

Oakley Terrace Scheme Care Home Service

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Dennistoun
Glasgow
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Telephone: 0141 550 2344

Type of inspection:

Unannounced

Completed on:

13 August 2019

Service provided by:

The Richmond Fellowship Scotland
Limited

Service provider number:

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Service no:

CS2003000933

About the service

Oakley Terrace is a registered care home for people with mental health problems. The Richmond Fellowship Scotland manages this service.

The service is located in the east end of Glasgow, close to local shops and transport links. It provides 24 hour residential care and support for up to eight people with mental health problems. At the time of the inspection there was one vacancy.

The property has eight self contained bedrooms with en-suite toilet and bath or shower facilities.

There are two lounges, one located on each floor of the building. The upper lounge is also the designated smoking room. There are two fully fitted kitchens, two laundry rooms and communal bathrooms.

The staff office base is located on the ground floor.

The service aims and objectives states what it intends to achieve, including, "...to help people live where they are most independent whilst being safe and getting the support they want and need...not a home for life but a stepping stone which enables people to build up their confidence and capability to move on to a place of their choosing".

This service was previously registered with the Care Commission and transferred its registration to the Care Inspectorate on 1 April 2011.

What people told us

Overall, feedback was positive and showed that people were generally happy with the quality of the service. Comments included:

"Doing things more for myself...I have joined the library."

"Staff treat me with respect."

"Feel safe here."

"Got me on my feet."

Feedback from two relatives we spoke with was mixed. Both identified positive aspects about the service and the difference it had made to the lives of their family member. However, one of the relatives also commented on some issues of concern that she had. The manager was aware of these concerns and could assure us as to how the service was addressing them.

From this inspection we evaluated this service as:

In evaluating quality, we use a six point scale where 1 is unsatisfactory and 6 is excellent

How well do we support people's wellbeing?	5 - Very Good
How good is our leadership?	not assessed

How good is our staffing?	not assessed
How good is our setting?	not assessed
How well is our care and support planned?	5 - Very Good

Further details on the particular areas inspected are provided at the end of this report.

How well do we support people's wellbeing?

5 - Very Good

People should experience acceptance whatever their care and support needs as this makes them feel valued and respected for who they are. Staff were observed to be warm and encouraging to residents. They showed compassion and a person centred approach. Staff were encouraging and focused on supporting people to regain their independence and prepare for moving on. Any restrictions were kept to a minimum and carried out sensitively. Residents told us that they were treated with dignity and respect. For example, one person said, "the office is more approachable...I feel more valued".

When people participate in decisions about their care and support, this ensures that their views are listened to and taken into account as they are recognised as experts in their own experience. We could see that residents were fully involved in developing their support plans. Opportunities to use advocacy services also helped people to have their voice heard and be empowered. The service provided residents with various options to have their say in the running of the service. People said they felt listened to. The new manager had recently introduced feedback forms for relatives and external agencies to inform the service improvement plan and quality assurance.

Residents felt safe and staff demonstrated a clear understanding of their responsibilities to keep people safe. Staff described an open culture where issues of concern could be raised and addressed.

People should be empowered and enabled to be as independent as possible as this ensures that they get the most out of life. We could see that there was now a stronger focus on recovery and rehabilitation than previously. Residents and staff we spoke with, understood the moving on process. We spoke with one person who was looking forward to moving on to supported accommodation. She could describe how, with staff support, she was able to manage her own affairs better, reflecting positive outcomes along the road to recovery and rehabilitation. Support plans demonstrated a clear focus towards developing independence and achieving identified goals.

How people spend their day is important in maintaining physical and mental wellbeing. We could see that staff knew people's interests and wishes and actively supported them to pursue their personal goals. There were good community links, which included outings, the local library, snooker hall and visits to local amenities and shops. People were supported to build and maintain meaningful relationships with others within and outwith the home. They had a right to make choices and take informed personal risk, even when it went against staff advice.

