

Hansel Community Support Services - East Ayrshire Support Service

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Kilmarnock
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Type of inspection: Announced (short notice)
Inspection completed on: 11 January 2017

Service provided by:
Hansel Alliance

Service provider number:
SP2003000261

Care service number:
CS2004073922

About the service

Hansel Community Support Services - East Ayrshire was registered on April 2011 to provide support services to adults with learning disabilities in their own homes and in the community. Staff support will be individualised and specified in the service users' support plans. Staff support will be available over a 24 hour period.

At the time of the inspection the service was supporting 90 people within the East Ayrshire area. The service operates from an office base in the town centre of Kilmarnock, this serves as a good contact point for service users and carers alike. During the inspection we saw both staff and service users pop into the service.

What people told us

Prior to the inspection we sent the service twenty care standard questionnaires and asked them to distribute them to the people who use the service and their families. Eleven questionnaires were completed and returned. During the inspection we visited four people who use the service in their own homes and spoke with them and their parents. We also met with three service users who came into the office during the inspection.

Comments we received included:

"They work very flexible hours to suit our needs and the carers are close to my son's age."

"All support workers' pay me respect."

"They all know I have epilepsy and keep an eye open for me when we're out and about."

"Delighted with the support provided to our son. All workers are very committed and take the time to get to know him."

"Communication is great, they are always open to listen and also make suggestions."

"As a result of the support our son has really grown in confidence."

"Would highly recommend Hansel to others."

"They always try to match up the staff that support me. I like them having the same interests."

"They make time for me in the office, they are good with their open door."

"They always ask me what I would like to do."

"They always phone if someone isn't going to be on time."

"They do things when you ask them to."

"They can be bad at phoning the worker while they are giving support."

Self assessment

The Care Inspectorate received a fully completed self-assessment. The management team identified what they thought the service did well and gave some examples of improvements in x and y areas. There is room to improve the self-assessment by including more examples of outcomes for service users which highlight the strengths of the service. This was done well in some places but not consistently throughout the assessment.

It may help the management to further improve their self-assessment if they consider the advice within the booklets; "Meaningful and Measurable - Recording Outcomes in Support Planning and Review," and "Personal Outcomes - learning from the meaningful and measurable project," by Emma Miller and Karen Barrie of the Scottish Government's Joint Improvement Team.

From this inspection we graded this service as:

Quality of care and support	4 - Good
Quality of staffing	not assessed
Quality of management and leadership	4 - Good

What the service does well

We were shown evidence of positive outcomes for people as a result of the support that people had received. Such as people becoming more independent in regards to using public transport which had increased their involvement in their local community and also trying new things.

People told us that they are treated with respect and were confident that the staff understood what their needs were and what was important to them. People are supported by a staff group who are on the whole experienced, are given good training and support to do their jobs. Staff we spoke with came across as knowledgeable about the people that they support.

We saw really good engagement between staff and the people they support. Service users and families that we spoke with said that they had built up good relationships with staff and that they felt listened to and had some control over how they wanted to be supported.

We spoke with professionals who were external to the service but who regularly work with the service. They were positive about the quality of the service which is provided. They were confident that the service works well with them to help improve outcomes for the people they support.

What the service could do better

The management team should consider best practice guidance when reviewing how successfully they have implemented a personalisation agenda. For example "You can do it," a DVD made by the Scottish Consortium for Learning Disabilities or Helen's Sanderson's guidance booklet, "Progress for Providers."

The provider should source outcome focused training for staff to support them to continue to develop support plans for service users. (See recommendation two under this statement.)

The provider does not have a policy for how it will ensure the quality of the service.

The provider should rectify this and create a policy which will monitor the frequency of supervisions, care plan reviews, medication and finance audits etc. The manager should be using this to ensure that team leaders and support workers are performing well and the provider in turn should use this to monitor the manager's performance. (See recommendation three under this statement.)

While the service has produced a continuous improvement plan the plan should be reviewed to ensure that the service is on target to achieve the planned improvements. Currently the service is not on target to meet this plan and if the provider reviewed the plan it could take remedial action to get back on track towards meeting the improvements. (See recommendation four under this statement.)

Requirements

Number of requirements: 0

Recommendations

Number of recommendations: 4

1. The provider should use a recognised tool to assess how successful their participation strategies have been.

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2. The provider should arrange for staff who are developing outcome focused care plans to undergo appropriate training using best practice guidance such as: "Talking Points," "Meaningful and Measurable - Recording Outcomes in Support Planning and Review," and "Personal Outcomes - learning from the meaningful and measurable project," by Emma Miller and Karen Barrie of the Scottish Government's Joint Improvement Team.

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3. The provider should create a quality assurance policy which monitors amongst other things how frequently; care reviews, supervisions, appraisals, medication / finance / health and safety checks take place. Where the frequency falls below the expected level the provider should be proactive in addressing this.

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4. The provider should carry out a review of the service's continuous development plan and offer support where the plan is not on target to be met.

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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	
30 Mar 2016	Unannounced	Care and support	4 - Good
		Environment	Not assessed
		Staffing	4 - Good
		Management and leadership	4 - Good
13 Aug 2014	Unannounced	Care and support	5 - Very good
		Environment	Not assessed
		Staffing	5 - Very good
		Management and leadership	5 - Very good
30 Oct 2013	Unannounced	Care and support	5 - Very good
		Environment	Not assessed
		Staffing	5 - Very good
		Management and leadership	6 - Excellent
18 Jan 2013	Unannounced	Care and support	5 - Very good
		Environment	Not assessed
		Staffing	5 - Very good
		Management and leadership	5 - Very good
26 Oct 2010	Announced	Care and support	5 - Very good
		Environment	Not assessed
		Staffing	Not assessed
		Management and leadership	Not assessed
23 Feb 2010	Announced	Care and support	5 - Very good
		Environment	Not assessed

Date	Type	Gradings	
		Staffing Management and leadership	5 - Very good Not assessed
26 Feb 2009	Announced	Care and support Environment Staffing Management and leadership	5 - Very good Not assessed 5 - Very good 4 - Good

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