

Care service inspection report

Inverclyde Association for Mental Health Housing Support Unit

Housing Support Service

Lynedoch House 4 Lynedoch Street Greenock PA15 4AA Telephone: 01475 729 196

Type of inspection: Unannounced Inspection completed on: 19 November 2014



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Service provided by:

Inverclyde Association For Mental Health

Service provider number:

SP2003000217

Care service number:

CS2003053703

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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

Quality of Care and Support5Very GoodQuality of Staffing5Very GoodQuality of Management and Leadership5Very Good

What the service does well

We found that the manager and staff are well equipped to work with a wide range of clients. We decided this after reading support files and talking to clients:

"I don't know where I would be without them." "Always have time for a chat." "My life is on track now." "Getting their support was the best thing ever." "Top notch."

We saw that service has established very good links with the local community and that people are supported to choose what they want to do, for example: maintain a home, have a family life and learn new skills.

We saw that staff responded well to people's changing and developing needs and wishes.

What the service could do better

During the inspection staff said they will continue to seek clients' views about the service.

What the service has done since the last inspection

Inverclyde Association for Mental Health (IAMH) has been awarded the local "Health and Care Award 2014" for the work it does to support people move from residential care to living in their own accommodation. Much of this is due to the integration of Lyndoch House and IAMH Housing Support service.

Conclusion

When speaking with staff and observing practice it was evident that they were committed to making sure that the service meets people's expectations and needs.

We thought that clients were very confident about exercising choice, and that they were provided with individualised care and support.

By providing a range of support staff help people live in their own home as independently and healthily as they can.

1 About the service we inspected

The Care Inspectorate regulates care services in Scotland. Information about all care services is available on our website at www.careinspectorate.com.

This care service was previously registered with the care commission and transferred its registration to the care inspectorate on to 1 April 2011.

Requirements and Recommendations If we are concerned about some aspect of a service, or think it could do more to improve its service, we may make a recommendation or requirement.

- A recommendation is a statement that sets out actions the care service provider should take to improve or develop the quality of the service but where failure to do so will not directly result in enforcement.

- A requirement is a statement which sets out what is required of a care service to comply with the Public Services Reforms (Scotland) Act 2010 and Regulations or Orders made under the Act, or a condition of registration. Where there are breaches of the Regulations, Orders or conditions, a requirement must be made. Requirements are legally enforceable at the discretion of the Inspectorate.

Inverclyde Association for Mental Health (the service) provides a housing support service to people living in Inverclyde.

Client's receive support that is designed to meet their individual needs and wishes.

The service aims to support adults with mental health issues by "maximizing their potential to realise their goals in life, enabling service users to maintain and improve their mental health."

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 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

This report was written following an unannounced inspection on 19 November 2014.

During this inspection information was gathered from a number of sources including:

We spoke at length with:

The manager, deputy manager, key/associate workers, a representative of the Community Mental Health Team and four clients (of which two were in their own home).

We looked at:

ïve support files.
Review minutes.
Daily notes.
lanagement audits.
our staff files.
Quality Assurance Questionnaires.
communication Quality Assurance Questionnaires and Action Plan
Quality Assurance audit.
lewsletter.
eam meeting minutes.
leven clients/family Care Standard Questionnaires.

All of the above information was taken into account during the inspection process and reported on.

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

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.

The care inspectorate received a fully completed self assessment document from the manager. We were satisfied with the way this had been completed.

The manager identified what she thought the service did well, some areas for development and any planned changes.

Taking the views of people using the care service into account

Care Standard Questionnaires returned by clients noted a high level of satisfaction with the service.

Clients spoken with said they are happy with the service. Please read the report for their comments.

Taking carers' views into account

We did not have the opportunity to talk with relatives during this inspection.

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

At this inspection we: spoke with the manager, deputy manager, staff, a representative from the Community Mental Health Team, clients and read support files, review minutes, monthly summary notes and the services news letter. We decided that the service consulted and encouraged participation very effectively and was operating to a very good standard.

