The service should continue to regularly provide staff with support meetings, supervision and appraisals regularly and put in place plans that ensure continuity through changes of management.

National care standards, Support Services – Standard 2 Management and staffing arrangements.

This recommendation was made on 21 February 2018.

Action taken on previous recommendation

We sampled staff files and supervision and found that this was carried out regularly in line with the provider's policy and good practice.

Recommendation 2

The service should look at creative ways in how to involve people who use the service in the induction of new staff, their probation and the on going supervision of staff. This should be evidenced at the next inspection.

National care standards, Care at Home – Standard 4 Management and Staffing

National Care standards, Support Services – Standard 2 Management and Staffing

This recommendation was made on 21 February 2018.

Action taken on previous recommendation

We saw evidence of the implementation of the new staff induction process which involved people who use the service by the use of one page profiles and further information pertaining to the individual.

Recommendation 3

The service should develop a training matrix that is clearly influenced by, and links into staff supervision and training needs. This must include information of training needs identified, requested, planned, attended and due.

National care standards, Care at Home – Standard 4 Management and Staffing

National Care standards, Support Services – Standard 2 Management and Staffing

This recommendation was made on 21 February 2018.

Action taken on previous recommendation

We looked at the training matrix and could see the provider and the manager communicated on a good level to ensure training was being identified in supervision and passed on to the training partner.

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	Type	Gradings
22 Jan 2018	Unannounced	Care and support 3 - Adequate Environment 4 - Good Staffing 3 - Adequate Management and leadership 3 - Adequate
2 Dec 2016	Unannounced	Care and support 4 - Good Environment Not assessed Staffing Not assessed Management and leadership 3 - Adequate
29 May 2013	Unannounced	Care and support 5 - Very good Environment 5 - Very good Staffing 5 - Very good Management and leadership 5 - Very good
18 Jan 2010	Announced	Care and support 5 - Very good Environment Not assessed Staffing 4 - Good Management and leadership Not assessed
2 Jun 2010	Announced	Care and support 5 - Very good Environment 5 - Very good Staffing 5 - Very good Management and leadership 4 - Good

Date	Type	Gradings	
13 Jan 2009	Unannounced	Care and support	5 - Very good
		Environment	4 - Good
		Staffing	4 - Good
		Management and leadership	4 - Good

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Contact us

Care Inspectorate
Compass House
11 Riverside Drive
Dundee
DD1 4NY

enquiries@careinspectorate.com

0345 600 9527

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