

Hayfield Care at Home Services Housing Support Service

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Type of inspection: Unannounced
Inspection completed on: 19 July 2016

Service provided by:
Hayfield Support Services with Deaf
People

Service provider number:
SP2004006901

Care service number:
CS2010273746

About the service

Hayfield Care at Home Services is a combined housing support and care at home service for deaf adults with additional difficulties, including mental health issues, learning disabilities and physical disabilities living in their own homes. Most people using the service live within a modern apartment block in the East End of Glasgow. The service was previously registered with the Care Commission and transferred its registration to the Care Inspectorate on 1 April 2011.

Support offered to service users reflects their particular needs and can be flexible. There is always a staff member available. All of the service users' flats have been specially adapted to provide visual alarms and communication.

Service users are called tenants and so we have used both of these terms in our report.

The aims and objectives of the service are "all about stimulating personal independence helping individuals to fulfil their potential to communicate and interact. To develop the social and domestic skills they need to live a more active, self reliant, happy and independent way of life."

What people told us

Prior to the inspection, we sent out nine care standard questionnaires and received four completed ones back. All four gave a good impression of the service. During this inspection, we spoke with seven of the 10 people currently using the service. They all said they were very happy with the quality of the service. They told us that staff were good at communicating with them through sign language and that staff treated them with respect. All seven confirmed that they felt comfortable speaking to someone in the staff or management team if they had any problems. In addition, we shadowed a staff member as he supported five tenants in their flats and we observed warm and enabling interactions.

Self assessment

The Care Inspectorate received a fully completed self-assessment from the provider.

The provider identified what it thought the service did well, areas for improvement and any changes that were planned. The self-assessment clearly identified some key areas that the provider believed could be improved and showed how the service intended to do this. The provider told us how the people who used the care service had taken part in the self-assessment process and the outcomes they experienced from receiving the service. We asked the manager to better evidence staff's contributions and involvement in future self-assessment submissions.

From this inspection we graded this service as:

Quality of care and support	5 - Very Good
Quality of staffing	not assessed
Quality of management and leadership	5 - Very Good

What the service does well

We found that the service was performing very well in terms of the quality of care and support it provided to residents and the way in which it was managed and led.

The service was delivered in a person centred way. For example, this was evident in the comprehensive way each tenant's progress with achieving desired outcomes was reviewed. We found examples of how the service had made a positive difference to service users' health and well-being.

Tenants' participation in planning and evaluating their own support, and the delivery of the service overall, was actively encouraged. This included planning a holiday abroad, recruiting new staff and offering feedback on staff's work performance.

Some tenants, with staff support, could potentially manage their own medication. The provider was assessing the level of support each person needed in this area and we await the outcome of this process.

Staff spoken with were clear about the services' safeguarding policies and their role in adult protection. They described an open culture where supportive managers were easy to talk to.

We found a well-balanced approach to ensuring that tenants experienced good outcomes and that appropriate standards of support were met. Complaints were taken seriously and thoroughly investigated.

What the service could do better

The layout and use of Incident and accident records could be improved (See Recommendation 1).

Since the last inspection, the team had discussed Scotland's latest learning disability strategy, the 'Keys to Life'. This strategy takes a human rights approach and has recommendations for improving care for people with learning disabilities. However, staff spoken with acknowledged that they would benefit from more opportunity to discuss Keys to Life. Overall, There remained scope to provide more learning and development discussion at team meetings related to values, culture and good practice guidance.

The manager acknowledged that the recording and distribution of meeting minutes in a timely fashion remained an area for improvement.

Individual staff appraisals were informed by service user feedback. We saw the merit in extending this consultation to include peer feedback by team colleagues as well.

The service was well placed to make further progress in developing leadership roles and providing leadership training for frontline staff. Given that much of the service was delivered by staff working alone, we discussed with the manager introducing formal staff observations as part of the quality assurance process.

Previous recommendations in respect of devising a written service improvement plan and involving all stakeholders in quality assurance are repeated in this report (See Recommendations 2 and 3)

Requirements

Number of requirements: 0

Recommendations

Number of recommendations: 3

1. Completed Incident and accident records should include management investigation/overview, be signed off by a member of management and indicate actions taken and/or lessons learnt.

National Care Standards (NCS) 4 Care at Home - Management and Staffing

2. To drive forward continuous improvement the manager should develop a service improvement plan involving stakeholders and the product of a whole team effort, which can be regularly discussed and updated.

NCS 4 Care at Home - Management and Staffing and NCS 11 Care at Home - Expressing Your Views.

3. The manager should continue to seek better ways to receive and retain the comments of care managers, health professionals and other relevant stakeholders on the quality of the service provided.

NCS 11 Care at Home - Expressing Your Views

Complaints

There have been no complaints upheld since the last inspection. Details of any older upheld complaints are published at www.careinspectorate.com.

Inspection and grading history

Date	Type	Gradings	
17 Jul 2015	Unannounced	Care and support	5 - Very good
		Environment	Not assessed
		Staffing	5 - Very good
		Management and leadership	4 - Good
17 Jul 2014	Unannounced	Care and support	5 - Very good
		Environment	Not assessed
		Staffing	5 - Very good
		Management and leadership	4 - Good
21 Aug 2013	Unannounced	Care and support	5 - Very good
		Environment	Not assessed
		Staffing	4 - Good

Date	Type	Gradings	
		Management and leadership	4 - Good
17 Oct 2012	Unannounced	Care and support Environment Staffing Management and leadership	5 - Very good Not assessed 5 - Very good 5 - Very good
7 Jun 2011	Unannounced	Care and support Environment Staffing Management and leadership	5 - Very good Not assessed 5 - Very good 5 - Very good

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