

# Freespace Ltd Housing Support Housing Support Service

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Edinburgh  
EH11 2QH

Telephone: 0131 346 9030

**Type of inspection:**

Unannounced

**Completed on:**

17 January 2019

**Service provided by:**

Freespace Ltd

**Service provider number:**

SP2003002587

**Service no:**

CS2004076892

## About the service we inspected

This service registered with the Care Inspectorate on 01 April 2011.

Freespace is a company with charitable status which provides assistance in all areas of daily living for adults with physical disabilities, acquired brain injuries and learning disabilities, who want to live independently in the community.

The service is registered to provide Housing Support Services and Care at Home. The service is overseen by a Board of Directors, some of whom also use the service.

This service has six staff bases offering twenty-four hour staff availability. The services are as follows:  
1) Western Harbour 2) St Leonards 3) Morrison Crescent 4) Roseburn 5) Coxfield 6) Lindsay Road.

## How we inspected the service

The Care Inspectorate undertook an unannounced inspection of the service in July 2018. Findings from that inspection resulted in grades of three - adequate being awarded to all three quality themes - care and support, staffing, and management and leadership.

We have now undertaken an inspection in January 2019 to follow up on the improvement areas identified at the July 2018 inspection. The findings from this follow up inspection are recorded below. We would advise this report is read in conjunction with the full inspection report of 17 July 2018 which gives more detail about the improvement areas being addressed.

It can be seen from the findings of this follow up inspection that the service had continued to make necessary improvements. These improvements had led to two of the four outstanding requirements and both of the two recommendations being met. The service was proactively working towards meeting the remaining two requirements.

We have extended the timescale for meeting the two outstanding requirements to 26 April 2019 with an expectation that they are fully met by that date.

## Taking the views of people using the service into account

This follow up inspection focused on checking operational procedures and processes. We took into account the views of people using the service from when we last inspected in July 2018 and feedback from people given at their recent social work reviews.

We met with two people who used the service. One person told us they were currently happy with the service. They had a more consistent team of workers providing their support which they found beneficial.

One person was unhappy with the recent changes of management and would have liked the new manager to have meet with them and introduce themselves. Whilst the use of agency staff had reduced considerably the person felt when agency staff were used at the development that they were largely selected to provide their support. The person was concerned there was not enough staff who drove cars to be able to take the person out and about in the community. We passed these concerns to the service management who were addressing them. The service was currently advertising for two support workers who have driving licences to enhance the staff team at the person's development.

## Taking carers' views into account

As this follow up inspection focused on checking operational procedures and processes we did not seek the views of relatives at this time.

We took into account the views of relatives from when we last inspected in July 2018 and feedback from relatives given at people's recent social work reviews.

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

### Previous requirements

#### Requirement 1

In meeting this requirement people will have confidence that they are safely supported with their medication and that the support reflects their individual needs and level of independence.

By **11 September 2018** the provider must:-

- 1) Establish each supported person's medication support level and change the support accordingly along with the medication support plan;
- 2) Finalise the revised medication policy and procedure;
- 3) Provide training to all staff on the new medication procedures.

This is in order to comply with Regulation 4 (1) (a) of The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/210).

The Health and Social Care Standards, in particular standards 1.15, 2.23 and 4.11 have been taken account of in making this requirement.

**This requirement was made on 29 August 2018.**

#### Action taken on previous requirement

The Freespace medication policy and procedures had been revised and finalised and now reflected City of Edinburgh care at home medication policy and procedures and best practice guidance from the Care Inspectorate.

The service had appointed a medication champion who had been appropriately trained to deliver medication training. Training in the new procedures had been cascaded to all support workers through in-house training.

Each supported person's medication support level had been re-assessed and support now reflected their current needs and independence.

**Met - within timescales**

## Requirement 2

In meeting this requirement people will have confidence that their personal care plans reflect their individual needs and associated risks and inform staff how to provide care and support to enhance their quality of life.

