

## **Care service inspection report**

# Motherwell Locality Support Service (Disability)

Support Service Without Care at Home

31 Fern Street Motherwell ML1 2AJ Telephone: 01698 274470

Inspected by: Alan Paterson Type of inspection: Unannounced Inspection completed on: 11 February 2013



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#### Service provided by:

North Lanarkshire Council

#### Service provider number:

SP2003000237

#### Care service number:

CS2007158157

#### Contact details for the inspector who inspected this service:

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## Summary

This report and grades represent our assessment of the quality of the areas of performance which were examined during this inspection.

Grades for this care service may change after this inspection following other regulatory activity. For example, if we have to take enforcement action to make the service improve, or if we investigate and agree with a complaint someone makes about the service.

#### We gave the service these grades

v of Care and Support	5	Very Good
uality of Environment	5	Very Good
Quality of Staffing	5	Very Good
ment and Leadership	5	Very Good

#### What the service does well

The service provides well planned and organised day activities for disabled people in the Motherwell area. Service Users are supported in setting up their own day services through making their own choices and preferences known.

## What the service could do better

The service would benefit from overhauling the personal folders which are used to collate information about the service user. These are cumbersome and it can be difficult to find information in them

### What the service has done since the last inspection

The service has continued to develop expertise in the planning and delivery of services to people with multiple needs. Whilst being mainly a service for adults with learning disabilities the service has been developing to offer services to meet the needs of a greater number of people with disabilities. This includes adults with complex medical needs and disabilities associated to them.

The service has also been becoming involved earlier in the service users life and been providing an input in the transitional period as the service user prepares to move between school and adult services.

## Conclusion

The service is very well organised and monitored. It has clear service standards and there are a number of strategies in place to monitor the maintenance of standards.

## Who did this inspection

Alan Paterson

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## 1 About the service we inspected

Motherwell Locality is an outcomes focussed service which aims to "support individuals to enable them to experience / participate in ordinary everyday activities of their choice. It will support people with disabilities to be as independent as possible. The service will be available at times when individuals and their carers need support and be responsive and flexible to changing needs. People will be supported by a team of staff who know them well and are familiar with their support".

It is based in the Motherwell area of North Lanarkshire. Service users are allocated hours of support in conjunction with assessment from social work services. Staff provides support to people to access social, leisure, training and employment opportunities in their own area.

The service was formerly registered with the Scottish Commission for the Regulation of Care (the 'Care Commission'). The Care Commission merged on 1 April 2011 with the Social Work Inspection Agency and the section of HMIE responsible for inspecting services to protect children, to form the new scrutiny body SCSWIS'

Based on the findings of this inspection this service has been awarded the following grades:

Quality of Care and Support - Grade 5 - Very Good Quality of Environment - Grade 5 - Very Good Quality of Staffing - Grade 5 - Very Good Quality of Management and Leadership - Grade 5 - Very Good

This report and grades represent our assessment of the quality of the areas of performance which were examined during this inspection.

Grades for this care service may change following other regulatory activity. You can find the most up-to-date grades for this service by visiting our website www.careinspectorate.com or by calling us on 0845 600 9527 or visiting one of our offices.

## 2 How we inspected this service

### The level of inspection we carried out

In this service we carried out a low intensity inspection. We carry out these inspections when we are satisfied that services are working hard to provide consistently high standards of care.

### What we did during the inspection

In the course of this inspection we:

spoke with service users, staff and service management examined service documentation observed staff interacting with service users examined returned Care Inspectorate Questionnaires

## Grading the service against quality themes and statements

We inspect and grade elements of care that we call 'quality themes'. For example, one of the quality themes we might look at is 'Quality of care and support'. Under each quality theme are 'quality statements' which describe what a service should be doing well for that theme. We grade how the service performs against the quality themes and statements.

Details of what we found are in Section 3: The inspection

## Inspection Focus Areas (IFAs)

In any year we may decide on specific aspects of care to focus on during our inspections. These are extra checks we make on top of all the normal ones we make during inspection. We do this to gather information about the quality of these aspects of care on a national basis. Where we have examined an inspection focus area we will clearly identify it under the relevant quality statement.

## Fire safety issues

We do not regulate fire safety. Local fire and rescue services are responsible for checking services. However, where significant fire safety issues become apparent, we will alert the relevant fire and rescue services so they may consider what action to take. You can find out more about care services' responsibilities for fire safety at www.firelawscotland.org

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

#### The requirement

The service must ensure that all care reviews are held a minimum of once in 6 months. This is in order to comply with SSI2011/5 - personal plans. Timescale 8 weeks from receipt of this report

#### What the service did to meet the requirement

The service were carrying out reviews in line with the required timescale.

