

Inspection report

Enable Scotland - West Lothian Support Service

Delta House
Room 5
Carmondean Centre
Livingston EH54 8PT

Inspected by: Margaret Grant
(Care Commission Officer)

Type of inspection:

Inspection completed on: 29 November 2005

Service Number

CS2004079648

Service name

Enable Scotland - West Lothian

Service address

Delta House
Room 5
Carmondean Centre
Livingston EH54 8PT

Provider Number

SP2003002584

Provider Name

Enable Scotland

Inspected By

Margaret Grant
Care Commission Officer

Inspection Type**Inspection Completed**

29 November 2005

Period since last inspection

N/A

Local Office Address

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Introduction

Enable is a national organisation which provides support to people with learning disabilities. Enable West Lothian was registered with the Care Commission on 11/11/04 to provide a Care at Home and Housing Support service. This service is provided in a combined way by staff teams. There are 9 service users supported by approximately 30 members of staff. The service operates 24 hours a day, 7 days a week and includes staff overnight sleepovers.

The service's aims and objectives include the aims to provide a support team matched to the individual, supporting service users towards independency and inclusion in the local community.

Basis of Report

Before the visit the manager had completed a pre-inspection return and a self-evaluation form. The Care Commission wrote to the service telling them when the inspection would take place.

During the visit, which took place between 24th October and 28th November 2005, the Care Commission Officer spoke with the manager and six members of staff. The Officer also met with five service users and had discussion with two carers/relatives.

The Officer looked at a range of policies and procedures and records including the following:

Complaints procedure

Incident and accident records

Support plans

Risk assessments

Information leaflets

The Care Commission Officer took all of the above into account and reported on whether the service was meeting the following National Care Standards for Care at Home and Housing Support Services.

Standard 1 : Informing and Deciding

Standard 2 : The Written Agreement

Standard 4 : Management and Staffing

Standard 8 : Keeping Well - Medication

Standard 11: Expressing Your Views

Standard 7 : Exercising your Rights

Account was also taken of The Regulation of Care (Requirements as to Care Services) (Scotland) Regulations 2002. Scottish Statutory Instrument 114 (SSI 114).

Action taken on requirements in last Inspection Report

N/A

Comments on Self-Evaluation

The self- evaluation form had been fully completed. It contained detailed information about the service. The manager had highlighted strengths of the service and had considered areas for development.

View of Service Users

Five service users met with the inspecting officer. Most were unable to articulate their views of the service provided by Enable. Staff were observed to treat service users with dignity and respect. Service users interacted positively with staff on duty.

View of Carers

Two relatives were spoken with during the course of the inspection. One relative questionnaire was returned. All three relatives indicated that they were very happy with the service provided to their relatives.

Some of the comments made were:

“The staff keep me well informed. We have reviews and meetings. The information is there all the time.”

“I saw the personal plan at the last review. I get to give my opinion and what would be best. I am very much involved. It’s like having another family.”

“I am very happy, I could not envisage x being without Belinda and her staff.”

“I know about the complaints procedure but I have never had to complain.”

“The staff are wonderful, I couldn’t fault them. They have brought out in x what’s always been there.”

“I’m really pleased with the care, the staff are very accommodating. It’s a person centred approach, an individual service.”

“My relative was involved in writing up his care plan. The review was set out with pictures, I was impressed.”

“There is consistency of staff. They treat x as an individual and they listen to what he says”.

Regulations / Principles

Regulation 5: SSI 114 Regulation 5 (1) Personal Plans

Strengths

All service users had a personal plan. Plans sampled were very detailed and information included service users' health and support needs, wishes and dreams, likes, dislikes and responsibilities.

Relatives confirmed that service users were actively encouraged to become involved in producing their personal plan. Plans included photographs and pictures pertinent to the individual.

A copy of the complaints procedure was included in graphic format which referred to the Care Commission.

Areas for Development

Although the manager stated that plans were reviewed regularly this was not always clearly evidenced. Plans should identify when and by whom the plan was reviewed. (See Recommendation 1)

National Care Standards

National Care Standard Number 1: Care at Home - Informing and Deciding

Strengths

The service had produced a comprehensive introductory pack which gave detailed information about the service and what the service user could expect. The pack was well presented and included pictures and graphics.

The pack included most of the aspects contained in Standard 1, including the aims and objectives of the service, the rights of the individual, any charges made and information about the support offered. The complaints procedure was also included in the pack; it was produced with graphics in a user friendly format and referred to the Care Commission. The manager confirmed that inspection reports would be included in the pack.

