

Key Community Supports - South Lanarkshire & Renfrewshire Support Service

The Square
70 Renton Street
Glasgow
G4 0HT

Telephone: 0141 342 1890

Type of inspection:

Unannounced

Completed on:

23 January 2019

Service provided by:

Key Housing Association Ltd

Service provider number:

SP2003000173

Service no:

CS2004079435

About the service

At the time of inspection the service was not supporting any children so this report is based on the inspection of the service offered to adults.

We found the service to be operating to a very high standard. We observed staff being caring and compassionate while engaging with people which enhanced their relationships. Where people had complex needs and limited verbal communication, we could see that staff were able to communicate in a person centred way. This demonstrated that the staff knew the person and their care plan very well.

We met with people who used the service who told us they felt happy with their lives and they felt safe in their homes, living independently with some support from staff. We heard how people had achieved great outcomes which had been life changing such as moving from an area where they did not know anyone to a place where he has status, a sense of belonging and has been welcomed by the local community.

We spoke with relatives who were very positive about the team who supported their loved ones. One relative told us that there had been challenging times previously however the manager and staff team had responded by taking action timeously and rectifying the situation. This helped the relative to build trusting relationships with the team.

We looked at care plans and found that the information contained within them was very detailed and person centred. The service was in the process of transition to a new care plan format. Some of the sampled plans were difficult to get through due to the volume of information. We suggested that this should be streamlined and updated to allow for more clear and concise reading. We have made this a recommendation. (See recommendation 1).

What people told us

The relatives we spoke to were very happy with the service and felt the staff went over and beyond their roles.

Self assessment

We did not ask for a self assessment however we did see a Development plan for the service.

From this inspection we graded this service as:

Quality of care and support	5 - Very Good
Quality of staffing	4 - Good
Quality of management and leadership	4 - Good

Quality of care and support

Findings from the inspection

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Requirements

Number of requirements: 0

Recommendations

Number of recommendations: 1

1. The service should continue to develop their plans and roll out the new format within tight deadlines. This will ensure that the care plans are meaningful, up to date and used as guide for staff to support the person to achieve their outcomes.

This will be in line with the Health and Social Care Standards 1:15 'My personal plan' (sometimes referred to as a care plan) is right for me because it sets out how my needs will be met, as well as my wishes and choices.

Grade: 5 - very good

Quality of staffing

Findings from the inspection

We found that all round the safe recruitment of staff to be in line with best practice guidance. Evidence of the interview process demonstrated a very good approach throughout with relevant and competency questions being

asked of the candidate. We saw that staff induction took place over five days with the inclusion of mandatory training. This was confirmed by staff who also stated that the induction could be extended if required.

We noted that staff team meetings took place within the various services however this was hard to track due to the way the minutes were filed. Therefore, we were unable to make a clear assessment in this area. Despite this staff felt they were supported effectively. We advised that further structure and attention to detail around the meetings would be beneficial.

Staff had a range of training opportunities with a clear focus on impact on outcomes for people. We found that staff were encouraged to develop their skills and had access to a e-learning as well as face to face training. We noted that a comprehensive training plan was in the process of being compiled for each service along with the training manager. This meant that training was identified which was relevant to service need as well as person specific.

We asked staff for feedback about their supervision sessions, we were told by some that they had received their annual appraisal however not their supervision. The manager confirmed they were behind regarding this. We advised the manager that this should be looked at as a priority to ensure safe good staff practice and an opportunity for development and discussion between staff and their supervisor. We have repeated this recommendation under the Management and leadership theme.

Requirements

Number of requirements: 0

Recommendations

Number of recommendations: 0

Grade: 4 - good

Quality of management and leadership

Findings from the inspection

The service had a comprehensive development plan in place however it was difficult to find evidence of how this was reviewed regularly and what actions had been achieved. The teams should have an understanding of the service's priority areas for improvements and the timelines attached to these. This would contribute to staff participation and knowledge of the service goals and expectations.

The service demonstrated strength in their audit of finances, these were carried out by the local managers and staff external to the service. We advised that there should be evidence of Quality Assurance carried out by the service manager. This would ensure an additional safety measure to the protection of people's finances.

Accident and incident logs were kept at head office and some at the local services, this created some confusion at the point of inspection. We fed back an example where an accident had occurred which should have resulted in the review of a risk assessment and information being transferred to the individual's care plan but this had not happened. The manager stated that they would re organise this as they had good systems already in place.

We heard from staff and managers that staff absence was having a negative impact on the smooth running of the some areas of the service. They have also experienced difficulty in the recruitment of staff. As a result managers and team leaders are spending a significant amount of time on rota schedules. The lack of replacing a manager's role while absent from work along with not replacing an administrator's role also contributed to levels of stress for teams. Seniors are aware of this and assured us they were trying to address these issues.

Overall staff felt supported by their managers and found them to be approachable and supportive. We heard examples of this, this meant staff felt relaxed and able to share their views confidently which raised staff morale too.

Requirements

Number of requirements: 0

Recommendations

Number of recommendations: 2

1. To support the personal and professional development of staff, the manager should ensure that supervision and appraisals are undertaken as per the organisations policy.

The manager should also ensure that the quality and content of these is consistent and evidences discussion of relevant areas including the planning and reviewing of actions to be taken forward.

This will be in accordance with the Health and Social Care Standards 3:1 (3.14) ' I have confidence in people because they are trained, competent and skilled, are able to reflect on their practice and follow their professional and organisational codes.'