#### The requirement is: Met

#### The annual return

Every year all care services must complete an 'annual return' form to make sure the information we hold is up to date. We also use annual returns to decide how we will inspect the service.

Annual Return Received: Yes - Electronic

#### **Comments on Self Assessment**

Every year all care services must complete a 'self assessment' form telling us how their service is performing. We check to make sure this assessment is accurate. we received a fully completed self assessment electronically. The assessment was informative and detailed.

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

The views are taken from the comments made on the returned Care Inspectorate Questionnaires.

I am happy with the service as it lets me get out and see people instead of being stuck in the house all the time.

#### Taking carers' views into account

"Have had problems with communication with allocated social worker in the past. Changes have been made and cannot fault communication now."

"This is a very costly service for the service users. They need money for a lunch every day as they do not have the option of taking a packed lunch due to the fact that there is nowhere suitable to consume it. Also there is the additional expense to make use of leisure facilities."

Although I recognise that staff provide a good service I am still of the opinion that for some service users with a learning disability a centre based service is more appropriate in meeting their needs.

My son has settled in well with this service. Enjoys all his outings/ activities and gets on well with all workers that he has been with. Very happy and he looks forward to the next week etc.

## 3 The inspection

We looked at how the service performs against the following quality themes and statements. Here are the details of what we found.

## Quality Theme 1: Quality of Care and Support

Grade awarded for this theme: 5 - Very Good

#### Statement 1

We ensure that service users and carers participate in assessing and improving the quality of the care and support provided by the service.

#### Service strengths

The service is provided by North Lanarkshire Council (NLC) Housing and Social Work department. The provider publishes a participation policy and operates quality systems and procedures across all of its services.

Service users and local communities are regularly asked to comment on how the local council provides its services though questionnaires and participation events. Results of consultation are published in local council service locations.

The service focuses on working in a service user centred manner and ensures that service users make informed choices about their services. Service Users are allocated a named worker who carries out an assessment and assists the service user to make decisions regarding what the service provides. A lot of the work carried out with the service users in the initial stages of contact was helping the service user to understand what choices were available and to make the choices.

Once decided upon, the service supports the service user to access and participate in the activities that the service user has chosen. The service supports service users to attend a large number of activities and operates under the principle that it will seek to meet any reasonable request made by a service user. Activities range from employment, transport to and from planned activities, support to participate in activities, arranging access to college, training to enhance the person's ability to be independent. and aspirational activities such as attending concerts and going on holidays.

## Inspection report continued

The service maintains an individual approach with each personal plan independent of others. Service Users attending activities together is the result of local community provision rather than as an intentional policy of the service. An example of this, we observed, were two service users who were attending a line dancing class. They were attending as individuals but that was the time and place where the line dancing was taking place.

The service works in partnership with a number of statutory and voluntary organisations to meet the needs of the service users which are diverse. These organisation provide a range of services from specialised input meet specific needs to advice and guidance in the formulation of the service users care plan.

We examined records and spoke with staff regarding working with carers. The service has a mandate to support carers involvement and has historically supported a carers group with premises, advise and guidance. Of late, this has been difficult to maintain as numbers have been dropping. Initially a third of carers attended regularly but this had dropped to two. The service continues make substantial effort to involve carers through questionnaires, a requirement that the service contacts each carer by telephone each week and maintaining a carer drop in service.

Because of maintaining carer involvement the service has managed to support carers and service users through some difficult changes.

The service users have an accessible personal plan which is produced as far as possible in a format that enables the person to understand the information held in it.

The service participates in and takes a lead role in reviewing the service provided to the service user. One very good piece of practice we discussed at the inspection and examples were available for inspection, was the use of audio visual and multi media approaches to help the service user present for themselves what they wanted out of the review.

We concluded that the service was very good in this aspect of the service.

#### Areas for improvement

The service should persevere with its efforts to maintain the carers group.

#### Grade awarded for this statement: 5 - Very Good

Number of requirements: 0

Number of recommendations: 0

#### Statement 3

We ensure that service users' health and wellbeing needs are met.

#### Service strengths

We found when examining the personal plans that the service was conscientious in ensuring that the health and wellbeing needs of the service user were met in the service that was provided.

The service caters for service users which present a diverse range of needs. The needs were identified through the assessment process where the service linked to the appropriate specialist services to contribute to the assessment and give guidance and support to the personal plan.

