

Bellshill Locality Support Service

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Type of inspection: Unannounced
Inspection completed on: 3 May 2017

Service provided by:
North Lanarkshire Council

Service provider number:
SP2003000237

Care service number:
CS2003001210

About the service

Bellshill Locality Support Services (Disabilities) aims to promote social inclusion. The provider is North Lanarkshire Council. The service supports individuals with a wide range of needs in their own communities, on a day basis, to achieve their life goals and ambitions. The service has moved from being activity based to being person centred.

What people told us

Two service users we met together told us:

"We have good relationships with staff:"

"I get support for my new tenancy. They help me fill in forms. 'A' (staff) is really good."

"They took me under their wing when my parent died."

"X' (staff) is annoying and winds me up."

We reported that comment to management.

It was clear from our discussion that one of the ladies had very strong support to apply for and move into a new tenancy. Specialist support from a charity had also been organised. This was much appreciated by both the service user and her relative whom we also spoke with.

We also met with a service user who told us he was "over the moon" with the service he received. The staff, he said, treated him with "great respect" and he likewise had "great respect" for them. One staff member accompanied him to a gardening club which he enjoyed.

We met with a relative of a service user. She was full of praise for the service. She said her relative was "thriving" with the support of the service. She commented that "support has been unbelievable." "They set up a detailed plan for the first few weeks in the new flat." She was taken aback at how independent her relative was compared with when she had lived with her parent. She had not realised what her relative was capable of in terms of self care and making tea etc.

We looked at comments from our own questionnaires, from a recent carer/service user consultation evening (attended by 13 people) and at some feedback the service had obtained in 2015.

Comments included:

"Our son has made significant progress towards independence."

"I like my carers."

"I am happy the carers are helping to support me."

"I like the support to go shopping, bowling and to the park."

At the inspection feedback we encouraged the service to continue to have regular user and carer consultations and to keep detailed records of the outcomes, using these to improve the service provision.

Self assessment

We did not ask services to provide a self assessment this year.

From this inspection we graded this service as:

Quality of care and support	5 - Very Good
Quality of environment	not assessed
Quality of staffing	not assessed
Quality of management and leadership	4 - Good

Quality of care and support

Findings from the inspection

Feedback from service users and carers was very strong.

Service users could let senior staff know about their views on the service and of staff at their reviews.

There had been no complaints to the Care Inspectorate over the past three years.

There had been two 'councillor enquiries'. That means issues of concern that people had taken directly to their local North Lanarkshire councillor. One of these enquiries had been resolved positively. The outcome of the other was not known to local management. We advised it would be helpful if the Council always provided the manager with feedback on the outcomes of these enquiries.

We saw two compliments to the service, both from 2016. One carer had called to say they "couldn't praise the service highly enough." The other was from a fellow professional out with the service who had observed compassion, patience, positive interaction and promoting inclusion from a member of Bellshill Locality staff and wanted to let the service know.

We concluded that staff's direct work with service users deserved praise.

There were now three small teams including a transition team whose work included supporting young people moving on from school. Staff were very enthusiastic that this way of organising service delivery offered better outcomes for people.

There was joint work with schools including travel assessments. These are ways of working out how people can become more independent in getting around.

We noted that staff were not to use their cars when supporting service users in the community and that would be monitored by management. Although we did not see evidence of monitoring, this was potentially good practice, ensuring people were assisted to use public transport and walking.

Areas for improvement:

There was confusion over what records about service users were to be kept in paper files and what on computer. Managers and staff needed clarity and consistency about this. This confusion and inconsistency may mean service users not seeing all their records promptly when they request this. We have made a recommendation about consistency of recording.

The standard of completing risk assessments, support plans and chronologies was not of a high enough standard. Chronologies are detailed lists of what has happened in a person's life and when. Also, not everyone had regular reviews. We thought managers needed to have more knowledge and oversight about how well this work was being done by staff. We have made a requirement about this.

We spoke with managers about a service user who had dementia. We found that staff working with her had not been supported by their supervisor to find out about the particular type of dementia the service user had and what that might mean to best support the person and their family. Staff knowledge about complex conditions people have is essential to be able to assist them well from the beginning. This was accepted at feedback.

Requirements

Number of requirements: 1

1. The provider must ensure that all service user risk assessments, support plans and reviews are up to date, comprehensive and recorded according to the provider's own policies and procedures.

This is to comply with the Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011, 210, 4 (1) (a)

Timescale: by 31 August 2017

Recommendations

Number of recommendations: 1

1. The provider should ensure that records about service users are up to date, comprehensive and kept consistently according to clear policies and procedures both corporate and local. The service should be in a position to give service users or their representatives access to their full, accurate, up to date records promptly on request.

Support Services National Care Standard 2 'Management and Staffing Arrangements.'

Grade: 5 - very good

Quality of environment

This quality theme was not assessed.

Quality of staffing

This quality theme was not assessed.

Quality of management and leadership

Findings from the inspection

Front line staff morale was high. This was particularly impressive given the amount of change the service told us they had experienced over recent years.

Staff praised the team leaders and the manager, one saying the manager was "inspirational, forward thinking and supportive." Staff were happy with the new small teams, saying they were improving outcomes for service users.

There had been much support to staff to 'help them with the journey' to new ways of working e.g. being person centred. The manager was open about challenges in doing this.

There was regular supervision, training and team development meetings.

There were suitable service aims and objectives although it was already a service priority to improve these.

Areas for improvement:

There had been no newsletter to service users for a long time. These are a good way of connecting and encouraging involvement.

In our last inspection which was in 2014, we suggested meaningful involvement of users and carers in recruitment. This had not happened. We were advised it is not North Lanarkshire Council policy. We suggest a review.

We saw a user and carer participation plan but not enough evidence of this being done.

Some work could be done by the registered manager to gain a fuller understanding of the regulatory framework and legal basis.

The manager showed at times during our visit, a lesser level of commitment to the inspection process, and to taking full responsibility for some issues we noted, than would result in a 'very good' grading for management and leadership. Our reasoning on this was discussed at our feedback.

The manager suggested communication amongst the local management team could improve and she also thought that she should now audit the quality assurance work of the team leaders.

The service accepted there were gaps in staff moving and handling training. That was being addressed by the provider. We expect to see this remedied next time.

Requirements

Number of requirements: 0

Recommendations

Number of recommendations: 0

Grade: 4 - good

What the service has done to meet any requirements we made at or since the last inspection

Previous requirements

There are no outstanding requirements.

What the service has done to meet any recommendations we made at or since the last inspection

Previous recommendations

There are no outstanding recommendations.

Complaints

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

Enforcement

No enforcement action has been taken against this care service since the last inspection.

Inspection and grading history

Date	Type	Gradings	
28 May 2014	Announced (short notice)	Care and support Environment Staffing Management and leadership	6 - Excellent Not assessed 5 - Very good 5 - Very good
3 Nov 2010	Announced	Care and support Environment Staffing Management and leadership	5 - Very good Not assessed Not assessed Not assessed
27 Oct 2009	Announced	Care and support Environment Staffing Management and leadership	4 - Good Not assessed 4 - Good Not assessed
10 Feb 2009	Announced	Care and support Environment Staffing Management and leadership	5 - Very good 5 - Very good 4 - Good 4 - Good

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