By **06 November 2018** the provider must ensure:-

- 1) risk assessments are completed, monitored and reviewed where there is an identified risk to supported people or staff to enable positive risk taking;
- 2) personal plans are up to date ensuring all information is relevant and accurate and states how the person should be supported to achieve their planned outcomes;
- 3) personal plans and risk assessments are signed and dated by supported people or their representatives as well as the service representative to evidence agreement.

This is in order to comply with Regulation 5 (1) and 4(1) (a) of The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/210).

The Health and Social Care Standards, in particular standards 1.15, 1.19, 1.23 and 2.24 have been taken account of in making this requirement.

**This requirement was made on 29 August 2018.**

### Action taken on previous requirement

Work was on-going with the further development of support plans and associated risk assessments. When there was a change in support need or health, staff still needed to better identify when a risk assessment required to be updated or a new assessment of risk undertaken, with subsequent changes to support plans.

Some plans needed to be streamlined as information was repetitive. Where people needed support when they were emotionally distressed more detail was needed as to how to recognise the signs and how to use key words and phrases to reduce and manage those situations.

The recent assessments of medication and financial support needs were being developed into specific support plans. Whilst work on improving information held in support plans continued to be made this was still an area of improvement.

**Not met**

## Requirement 3

In meeting this requirement people who need help managing their money will have confidence that they are safely supported and their finances are safeguarded.

By **14 August 2018** the provider must submit an appropriate action plan to the Care Inspectorate which details actions to be taken, with timescales, to make financial arrangements safer for each individual supported person who needs support with managing their money.

By **9 October 2018** the provider must ensure:-

- 1) there are safe systems in place when support is given to supported people to uplift money from the bank/building society.

- 2) the service has the legal right to support people who do not have the capacity to manage their finances either by:-
- a. permission granted by a third party representative who has financial legal powers on behalf of the person supported;
  - b. arrangements through corporate appointeeship.

This is in order to comply with Regulation 4 (1) (a) of The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/210).

The Health and Social Care Standards have been taken account of in making this requirement. In particular standard 2.5 "If I need help managing my money and personal affairs, I am able to have as much control as possible and my interests are safeguarded".

**This requirement was made on 29 August 2018.**

#### Action taken on previous requirement

The Freespace financial policy and procedures had been revised and finalised to ensure there were now robust processes in place to support people safely with their finances. The new procedures had been cascaded to all support workers.

Each person's financial support needs had been re-assessed. Discussions had been held with individual people's third party representatives who held financial legal powers to develop safer financial procedures. This had considerably reduced the use of bank cards. Where bank cards were still in use they were stored safely. Safeguards had been put in place when support was being given to people when uplifting money from bank/building society and those visits were appropriately recorded.

All financial transactions and bank statements (where applicable) were being audited appropriately.

#### Met - within timescales

### Requirement 4

In meeting this requirement people will have confidence in staff because there are enough staff who are trained, competent and skilled and follow their professional and organisational codes (Health and Social Care standard 3.14).

By **6 November 2018** the provider must:-

- a) develop an induction policy and procedure which ensures all new staff receive all induction training within three months of their start date, and includes observations of competency and on an ongoing basis;
- b) ensure all staff complete mandatory training updates as and when required and complete training in client specific topics to meet individual care needs;
- c) review and update the training matrix to ensure accuracy and use to monitor staff members completion of training topics;
- d) undertake observations of staff competency which are recorded and linked to training, one to one supervision and personal development;

This is in order to comply with Regulations 4(1)(a) and 15(b)(i) of The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/210).

The Health and Social Care Standards, in particular standard 3.14 have been taken account of in making this requirement.

Relevant evidence based practice / recognised training may help guide the service in meeting this requirement. For example:

The Scottish Promoting Excellence Framework training resource available @ <http://www.sssc.uk.com/workforce-development/supporting-your-development/promoting-excellence-in-dementia-care>.

Step into Leadership (supervision sections) available @ <http://www.stepintoleadership.info/supervision.html>

**This requirement was made on 29 August 2018.**

### Action taken on previous requirement

Freespace had appointed an induction champion who had been working with the service improvement officer to develop a comprehensive five day induction programme for new employees. We considered the programme to be of high quality and should ensure new staff receive appropriate training at the start of their employment.