Examples of this were:

- health needs met by links to the Community Learning Disabilities Team, part of which was based in service base, which enabled the service to access dietician, specialist medical personnel, occupation and physiotherapy support and specialist nursing services
- Psychiatric services through community psychiatric services
- Voluntary organisations who provided support and expertise in one dedicated area of disability for example; autism and sensory impairment.
- Local social work services.

We examined review recordings and noted that these services were called upon to contribute to the review meetings and their contribution recorded.

The service carries out risk assessments on the areas where it supports service users to attend. These assess the accommodation against the service users individual needs and ensure that any facilities such as access or personal care are available for the service user. These are updated on a regular basis. Service coordinators make regular unannounced visits to service locations when service users are receiving support to ensure that the location and the support meets the service standards.

If the service user needs support with medication including rescue medication for epilepsy it is recorded in the service users personal plan and an action plan prepared. Staff receive training in the administration and recording of medication.

The service follows the provider's incident and accident procedures and these produce documentation which show that any incidents or accidents are investigated and action taken to minimise the accident or incident being repeated.

#### Areas for improvement

We noted that the service appropriately gathered information from a large number of sources. However the format in which the service collated the information resulted in

a large and unwieldy file in which it was difficult to find individual pieces of information.

The size of the file, a lot of which came from storing updates of essentially the same information by putting in place a rigorous archiving procedure. Other considerations are ensuring that the authors of reports are identified, their connection to the information clearly stated and the date the information was supplied noted. This will ensure that the information's importance and relevance is clear.

The practice of making handwritten notes on reports should be discouraged and if necessary the note must be signed and dated. This prevents information from being misinterpreted.

#### Grade awarded for this statement: 5 - Very Good

Number of requirements: 0

#### Number of recommendations: 1

#### Recommendations

1. The service should examine its practices in terms of collating information in service users personal file with a view to limiting the size of the file and making the information in it easier to access.

National Care Standards 1 Support Services - Informing and Deciding

### **Quality Theme 2: Quality of Environment**

Grade awarded for this theme: 5 - Very Good

#### Statement 1

We ensure that service users and carers participate in assessing and improving the quality of the environment within the service.

#### Service strengths

please see the comments made in section 1.1 in the context of environment

#### Areas for improvement

please see above

#### Grade awarded for this statement: 5 - Very Good

Number of requirements: 0

Number of recommendations: 0

#### Statement 2

We make sure that the environment is safe and service users are protected.

#### Service strengths

The service provides its services in the local community and maintains a staff base in the local community. Service users would only come to the service base in order to attend a review, meeting or very rarely in a situation where there was no alternative but to use the base.

The base has well appointed meeting rooms, access to internet and audio visual aids to enable people with specific sensory needs to participate in meetings. Carers can

The base is also identified as an area where people can go to use personal care facilities. This facility is separated from the base unit by a locked door.

We visited the staff base in the course of the inspection and viewed the premises.

#### Areas for improvement

On the day of inspection the personal care area was quite cold. This should be monitored and kept to temperature.

## Inspection report continued

Grade awarded for this statement: 5 - Very Good

Number of requirements: 0

Number of recommendations: 0

## Quality Theme 3: Quality of Staffing

Grade awarded for this theme: 5 - Very Good

#### Statement 1

We ensure that service users and carers participate in assessing and improving the quality of staffing in the service.

#### Service strengths

please see the comments made in section 1.1. in the context of staffing

#### Areas for improvement

please see above

#### Grade awarded for this statement: 5 - Very Good

Number of requirements: 0

Number of recommendations: 0

#### Statement 3

We have a professional, trained and motivated workforce which operates to National Care Standards, legislation and best practice.

#### Service strengths

The service, as part of NLC Housing and Social Work Department recruitment to the service is managed by the provider's Human Resources department who manage recruitment and retention across the provider's services. NLC have a strict recruitment policy which follows best practice in ensuring safe recruitment and that staff have the opportunity to attain qualifications required for registration with the Scottish Social Services Council (SSSC).

This includes

Vacancies advertised internally and externally

Short leeting through objective matching to essential and desirable qualifications, skills and attributes

Competitive interview

References from previous employers sought

Protection of Vulnerable group checks made before taking up post

When in post workers undergo a induction period and have regular appraisal. In discussion with the service manager and staff we found that individual supervision was carried out. Staff have personal development records and access to employer

supported training.

Staff spoken with were knowledgeable and had considerable experience in this area of work. We saw records of staff attendance at training events. Regular staff meetings took place.

At the time of inspection all staff held or were working towards a qualification which enabled them to register wit the SSSC.

