

Eildon Housing Association - Station Avenue Outreach Housing Support Service

29/30 Station Avenue Duns TD11 3HW

Telephone: 01361 889138

Type of inspection: Announced (short notice) Inspection completed on: 29 March 2018

Service provided by: Eildon Housing Association Ltd

Care service number: CS2004056798 Service provider number: SP2003001963



About the service

The service has been registered since 2004.

Eildon Station Avenue Outreach is a Care at Home/Housing Support Service provided to Adults with a Learning Disability living in Berwickshire. The service is provided from a small housing development in Duns and also to people in their own homes in the community.

The service aims to assist adults with learning disabilities to enjoy a high quality of life by providing long-term homes with support and care. It is based on the following principles;

- People with learning disabilities are individuals and their particular needs and wishes should determine the care and support they receive.
- People have a right to be treated with respect and to be supported in ways that maintain their dignity.
- People have a right to make decisions and exercise control over their own lives within the limitations of their understanding and ability.

What people told us

People who use the service were happy with the care and support they received and told us:

"I am supported and encouraged to do as much as I can for myself".

"I feel very safe because there are always staff to support me".

"Staff treat me with respect and I know I can also have a laugh with them".

"I feel the staff do their job very well and managers make sure their training is up to date".

"I feel sad that there are a lot of staff changes. I like it when the same staff support me".

"Staff listen to me through regular meetings and reviews and I also get involved with my care plan". "Staff are always asking how I am".

"Some times I don't get the time that I should be getting, it can be cut short and at some times not at all. I don't mind if I get a phone call and my time is made up at a different time or day, which is what usually happens".

Relatives of people who use the service told us:

"The new manager is great - really brilliant".

"I feel there is much more communication in the whole house".

"Staff are really, really good".

"Staff all have information in the support plan. They discuss what's best for X at meetings and it is continually reviewed".

"The staff treat her like an individual, very respectful and kind. They do their job very well".

"There are a lot of staff changes and she gets over anxious with this, she likes continuity".

"X takes her own time to do things and staff support her however long it takes".

"Happy with the service which is excellent but there is always room for improvement".

Self assessment

We are not requesting self-assessments from providers for this inspection year. Issues relating to quality assurance, acting on feedback from people using the service and the quality of the service's improvement plan are considered throughout the inspection.

From 1 April 2018 the new "Health and Social Care Standards will replace the existing Care Standards. These Standards seek to provide better outcomes for people who experience care and services should now be familiarising themselves with these. We would encourage services to prepare for the implementation of the standards by working with staff and people experiencing care to raise awareness and explore what they mean in their specific setting, and consider how they impact on their work.

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

Since the last inspection there had been a real positive focus and commitment to improvement through a robust and comprehensive evaluation of the whole service, both externally and internally. We considered this to effectively capture areas for improvement which had been incorporated into an action plan. Clear actions were now in place for areas of staffing (including support and supervision), recruitment, care practice, and communication as some examples. We recognise that the service will need time to complete actions and embed improvements throughout these areas, however we are confident that outcomes will improve for people who use the service, their families and staff.

There was a clear culture and emphasis to promoting and supporting each person's rights, choices and independence. For example, reviews were being carried out in consultation with the Learning Disability Service to ensure people were being supported in the least restrictive way, and that where needed the appropriate safeguards could be put in place to keep them safe and protected. People and their families were involved in the recruitment of new staff and this promoted positive outcomes such as choice, self-esteem and confidence.

People were supported well to meet their individual healthcare needs, and to attend regular appointments with the relevant healthcare professionals. Further training for staff was being planned to meet the often complex, individual healthcare needs of each person, to ensure the support followed best practice and promoted the best possible outcomes for people.

We observed staff to support and interact with people in a kind, sensitive and respectful manner. It was evident they had built up very good trusting relationships with people and knew their needs, likes, dislikes and routines very well. Staff were confident and competent within their role and genuinely cared for the people they supported.

Service users, families and staff spoke positively of the new manager and described them as open, honest, supportive and approachable.

There have been changes to the service since the last inspection, to the management structure and a new manager appointed. The service have openly and honestly consulted with all people involved in the service during these changes which was described in positive terms during the inspection. The service continues to involve people, their families and staff in taking forward the actions in their improvement plan, and we look forward to seeing how outcomes have improved for people at the next inspection.

What the service could do better

We have repeated a requirement from the last inspection about recording and monitoring of explained and unexplained bruising. Although the service had developed a new procedure to record and monitor bruising and other skin concerns, improvement is needed to accurately record each instance through to completion. (Requirement 1)

A recommendation has been repeated in relation to the monitoring and evaluation of medication errors to allow the service to fully embed their new procedures in practice. (Recommendation 1)

Requirements

Number of requirements: 1

- 1. The Provider must develop a robust protocol for explained and unexplained bruising. They should ensure that;
- Any explained or unexplained bruising is accurately recorded and passed on to a manager immediately.
- This information is passed on to the relevant professionals where appropriate.
- Any explained or unexplained bruising is monitored and evaluated.

This is in order to comply with The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI2011/210) Regulation 4 (1) A provider must (a) make proper provision for the health, welfare and safety of service users; Scottish Regulators' Strategic Code of practice - made under section 5 of the Regulatory Reform (Scotland) Act 2014.

Timescale for completion; By 18 May 2018.

In making this requirement we have taken the following National Care Standards, Care at home into account - Standard 7, Keeping well - Healthcare.

Recommendations

Number of recommendations: 1

1. The service should ensure that they monitor and evaluate all medications errors. Incidents involving medication must be notified to The Care Inspectorate where required. National care standards, Care at home, Standard 4 Management and Staffing.

Complaints

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

Inspection and grading history

Date	Туре	Gradings	
10 Jan 2017	Unannounced	Care and support Environment Staffing Management and leadership	4 - Good Not assessed Not assessed 4 - Good
3 Nov 2015	Unannounced	Care and support Environment Staffing Management and leadership	5 - Very good Not assessed 5 - Very good 5 - Very good
24 Feb 2015	Unannounced	Care and support Environment Staffing Management and leadership	4 - Good Not assessed 4 - Good 4 - Good
26 Oct 2012	Unannounced	Care and support Environment Staffing Management and leadership	5 - Very good Not assessed 5 - Very good 5 - Very good
15 Dec 2011	Unannounced	Care and support Environment Staffing Management and leadership	4 - Good Not assessed 5 - Very good Not assessed
22 Dec 2010	Announced	Care and support Environment Staffing Management and leadership	5 - Very good Not assessed Not assessed Not assessed

Date	Туре	Gradings	
28 Jan 2010	Announced	Care and support Environment Staffing Management and leadership	4 - Good Not assessed 4 - Good Not assessed
17 Sep 2008	Announced	Care and support Environment Staffing Management and leadership	4 - Good Not assessed 4 - Good 4 - Good

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