

# Inspection report

## Castlehill Housing Support Services Housing Support Service

4 Carden Place  
Aberdeen AB10 1UT

<b>Inspected by:</b> <b>(Care Commission Officer)</b>	Rod Wood
<b>Type of inspection:</b>	Announced
<b>Inspection completed on:</b>	10 March 2008

**Service Number**

CS2004070937

**Service name**

Castlehill Housing Support Services

**Service address**

4 Carden Place  
Aberdeen AB10 1UT

**Provider Number**

SP2004006411

**Provider Name**

Castlehill Housing Association Ltd

**Inspected By**

Rod Wood  
Care Commission Officer

**Inspection Type**

Announced

**Inspection Completed**

10 March 2008

**Period since last inspection**

12 months

**Local Office Address**

Johnstone House  
Rose Street  
Aberdeen  
AB10 1UD

## **Introduction**

Castlehill Housing Support Service is a registered Housing Support Service provided by Castlehill Housing Association Ltd. The Organisation is a non-profit making charitable organisation which owns 1500 properties in Aberdeen City, Aberdeenshire and Moray and is a Registered Social Landlord with Communities Scotland.

Castlehill Housing Support Service provides housing support services to tenants in 23 sheltered or very sheltered housing developments throughout the North of Scotland. In addition, the service also provides a specialist service to older Chinese people and an outreach service (Key Project) to people living in their own homes who need support and assistance to maintain their tenancy.

## **Basis of Report**

This report was written following an announced inspection carried out by one Care Commission Officer between 10 and 13 March 2008.

The service completed an annual return giving information about the service.

A self evaluation was also completed by the service.

This service was inspected after a Regulation Support Assessment (RSA) was carried out to determine the intensity of inspection necessary. The RSA is an assessment undertaken by the Care Commission Officer (CCO) which considers: complaints activity, changes in the provision of the service, nature of notifications made to the Care Commission by the service (such as absence of a manager) and action taken upon requirements. The CCO will also have considered how the service responded to situations and issues as part of the RSA.

This assessment resulted in this service receiving a medium RSA score and so a low intensity inspection was required as a result. The inspection was then based upon the relevant inspection focus area(s) and follow up on any recommendations and requirements from previous inspections, complaints or other regulatory activity.

During the inspection process the Care Commission Officer visited the Association's Head Office and visited Fettercairn Sheltered Scheme. The Care Commission Office spoke with:

The Housing Manager  
2 Members of Staff at the Fettercairn scheme  
15 Service Users in a group situation  
1 Service User in private interview.

In addition 20 questionnaires were returned from service users and 15 questionnaires returned from staff.

The Care Commission also looked at a range of policies, procedures and records including the following:

Housing Support Plans  
Inter Agency Adult Protection Procedures  
Training programme  
Training & Development Policy

The main inspection focus for this service during this inspection was:

1. Protecting People - Sub Sections, Child Protection in adult services, Adult Protection - Restraint, Staff Training and Scottish Social Services Council Codes

2. Quality Assurance

The Care Commission Officer took all of the above into account and reported on whether the service was meeting the following National Care Standards - Housing Support Services:

Standard 3: Management and Staffing Arrangements

Standard 8: Expressing your views

Not all elements of these Standards were examined during this inspection.

Feedback on the inspection outcome was provided to the Manager on 28 March 2008

The Fire (Scotland) Act 2005 introduced new regulatory arrangements in respect of fire safety, on 1 October 2006. In terms of those arrangements, responsibility for enforcing the statutory provisions in relation to fire safety now lies with the Fire and Rescue service for the area in which a care service is located. Accordingly, the Care Commission will no longer report on matters of fire safety as part of its regulatory function, but, where significant fire safety issues become apparent, will alert the relevant Fire and Rescue service to their existence in order that it may act as it considers appropriate. Further advice on your responsibilities is available at [www.infoscotland.com/firelaw](http://www.infoscotland.com/firelaw).

### **Action taken on requirements in last Inspection Report**

There were no requirements made at the last inspection.

Information about complaints that have been upheld or partially upheld can be found on the Care Commission website.

### **Comments on Self-Evaluation**

Prior to the inspection a Self Evaluation document was completed as requested by the Care Commission. This document was completed to a satisfactory standard and identified the strengths and areas for development of the service.

### **View of Service Users**

The Care Commission issued 40 questionnaires to service users of which 20 were returned. In the main most showed a very high satisfaction with the service received. Two showed some concerns about the service they received but did not give contact detail for the Care Commission to speak with them about their concerns.