2. To support the development and improvement of the service, the Provider must ensure that quality assurance for the service is carried out effectively. In order to demonstrate this:

- Routine and regular management monitoring of the quality of care and support, staffing and management and leadership must be provided
- Quality audits relating to the above areas must be accurate, kept up to date and be progressed to ensure they lead to any necessary action to achieve the improvement required without unnecessary delay.

This will be in line with the Health and Social Care Standards 4:19 ' I benefit from a culture of continuous improvement, with the organisation having robust and transparent quality assurance processes.

Grade: 4 - good

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

Previous requirements

Requirement 1

To support the development and improvement of the service, the Provider must ensure that quality assurance for the service is carried out effectively. In order to demonstrate this:

- Routine and regular management monitoring of the quality of care and support, staffing and management and leadership must be provided
- Quality audits relating to the above areas must be accurate, kept up to date and be progressed to ensure they lead to any necessary action to achieve the improvement required without unnecessary delay
- A service development plan must be made available to show how and when improvements will be made.

This is to comply with SSI 2011/210 Regulation 4 (1) (a) - a requirement to make proper provision for the health and welfare of service users.

Timescale: 3 months

This requirement was made on 18 January 2018.

Action taken on previous requirement

Although there was some evidence of Quality assurance we did not see any in relation to how the service manager audits the service.

Not met

Requirement 2

The provider must ensure that support plans and risk assessments accurately reflect the current needs of supported individuals and that these are reviewed regularly to ensure any changes are recorded. This is to ensure that relevant support needs and risks are identified and assessments and support plans / protocols are put in place to ensure staff provide the most appropriate support.

This is in order to comply with:

The Social Care and Social Work improvement Scotland (Requirements for Care Services) SSI 2011 No 210. Regulation 4(1) (a) - Welfare of users

Timescale: to be completed by 30 September 2018

This requirement was made on 3 April 2018.

Action taken on previous requirement

We found that reviews of risk assessments were taking place and reviewed within time scales

Met - within timescales

Requirement 3

To support the development and improvement of the service, the Provider must ensure that quality assurance for the service is carried out effectively. In order to demonstrate this:

- Routine and regular management monitoring of the quality of care and support, staffing and management and leadership must be provided
- Quality audits relating to the above areas must be accurate, kept up to date and be progressed to ensure they lead to any necessary action to achieve the improvement required without unnecessary delay
- A service development plan must be made available to show how and when improvements will be made.

This is to comply with SSI 2011/210 Regulation 4 (1) (a) - a requirement to make proper provision for the health and welfare of service users.

Timescale: to be completed by 30 September 2018

This requirement was made on 3 April 2018.

Action taken on previous requirement

Although we saw evidence of some audits being carried out, this was not enough to meet the Requirement however we have made this a Recommendation now to recognise the fact that audits were carried out. The senior manager should look at systems for him to monitor and appraise the service.

Not met

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

Previous recommendations**Recommendation 1**

The manager should consider how to better evidence where reviews have taken place and ensure that minutes are available in service users files. Support plans, associated protocols and risk assessments should also reflect that they have been reviewed regularly in line with National Care Standards.

National Care Standards, Care at home. Standard 3 - Your personal plan

This recommendation was made on 3 April 2018.

Action taken on previous recommendation

We saw evidence of reviews taking place, this has been met.

Recommendation 2

The manager should ensure that they continue to review their participation methods to ensure that there are regular opportunities for all service users and their relatives / carers to give feedback about the quality of care and support, staffing and management / leadership of the service.

This includes evidencing how the views and feedback gained, leads to changes or improvements for individuals and /or the service.

National Care Standards, Care at Home. Standard 4 - Management and Staffing Arrangements.

National Care Standards, Care at Home. Standard 11 - Expressing Your Views

This recommendation was made on 3 April 2018.

Action taken on previous recommendation

We saw evidence of participation meetings happening . This was met .

Recommendation 3

To support the personal and professional development of staff, the manager should ensure that supervision and appraisals are undertaken as per the organisations policy. The manager should also ensure that the quality and content of these is consistent and evidences discussion of relevant areas including the planning and reviewing of actions to be taken forward.

National Care Standards, Care at Home. Standard 4 - Management and Staffing

This recommendation was made on 3 April 2018.

Action taken on previous recommendation

This was not met.

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	
31 Jan 2018	Announced (short notice)	Care and support Environment Staffing Management and leadership	4 - Good Not assessed 4 - Good 3 - Adequate
31 Jan 2017	Announced (short notice)	Care and support Environment Staffing Management and leadership	4 - Good Not assessed 4 - Good 3 - Adequate
27 Jan 2016	Announced (short notice)	Care and support Environment Staffing Management and leadership	4 - Good Not assessed 4 - Good 3 - Adequate
27 Nov 2014	Announced (short notice)	Care and support Environment Staffing Management and leadership	5 - Very good Not assessed 4 - Good 4 - Good
23 Dec 2013	Announced (short notice)	Care and support Environment Staffing Management and leadership	5 - Very good Not assessed 5 - Very good 4 - Good
7 Feb 2013	Announced (short notice)	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	5 - Very good Not assessed 5 - Very good Not assessed
19 Oct 2010	Announced	Care and support Environment Staffing	5 - Very good Not assessed Not assessed

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

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Care Inspectorate
Compass House
11 Riverside Drive
Dundee
DD1 4NY

enquiries@careinspectorate.com

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