

Enable Scotland (Leading the Way) - Ayrshire Support Service

Unit 1
Busby Business Centre
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Kilmarnock
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Telephone: 01563 546460

Type of inspection:

Unannounced

Completed on:

6 November 2018

Service provided by:

Enable Scotland (Leading the Way)

Service provider number:

SP2003002584

Service no:

CS2004079756

About the service

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

Enable Scotland (Leading the way) - Ayrshire was previously registered as a combined care at home and housing support service run by Enable Scotland operating from a single office location in Kilmarnock. Earlier in the year the service un-combined and now has two separate registrations (one for housing support and one for care at home).

This report is for the care at home service.

At the time of inspection the service was not able to define exactly who and how many hours would be relevant to each of the separate registrations, therefore the inspection was undertaken as in previous years (as a combined service). Going forward this is an area that the service needs to address so this information can be captured in the annual returns and inform future inspections.

There were approximately 75 people using the service at the time of our inspection. The service supports people with learning disabilities to live in their own homes, be part of the community and lead fulfilling lives. Support provided can range from a few hours a week to 24 hour care.

What people told us

During the course of the inspection we gained feedback from 28 of the 75 people using the service or their relatives/carers.

We visited seven people at home, met with two relatives of people supported and received 15 completed care standards questionnaires. A care Inspectorate inspection volunteer also spoke to four people over the phone to ask for feedback on the service.

Overall the feedback was positive about both the staff and support they provided. People generally knew their staff well and felt that they were involved with decisions about how their support was provided.

Whilst we saw some very good interactions between people being supported and their staff, we spoke with the manager regarding interactions with one individual which we felt could be improved to further promote the person's dignity.

We have taken account of the views of people using the service and their relatives when commenting on each of the quality themes.

Self assessment

The Care Inspectorate has not requested services to complete a self assessment for this inspection year. We looked at the services own improvement plan and quality assurance paperwork to demonstrate their priorities for development and how they were monitoring the quality of the provision within the service.

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

We found that the service continues to perform at a good level in relation to the quality of care and support.

We saw and heard about examples of where people using the service had been supported to engage in their local communities and be active citizens, participating in local and charity events.

It was good to see that the service was continuing to review the way it sought feedback from people using the service, this was to ensure that people were engaged with the process and supported to express their views.

Whilst we saw that some improvements had been made to some of the support planning documents, this was a work in progress and not all plans have been reviewed and updated as required. The service needs to continue to develop outcome focussed support plans, ensuring that review paperwork is developed alongside this. We did see some examples of very good, person centred planning sessions/reviews of support. This work needs to be further developed and implemented across all packages to ensure that people are more meaningfully involved in the development and review of their support. This will enable staff to better review progress towards goals and outcomes, identify what is working well and areas where additional support may be required.

The support plan documents we sampled did not always reflect the current needs of the individual and provide staff with appropriate guidance on how to best support them and manage any risks presented. This includes any health needs which should be clearly documented and links made to other relevant documents for example risk assessments, specialist assessments and protocols/guidelines for support. (see recommendation one).

We saw that where medication administration records (MAR) were being used, the quality of information varied, with a many needing improvements to ensure that they reflected best practice, particularly around the use of 'as required' (PRN) medication. The manager also needs to ensure that there is a clear assessment of the required level of support for managing medication to support the maintenance of independent living skills and consistency amongst the staff team.

Requirements

Number of requirements: 0

Recommendations

Number of recommendations: 2

1. The manager should ensure that support plan documents and assessments reflect the current needs of the individual and provide staff with appropriate guidance on how to best support them and manage any risks presented.

This includes any health needs which should be clearly documented and links made to other relevant documents for example risk assessments, specialist assessments and protocols/guidelines for support.

This is to ensure that care and support is consistent with the national health and social care standards which state that:

My personal plan (sometimes referred to as a care plan) is right for me because it sets out how my needs will be met as well as my wishes and choices (HSCS 1.15)

2. The manager should ensure that medication systems and processes reflect current best practice guidance and legislation. This includes having assessments of support required and ensuring documents such as section 47's (to give consent to administer medication where people lack capacity) are kept up to date.

This is to ensure that care and support is consistent with the national health and social care standards which state that:

I have confidence in people because they are trained, competent and skilled, are able to reflect on their practice and follow their professional and organisational codes (3.14).

And

Any treatment or intervention that I experience is safe and effective

Grade: 4 – good

Quality of staffing

Findings from the inspection

We found that the quality of staffing was good.

Staff that we met appeared passionate and motivated to provide high quality, person centred support. People we spoke to told us that they were happy with staff that supported them and they were treated with respect.

Staff that we spoke to were positive about development opportunities and the level of support and training available to them. Whilst people told us they did not always have formal supervisions, they felt that support from senior staff was available if they required it.