When we were in the service and visiting clients in their own home we saw people having a relaxed and comfortable relationship with staff. The latter were respectful and attentive, making people feel relaxed and at ease.

Clients were keen to take part in the inspection and were complementary about the staff and service. They said that they felt involved in their support and that they were listened to by staff and management:

"Staff listen to me and will try to change my support when I ask." "They help me feel in control of things." "Staff are a great bunch."

The service's participation strategy describes how information is shared and consultation carried out, for example: by using satisfaction questionnaires, inviting clients to the service's Annual General Meetings and regular 1:1 meetings between the client and their Key/Associate Worker. Reviews and 1:1 meetings are used to discuss the service and check that people are satisfied with their support.

Questionnaires give clients the opportunity to comment on the general service and

Inspection report continued

staff communication and friendliness. Returned questionnaires are analysed, with the results being made available to clients and relatives. We saw that action plans noted who was responsible for action and by when. By doing this people are given information about the service, its strengths and areas of development.

The service's newsletter contains a range of information such as staff changes and details of developments. By doing this the organisation keeps clients informed and encourages people to feel involved in the service.

During this inspection we found that the service has a positive impact on client's lives. We saw that people are encouraged to build on home making skills and plan for an independent future:

"It's the best thing to happen to me." "Now have my own home." "Knowing I can drop in at any time gives me stability and someone to talk to."

Areas for improvement

The manager should consider involving residents when completing the service's Care Inspectorate self assessment.

Grade awarded for this statement: 5 - Very Good

Number of requirements: 0

Statement 3

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

Service strengths

After speaking to clients and staff and looking at support plans, risk assessments and review minutes we concluded that the performance of the service was very good for this statement.

We found that the service has an experienced, friendly and respectful staff group who work to support, maintain and improve clients' health and wellbeing. It was evident that they worked well as a team, had a positive attitude and were aware of each client's personality and support needs.

The service supports clients, some of whom will have been living in Lyndoch House with which the service shares staff, management and policies, to obtain and maintain their own home. IAMH does this by supporting people to address mental health issues, attend appointments, keep active and be part of the community. We evidenced, by talking to clients and reading support files and daily notes, that people's independence is encouraged whilst attention is paid to their health and wellbeing.

To make sure that clients get as much benefit from the service as they can they decide who will provide their support. If a client asks for a change in key/associate worker this is accommodated. Clients said that this helped them feel comfortable with their support as the personal relationship played an important part in their mental health and wellbeing:

"It's important to get on with your support team."

"I know they're staff but they feel more like friends."

"We get on well."

"I speak to my key worker at any time."

"My team keeps in touch to make sure everything is alright."

We read four support files and saw that they were reviewed and updated every month, clearly written, easy to follow and contained a range of information about the individual's daily routines, healthcare assessments and risk assessments.

To make sure that staff deliver a seamless service daily notes and support communication sheets are completed. These support information sharing and consistency of support.

Plans showed strong focus on positive outcomes with clients being supported to be involved in developing their support and building and maintaining relationships, shopping, paying bills, house work and attending appointments. Reviews are used to make sure that clients' needs are identified, if the service is meeting these and if any changes are necessary. Clients said that reviews gave them an opportunity to talk about the service and that this helped and encouraged them to feel involved.

Support plans show that the service has good relationships with health and social care professionals, such as: Community Mental Health Team, Community Psychiatric Nurses, care managers and GPs. Plans showed that their advice was recorded and a risk assessment written as required.

Areas for improvement

The service should continue to ensure that it is person centred in all of its activities and able to offer a quality housing support service.

Grade awarded for this statement: 5 - Very Good

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Number of requirements: 0
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Number of recommendations: 0
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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

The service was found to be operating at a very good level for this Quality Statement.

When staff are recruited those using the service can be involved when a member of their support team are recruited.

Areas for improvement

Please read Quality Statement 1, Theme 1 of this report.