The service was in the process of introducing a multimedia group. The group's remit would focus on the use of photography, computers, symbols, music and DVD's to produce information for prospective and current service users in a format that was fun and accessible to each individual.

Areas for Development

The service did not provide a 24 hour contact number for service users. (See recommendation 2)

National Care Standard Number 2: Care at Home - The Written Description

Strengths

There were written agreements in place for all service users. The agreements sampled detailed the rights and responsibilities of the service user, how to end the agreement and were signed by everyone involved.

Areas for Development

The agreement should include the commencement date and how and when the service would be provided. The agreement should be regularly reviewed. (See recommendation 3)

National Care Standard Number 4: Care at Home - Management and Staffing

Strengths

There were policies and procedures in place which covered legal requirements. These included, medication, risk management, restraint, protection of vulnerable adults and health and safety. Staff were aware of policies and how to access them. Policies were also reviewed at staff meetings.

There were systems in place to record accidents and incidents.

There was a robust recruitment procedure which included interviews, taking up references and Disclosure checks. There was an individualised induction plan and a “buddy” system for new staff.

Staff confirmed that the service offered extensive training opportunities which had included, challenging behaviour, how behaviour affects other people, rectal diazepam, epilepsy and administration of medication. Staff confirmed that they were encouraged to work towards SVQ accreditation and the manager was undergoing the registered manager award. A clear training analysis was in place for staff.

Financial transactions were appropriately recorded.

The quality of the service provision was regularly monitored. A recent carer questionnaire provided a positive response. The manager advised that a new graphic survey “My Opinion” would be distributed to service users shortly.

Service users were encouraged to be involved in the staff selection process.

Carers confirmed that service users were supported by consistent staff teams.

Staff confirmed that staff meetings and supervision occurred regularly and that they were well supported by the manager.

Areas for Development

The service had a comprehensive complaints procedure and the manager advised that any complaint would be recorded. However, a complaints log was not in place. It was recommended that the service should open a complaints log. (See recommendation 4)

National Care Standard Number 7: Housing Support Services - Exercising Your Rights

Strengths

The personal plan and written agreement identified the rights and responsibilities of the service user and what they could expect from support staff.

There were policies in place to protect service users from abuse including: a whistle blowing policy and a protection of vulnerable adult's policy.

All information was stored securely.

The service were about to start a "people using the service" group. An outside facilitator would take the group and service users, their representatives/families would be encouraged to attend to air their views and voice any concerns.

Areas for Development

There were no areas for development identified during this inspection.

National Care Standard Number 8: Care at Home -Keeping Well -Keeping Well - Medication (where help with taking medication is provided as part of the service)

Strengths

There was a medication policy in place. This was in the process of being updated by the organisation.

All staff had had training on the administration of medication. Medication records were in place and maintained appropriately.

The manager advised that the service was taking on board a "healthy lifestyle" for service users. Staff had been on training and the service was in discussion with a dietician regarding a pilot study to promote healthy living and healthy eating for service users.

Areas for Development

There were no areas for development identified during this inspection.

National Care Standard Number 11: Care at Home - Expressing Your Views

Strengths

Service users were encouraged to discuss their views or concerns with the manager or any

member of staff.

There was a complaints procedure in place which referred to the Care Commission. Each service user was provided with a copy of the complaints procedure. It was produced in a graphic format and included photographs of the manager and all the team.

Service users were provided with information on advocacy. The service supported and encouraged the use of independent advocacy.

Relatives confirmed that they were able to voice any concerns to staff or the manager and that their concerns would be listened to.

Service users were encouraged to take part in the inspection process.

The manager advised that the inspection report would be made available to service users and their representatives.

Areas for Development

There were no areas for development identified during this inspection.

Enforcement

There has been no enforcement action taken against this service to date.

Other Information

No other areas were identified.

Requirements

None made at this inspection.

Recommendations

It is recommended that the service provides a 24 hour contact number for service users.
National Care Standards: Care at Home; Standard 1.

It is recommended that the written agreement includes the commencement date and how and when the service would be provided. The agreement should be regularly reviewed.
National Care Standards: Care at Home; Standard 2.

. It is recommended that the service introduce a complaints log. National Care Standards: Care at Home; Standard 4.

. Personal plans should clearly evidence when and by whom they were reviewed. National Care Standards: Care at Home; Standard 4.

Margaret Grant

Care Commission Officer