We found that the service had a good system in place for the recruitment of staff. Staff are matched to individual packages of support, and there are a range of opportunities for people using the service and where appropriate their relatives, to get involved in the recruitment process.

We saw that some improvements had been made to the induction process but there were still a number of staff who were not receiving the appropriate level of formal support and supervision during their induction and probation period.

We felt that there could be improved opportunities for staff to reflect on, share and discuss best practice. Whilst we saw there were some opportunities such as individual and group supervisions, team meetings and electronic communications, these were not always being utilised regularly or in the best way to support staff in this area.

Requirements

Number of requirements: 0

Recommendations

Number of recommendations: 1

1. To support the personal and professional development of staff, the manager should ensure that supervision and appraisals are undertaken as per the organisations policy.

This includes formal and informal support and supervision during the induction/probation period. The manager should also ensure that the quality and content of these is consistent and evidences discussion of relevant areas including the planning and reviewing of actions to be taken forward.

This is to ensure that care and support is consistent with the national health and social care standards which state that:

I have confidence in people because they are trained, competent and skilled, are able to reflect on their practice and follow their professional and organisational codes (3.14).

Grade: 4 - good

Quality of management and leadership

Findings from the inspection

We found that the quality of the management and leadership was good.

People we spoke to were positive about the team facilitators and service managers. There has been a lot of turnover at the team facilitator level within the past year and this has had a positive effect on the team as a whole. Staff report that the atmosphere in the office is much improved and they feel more confident to come into the office and speak with the management team.

We saw that there was a focus on providing opportunities for staff to develop leadership skills with various development opportunities in both the service and wider organisation such as secondments, delivering training and acting up roles.

Whilst the shortage of team facilitators has had an impact on the services ability to address some of the required improvements, the service has moved forward and has plans in place for its continued development.

We saw that there was now a specific induction for team facilitators giving them the extra knowledge and skills required for their role. Feedback from new team facilitators was mixed regarding their induction experience with those who started more recently reporting a much more supported and co-ordinated approach.

We saw some good audits undertaken by the service managers which raised a number of issues, reflecting what we found in during the inspection. Whilst the audits were thorough and raised a number of areas for improvement, we felt they could be further improved. Identifying standards and expectations by which the audits are to be undertaken would allow consistency among auditors, ensure transparency and help make them more robust.

Requirements

Number of requirements: 0

Recommendations

Number of recommendations: 2

1. Staff performance systems including supervision, team meetings, appraisal and direct observation of practice should be conducted and sustained in line with the organisation's procedures and good practice expectations to ensure staff are supported to discuss and develop their role and ensure their competency to carry it out.

This is to ensure that care and support is consistent with the national health and social care standards which state that:

I experience high quality care and support based on relevant evidence, guidance and best practice (HSCS 4.11)
And

I use a service and organisation that are well led and managed. (HSCS 4.23)

2. To support the continuous improvement of the service and that robust quality assurance processes are in place, the manager should ensure that there is further development of audit documents to formalise them across all areas, ensuring that standards/expectations are clearly identified.

This is to ensure that care and support is consistent with the national health and social care standards which state that:

I benefit from a culture of continuous improvement, with the organisation having robust and transparent quality assurance processes. (HSCS 4.19)

Grade: 4 - good

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

Previous requirements

There are no outstanding requirements.

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

Previous recommendations

There are no outstanding recommendations.

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
21 Dec 2017	Unannounced	<div>Care and support</div> <div>Environment</div> <div>Staffing</div> <div>Management and leadership</div> <div>4 - Good</div> <div>Not assessed</div> <div>3 - Adequate</div> <div>3 - Adequate</div>

Date	Type	Gradings
13 Jan 2017	Unannounced	Care and support Environment Staffing Management and leadership 3 - Adequate Not assessed 3 - Adequate 3 - Adequate
5 Feb 2016	Unannounced	Care and support Environment Staffing Management and leadership 4 - Good Not assessed 4 - Good 5 - Very good
11 Mar 2015	Unannounced	Care and support Environment Staffing Management and leadership 5 - Very good Not assessed 5 - Very good 5 - Very good
26 Mar 2014	Unannounced	Care and support Environment Staffing Management and leadership 5 - Very good Not assessed 5 - Very good 5 - Very good
14 Mar 2013	Unannounced	Care and support Environment Staffing Management and leadership 4 - Good Not assessed 4 - Good 4 - Good
16 Feb 2012	Unannounced	Care and support Environment Staffing Management and leadership 4 - Good Not assessed 4 - Good Not assessed
17 Nov 2010	Announced	Care and support Environment Staffing Management and leadership 4 - Good Not assessed 4 - Good Not assessed
2 Jul 2009	Announced	Care and support Environment Staffing Management and leadership 5 - Very good Not assessed 5 - Very good 4 - Good

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