Staff meetings were held regularly and there were regular staff development days.

We concluded that the service was very good in this aspect of the inspection.

#### Areas for improvement

The service should continue to maintain its strong focus in maintaining a confident and well trained staff group.

#### Grade awarded for this statement: 5 - Very Good

Number of requirements: 0

Number of recommendations: 0

### Quality Theme 4: Quality of Management and Leadership

Grade awarded for this theme: 5 - Very Good

#### Statement 1

We ensure that service users and carers participate in assessing and improving the quality of the management and leadership of the service.

#### Service strengths

Please see comments made in section 1.1 in the context of management and leadership

#### Areas for improvement

please see above

#### Grade awarded for this statement: 5 - Very Good

Number of requirements: 0

#### Number of recommendations: 0

#### Statement 4

We use quality assurance systems and processes which involve service users, carers, staff and stakeholders to assess the quality of service we provide

#### Service strengths

We concluded that the service was excellent in this aspect of the inspection. The service constantly seeks information about its activities which it uses to evaluate and improve the service. This can be seen at three levels of service provision.

At provider level NLC has published its policy and procedures regarding participation in quality enhancement for its services. This is based on the participation of service users, local communities and staff contributing to the evaluation and improvement of services. NLC does this through questionnaires, public consultation and allocating substantial resources to continuous improvement activities in its service provision. At area level there is an established quality improvement group which monitors all of the local services' work. In addition to dedicated workers, representatives from all of the providers similar services contribute to the work of the quality group. The service provides reports on its operations for discussion at quality groups. The quality group meetings, minutes were available at inspection, evaluates services and standardisation of good practice. There is also a system of peer review in place between the similar services under the provider.

At the service level the service hold regular staff meetings and development days to discuss issues regarding the service. This includes developing practice and knowledge to meet complex needs that service users present.

Service users are central to the quality management process and their views are paramount n the planning of the services and as such are continually consulted regarding their views on the service they receive. All personal plans are reviewed a minimum of twice annually with consultation of service users, carers, staff and other stakeholders as appropriate contributing the review meeting.

We saw and discussed examples of how the the service users with communication difficulties are helped to state their views through the use of audio or video presentations at reviews.

Carers are included in evaluating the service through contact with the service. This is carried out through questionnaires, a carers group which meets regularly, a carer's drop in service, monthly contact from service staff and consultation and representation at reviews.

We concluded that the service was excellent in this aspect of the inspection with quality management aimed at continuous improvement being included in most levels of the service's activities.

#### Areas for improvement

The service should continue to develop its continual improvement agenda.

Grade awarded for this statement: 6 - Excellent

Number of requirements: 0

Number of recommendations: 0

## 4 Other information

## Complaints

No complaints have been upheld, or partially upheld, since the last inspection.

## Enforcements

We have taken no enforcement action against this care service since the last inspection.

## Additional Information

## Action Plan

Failure to submit an appropriate action plan within the required timescale, including any agreed extension, where requirements and recommendations have been made, will result in SCSWIS re-grading the Quality Statement within the Management and Leadership Theme as unsatisfactory (1). This will result in the Quality Theme for Management and Leadership being re-graded as Unsatisfactory (1).

## 5 Summary of grades

Quality of Care and Support - 5 - Very Good			
Statement 1	5 - Very Good		
Statement 3	5 - Very Good		
Quality of Environment - 5 - Very Good			
Statement 1	5 - Very Good		
Statement 2	5 - Very Good		
Quality of Staffing - 5 - Very Good			
Statement 1	5 - Very Good		
Statement 3	5 - Very Good		
Quality of Management and Leadership - 5 - Very Good			
Statement 1	5 - Very Good		
Statement 4	6 - Excellent		

## 6 Inspection and grading history

Date	Туре	Gradings	
26 Jan 2012	Unannounced	Care and support Environment Staffing Management and Leadership	5 - Very Good Not Assessed 5 - Very Good Not Assessed
21 Dec 2010	Announced	Care and support Environment Staffing Management and Leadership	5 - Very Good Not Assessed Not Assessed Not Assessed
12 Oct 2009	Announced	Care and support Environment Staffing Management and Leadership	5 - Very Good 5 - Very Good 4 - Good 4 - Good

## Inspection report continued

11 Sep 2008	Announced	Care and support Environment Staffing Management and Leadership	4 - Good 4 - Good 4 - Good 4 - Good

All inspections and grades before 1 April 2011 are those reported by the former regulator of care services, the Care Commission.

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- ای بایتسد می مونابز رگید روا مولکش رگید رپ شرازگ تعاشا می

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