

Penumbra - Aberdeenshire Supported Living Service Housing Support Service

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Type of inspection: Unannounced
Inspection completed on: 21 July 2017

Service provided by:
Penumbra

Service provider number:
SP2003002595

Care service number:
CS2004061904

About the service

Penumbra Aberdeenshire was registered following the amalgamation of the Macduff, Peterhead and Fraserburgh services. The service now provides supported accommodation services in Macduff and Peterhead, and a Nova project in Fraserburgh where support is provided to people living in their own homes.

Penumbra's principles are:

- a. People have equal human value regardless of their situation or ability.
- b. People should be offered opportunities to develop or acquire skills that enhance their abilities to experience and enjoy a normal life.
- c. People should be supported in developing a valued social role within the community of their choice.
- d. People should be enabled to have maximal control over their own lives by means of exercising real choice.

This service registered with the Care Inspectorate as a combined service on 13 July 2015.

What people told us

We received 12 care standard questionnaires from people experiencing care from Penumbra Aberdeenshire Supported living service. The satisfaction rate with the service was 100%. The only slight drop was in relation to knowing the complaints procedure.

This high level of satisfaction was reflected in the responses from discussion with people that used the service. We met with four people individually and five people as a group. When speaking with individuals they explained the challenges that they faced and of how supportive the support workers were. This had resulted in increased independence and achieving new goals. Those spoken with as a group explained how support was available when they needed it and that staff were available and accessible. They enjoyed their daily coffee meeting which they attended if they wished.

Comments from the care standard questionnaires and discussions included;

- she makes me feel safe and secure in her company. I feel we can share personal information with each other knowing it will only be shared on a need to know basis.
- (support worker) helps me with my goals and my confidence.
- so far my experience with the service has been amazing. I already see improvements in myself and as someone whose anxiety has left them almost housebound.
- (support worker) makes me feel as the only client that she has.
- has been offered a relief worker during my support workers holiday but I have declined this but know that I can contact the service if needed.

Self assessment

The service had not been asked to complete a self assessment in advance of the inspection. We looked at their own improvement plan and quality assurance paperwork. These demonstrated their priorities for development and how they were monitoring of the quality of the provision within the service.

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

People experiencing care reported that they have received support to lead an independent lifestyle. The people living at the supported accommodation unit stated that they felt safe and secure with access to support staff as necessary. There were examples of people's increased confidence enabling them to travel independently.

Similarly people accessing the outreach service reported that with access to support they have been able to remain at home and to try new experiences with the support of a worker. In many cases the support has been reduced as the persons confidence has improved.

Staff members supported people to access health and other appointments, accompanying them as necessary. The service had well developed links with the appropriate health professionals and regular reviews of support took place with the person and all professionals. Healthy lifestyles were promoted and staff and users at the service were participating in a FIT150 programme encouraging 150 minutes per week of exercise. People using the service gained certificates as part of this programme.

Staff at the supported living projects built up good working relationships with the people living there and had a great knowledge of the person. This knowledge enabled the staff members to be able to detect changes in the person's behaviour and with their agreement start to address the issues.

Records showed that the service was promoting a recovery focus plan with regular iROC (Individual Recovery Outcomes Counter) assessments being completed with the person and support was amended based on the findings and needs of the person.

One person using the supported living unit was in the process of moving out to their own flat. Staff at the service supported them to make applications and to discuss any concerns that they had.

The service had completed a Quality Assessment Framework audit to ensure that the service operated appropriately. All stakeholders of the service were involved in the process. A plan had been implemented and some actions had been implemented.

Staff members were supportive of one another providing support and reassurance. A new induction process was in place which included a mentor for the new staff member.

A new management structure had been put in place which ensured that the local recovery workers had a lead

role in the support provided. Regular team meetings took place which dealt with business and service user specific issues at alternate meetings. Staff members reported that this system worked well. Recovery practitioner meetings were planned to be reinstated.

A development plan was in place for the different parts of the service and encouraged self evaluation. This would report on the outcomes to the person.

What the service could do better

A small number of people accessing the service disengaged from various parts of their support and did not always participate in a review. However these people participated in the iROC assessments process. It was advised that the service should ensure that regular reviews should continue to take place on at least a six monthly basis even if the service user declined to participate.

It was noted that different elements of the risk assessment package were used throughout the service. This had been identified in the service's QAF and this should be addressed to promote continuity throughout the service.

It was also noted that there was a discrepancy regarding the wording in the tenancy agreement which appeared to suggest that the tenancy was linked to support. This was discussed and it was advised that it was not the case. However this should be discussed at senior level and rewording should be implemented.

Requirements

Number of requirements: 0

Recommendations

Number of recommendations: 0

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
4 Jul 2016	Announced (short notice)	Care and support Environment Staffing
		5 - Very good Not assessed Not assessed

Date	Type	Gradings	
		Management and leadership	4 - Good
26 Jun 2015	Announced (short notice)	Care and support	5 - Very good
		Environment	Not assessed
		Staffing	5 - Very good
		Management and leadership	5 - Very good
13 Jun 2013	Announced (short notice)	Care and support	5 - Very good
		Environment	Not assessed
		Staffing	6 - Excellent
		Management and leadership	5 - Very good
30 Sep 2011	Announced	Care and support	5 - Very good
		Environment	Not assessed
		Staffing	Not assessed
		Management and leadership	4 - Good
28 May 2009	Announced	Care and support	5 - Very good
		Environment	Not assessed
		Staffing	4 - Good
		Management and leadership	4 - Good

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