The programme should commence at the end of January 2019 and will also be delivered to all existing support workers. This will ensure any gaps in existing staff's training needs are met, with induction training topics including food hygiene, infection control and positive behaviour.

Refresher training in first aid, medication and moving and assisting were being delivered to staff around the time of this inspection.

Competency checks were being undertaken when performance issues were identified. The next stage is for on-going staff competency checks to be developed and linked to the probationary period, training, one to one supervision and personal development.

The training matrix had been revised to make it easier to record training undertaken and training due.

**Not met**

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

### Previous recommendations

#### Recommendation 1

The provider should ensure where people's nutrition and hydration are being monitored with the use of an input and output recording chart appropriate procedures should be in place. These to include:-

- 1) Having a daily intake / target goal recorded
- 2) Fluid intake and out take totalled up on each chart
- 3) Have planned procedures in place if targets are not met
- 4) Charts to be audited by team leaders.

The Health and Social Care Standards, in particular standards 1.19 and 4.11 have been taken account of in making this recommendation.

**This recommendation was made on 29 August 2018.**

#### Action taken on previous recommendation

Improvements had been made to documentation and procedures which ensured more effective monitoring of people's nutrition and hydration when needed. This also included having specific procedures to follow during hot weather.

This recommendation has been: **Met**

## Recommendation 2

To build consistent, trusting and comfortable relationships between supported people and support workers the provider should:-

- 1) Reduce the use of agency staff;
- 2) Inform supported people, if they chose to know, which carer will be undertaking each of their support visits;
- 3) Inform supported people of last minute changes to support times and/or support worker.

The Health and Social Care Standards, in particular standards 3.8, 3.11 and 4.16 have been taken account of in making this recommendation.

**This recommendation was made on 29 August 2018.**

#### Action taken on previous recommendation

The use of agency staff had continued to considerably reduce.

People were being informed of who would be supporting them prior to the support visit via several different methods. These included a written rota, recording in the person's diary, on a white board or verbally. We were satisfied the methods used suited each individual. We were more confident that people were told when there were last minute changes to support times and/or support worker.

This recommendation has been: **Met**

## Complaints

There have been no complaints upheld since the last inspection. Details of any older upheld complaints are published at [www.careinspectorate.com](http://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
17 Jul 2018	Unannounced	Care and support 3 - Adequate Environment Not assessed Staffing 3 - Adequate Management and leadership 3 - Adequate
1 Nov 2017	Unannounced	Care and support 3 - Adequate Environment Not assessed Staffing 3 - Adequate Management and leadership 3 - Adequate
30 Mar 2017	Unannounced	Care and support 2 - Weak Environment Not assessed Staffing 2 - Weak Management and leadership 2 - Weak
8 Sep 2016	Unannounced	Care and support 3 - Adequate Environment Not assessed Staffing 3 - Adequate Management and leadership 3 - Adequate
5 Aug 2015	Unannounced	Care and support 5 - Very good Environment Not assessed Staffing 5 - Very good Management and leadership 5 - Very good
28 Oct 2014	Unannounced	Care and support 4 - Good Environment Not assessed Staffing 4 - Good Management and leadership 4 - Good
23 May 2014	Unannounced	Care and support 2 - Weak Environment Not assessed Staffing 4 - Good Management and leadership 2 - Weak
5 Jun 2013	Unannounced	Care and support 5 - Very good Environment Not assessed Staffing 5 - Very good



Date	Type	Gradings	
		Management and leadership	4 - Good
19 Jul 2012	Unannounced	Care and support Environment Staffing Management and leadership	5 - Very good Not assessed 5 - Very good 5 - Very good
16 Dec 2010	Announced	Care and support Environment Staffing Management and leadership	4 - Good Not assessed 5 - Very good Not assessed
15 Feb 2010	Announced	Care and support Environment Staffing Management and leadership	5 - Very good Not assessed 4 - Good Not assessed
22 Oct 2008	Announced	Care and support Environment Staffing Management and leadership	5 - Very good Not assessed 5 - Very good 4 - Good

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