In addition the Care Commission Officer visited one of the Sheltered Housing schemes at Fettercairn. 15 residents were spoken with in a group and all spoke very highly of the service they received and in particular about the high level of work and input the staff at the scheme put into their support needs. Comments such as "they will do anything for us" was mentioned regularly and "they put in a lot of time outside their hours" was also mentioned.

All showed that they very much enjoyed the social life they had at the scheme again praising the efforts of the two staff at the scheme for making this possible.

One resident requested a private meeting with the Care Commission Officer in order that he could show the Care Commission Officer his home and also to say how very happy he was living at the scheme.

**View of Carers**

There were no families or relatives available at this inspection.

## **Regulations / Principles**

### **National Care Standards**

#### **National Care Standard Number 3: Housing Support Services - Management and Staffing Arrangements**

##### **Strengths**

The service did not use restraint therefore individual risk assessments related to restraint would not be prepared. However, where there were any mobility or other restriction on service users detail was included in the Housing Support Plan. This was regularly reviewed. Housing Support Plans were examined during the visit to one of the Sheltered Housing Schemes.

Training in challenging behaviour was scheduled to take place during the summer. The Manager agreed that Restraint training appropriate to the service would be included in this training.

The service held a copy of the Area Inter-Agency Adult Protection procedures. However, these needed to be copied to each of the schemes managed by the Association for the guidance of staff.

There had been no adult abuse concerns since the last inspection.

A training plan and staff training programme for staff was in place and covered all the requirements defined in regulation. Non - statutory training was also covered.

Training in SVQ at various levels was currently being undertaken by a number of staff including the Manager who was undertaking SVQ Level 4.

The effectiveness of training would normally be evaluated by observation of practice by Managers during visits to schemes or by service user feed back.

##### **Areas for Development**

Children would visit relatives who were tenants at the schemes managed by the Association. A child protection policy had not been put in place by the service. A child protection policy needs to be prepared which is appropriate to the service and will take account of the Area Child Protection Procedures. (See Recommendation 1).

Restraint was not used by the service and was not considered appropriate for this type of service except in very exceptional circumstances. However, the service needs to develop guidance for staff in the use of restraint.

The service did not have a copy of 'Rights, Risks and Limits to Freedom' the principles and good guidance of the Mental Welfare Commission 2006 or 'Safe to Wander' Mental Welfare Commission 2003. The Manager stated he would obtain copies of these guidance documents. (See Recommendation 2).

The service did not have an Adult Protection Policy in place. (See Requirement 1).

Training in adult abuse/adult protection had not been undertaken by staff. Discussion with the Manager indicated that this would be planned for the end of the year. This will be followed up at the next inspection. (See Requirement 2).

A training and development policy was in place. However the policy did not mention how staff could and should access SVQ qualification training in order to register with the SSSC. This should be included in the policy.

## **National Care Standard Number 8: Housing Support Services - Expressing Your Views**

### **Strengths**

Service users and where appropriate their relatives were involved in any review of their support. An appropriate complaints procedure was in place.

The Housing Manager visited each scheme 3 times annually to discuss any issues and to monitor practice.

Where changes to a scheme affected service users was anticipated a formal consultation process would be undertaken.

Service users were encouraged to participate in the inspection process via questionnaires and through meeting Care Commission Staff during the visit. Copies of inspection reports were made available at all schemes.

### **Areas for Development**

None identified at this inspection.

**Enforcement**

There has been no enforcement action against this service since the last inspection.

**Other Information**

None.

**Requirements**

1. The Provider must develop and implement an Adult Protection Policy.

This is in order to comply with SSI 2002/114 Regulation 4(1)(a) - a requirement that Providers shall make proper provision for the health and welfare of service users.

Timescale: Within 6 months of receipt of this report.

2. The Provider shall ensure access to appropriate training in adult abuse issues and use of associated policies and procedures to all staff with access to service users.

This is in order to comply with SSI 2002/114 Regulation 4(1)(a) - a requirement that all Providers shall make proper provision for the health and welfare of service users and 13(c) - a requirement to ensure that persons employed in the provision of the care service receive training to the work they are to perform.

Timescale: Within 6 months of receipt of this report.

**Recommendations**

1. A child protection policy for visiting children appropriate to the service should be developed and implemented.

NCS Housing Support Services Standard 3.1 & 3.2: Management and Staffing Arrangements.

2. The Provider will obtain and where necessary implement best practice guidance including: 'Rights Risks and Limits to Freedom' and 'Safe to Wander' - Mental Welfare Commission Best Practice Guidance.

NCS Housing Support Services:

**Rod Wood**

**Care Commission Officer**