Grade awarded for this statement: 5 - Very Good

Number of requirements: 0

Statement 3

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

Service strengths

After speaking to clients, staff and looking at training records, team meeting minutes and supervision diary we concluded that staff are professional, trained and motivated. The performance of the service was very good for this statement.

We found staff to be motivated, respectful and experienced. The outcome of this was that clients had the advantage of being supported by staff who know them well and could spot any small changes that could have an impact on their health and support needs. The staff had worked with many of the client's in Lyndoch House prior to their move into their own tenancy.

Staff said that Inverclyde Association for Mental Health had a transparent, supportive and open culture and that they are encouraged to identify their own training needs and expertise:

"Training is very good." "We always get training if it's needed." "Really strong management." "We always support each other." "Very open and honest."

Staff receive regular supervision and a wide range of training such as induction, suicide prevention, drug and alcohol addictions, welfare reform, dementia, adult protection and Scottish Vocational Qualifications in Social Care (levels 3 and 4). All support staff have SVQ3 qualifications. Staff spoke highly of the organisation's training programme much of which is written and delivered by a lecturer from the University of the West of Scotland.

To make sure that staff continue to maintain good practice they have regular supervision and yearly appraisal sessions. A range of matters are discussed at supervision such as client support needs, service developments and staff practice. Clients are consulted during staff supervision and their opinions are recorded.

Areas for improvement

The service should continue to encourage staff at all levels to develop their professional skills mix.

Grade awarded for this statement: 5 - Very Good

Number of requirements: 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

At this inspection we found that the performance of the service was very good for this statement.

We saw that clients and their relatives play a key part in helping the service to develop.

Areas for improvement

Please read Quality Statement 1, Theme 1 of this report.

Grade awarded for this statement: 5 - Very Good

Number of requirements: 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

After speaking to clients, staff and looking at a range of quality assurance paperwork and audits we found that people are always asked for their views and opinions, with their comments being listened to, concluding that the performance of the service was very good for this statement.

Inverclyde Association for Mental Health (IAMH) has been awarded the local "Health and Care Award 2014" for the work it does to support people move from residential care to living in their own accommodation. Much of this is due to the integration of Lyndoch House and IAMH Housing Support service.

The manager told us how IAMH monitors and evaluates performance by: meetings with people, using satisfaction questionnaires, fortnightly audits of support plans and liaison meetings with the local authority. As part of its quality assurance process the service uses PQASSO (Practical Quality Assurance System for Small Organisations). This is an award scheme which the service is currently working towards.

When we looked at fortnightly support plan audits we saw that these showed a high compliance with the service's expectations and that any omissions or oversights were quickly identified. The manager was considering reducing the frequency of these audits, which given the historical date gathered and high compliance rate, was an appropriate step to take.

Clients said that they knew about the service's complaints procedure and that they would use it if needed. People said that any concerns they had raised had been attended to quickly and resolved to their satisfaction.

The manager submits Annual Returns, Self Evaluations, Notifications and Action Plans as expected.

Areas for improvement

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

Grade awarded for this statement: 5 - Very Good

Number of requirements: 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 the Care Inspectorate re-grading a Quality Statement within the Quality of Management and Leadership Theme (or for childminders, Quality of Staffing Theme) as unsatisfactory (1). This will result in the Quality Theme 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 Staffing - 5 - Very Good				
Statement 1	5 - Very Good			
atement 3 5 - Very Good				
Quality of Management and Leadership - 5 - Very Good				
Statement 1	5 - Very Good			
Statement 4	5 - Very Good			

6 Inspection and grading history

Date	Туре	Gradings	
19 Apr 2013	Unannounced	Care and support Staffing Management and Leadership	5 - Very Good 5 - Very Good 5 - Very Good
20 May 2011	Unannounced	Care and support Staffing Management and Leadership	4 - Good 4 - Good 4 - Good
23 Oct 2008	Announced	Care and support Staffing Management and Leadership	5 - Very Good 5 - Very Good 5 - Very 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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