Overall, the service should continue to do what it is doing while exploring other ways to encourage less motivated residents to get the most out of life through activities which reflect their needs, interests and wellbeing.

Managers recognised that certain aspects of the environment needed attention because they detracted from residents getting the most out of life. This included improving access and use of the garden area and locating the designated smoking room to a more suitable location. We understood that the building was being bought over by the provider from the local housing association. The manager was able to share the provider's initial action plan to address the building's shortcomings within reasonable timescales. We will review progress in due course.

People should be sure that their health needs are well supported. Overall, appropriate attention was given to keeping them well and attending medical appointments. They had as much control as possible over their medication. Appropriate aids and adaptations were used within the building as people's physical care needs changed.

We discussed with managers the scope to develop a stronger focus on health promotion and education as this would assist residents in making informed lifestyle choices leading to positive health and wellbeing outcomes. Our suggestions included engagement with the 'Caring for Smiles' programme and NHS smoking cessation services. The manager was keen to improve the range of opportunities which promote health education. We will be able to validate progress at the next inspection.

How good is our leadership?

This key question was not assessed.

How good is our staff team?

This key question was not assessed.

How good is our setting?

This key question was not assessed.

How well is our care and support planned?

5 - Very Good

People benefited from support plans which were individualised. They reflected each person's preferences and wishes regarding how they would like to receive support. Support plans contained detailed information which helped staff provide a consistent approach when providing support. For example one page profiles and 'step by step' instructions reflected clear information on what was important for the person, how support should be provided by staff and what they should be mindful of.

We noted improvements in care planning since the last inspection. In particular, we noted that regular reviews were taking place, support plans were more outcome focused, assisted by closer attention to specific, measurable, relevant and timebound goal planning. There was also good use made of supplementary recording tools to help people reflect on their progress and problem solve issues in their life. Care and support planning took account of unexpected events such as falls.

Managers and staff continued to discuss their concerns with care teams and Social Work Commissioning where individuals were not suitably placed within the service and as such were not experiencing the best quality of life. Staff demonstrated the importance of involving relevant others to help shape the decision about the suitability of the service for people.

We could see clear evidence of support planning focused on moving on for those residents who were at the point of no longer needing the support of Oakley Terrace. In line with the aims and objectives of the service, the manager assured that active moving on planning would be prioritised at the point of admission for all residents, regardless of where they are on their recovery journey.

The manager acknowledged that previous work on residents' anticipatory care plans with regards to anticipated health care needs and wishes had stalled and agreed to rectify this.

What the service has done to meet any areas for improvement we made at or since the last inspection

Areas for improvement

Previous area for improvement 1

In order that residents maintain confidence in the people who support them, the manager should

- ensure that residents' needs are met by the right number of people at all times
- that all staff are given the appropriate opportunities to become suitably trained, competent and skilled working with this client group through adopting a recovery and rehabilitation model of care and support.

This will ensure care and support is consistent with the Health and Social Care Standards, which state: 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 (HSCS 3.14), My needs are met by the right number of people (HSCS 3.15) and, I am supported and cared for by people I know so that I experience consistency and continuity (HSCS 4.16)

This area for improvement was made on 10 August 2018.

Action taken since then

This recommendation was now met. Since the last inspection a new management team had taken over the service, including the creation of a senior support worker role. This led to better support to staff on the ground. Whilst changes to the staff team had also taken place, we did not receive reports of issues with keyworking or maintaining agreed support. Newer staff told us they were well supported by induction and training processes.

Previous area for improvement 2

In order that people's health and support needs were appropriately considered and consistently met, the manager should ensure that personal plans

- covered all identified health care needs
- always made clear what it was that staff were actually trying to achieve with the person and how staff would know when they had made a positive change in the person's life.

This will ensure care and support is consistent with the Health and Social Care Standards, which state: 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 (HSCS 1.15).

This area for improvement was made on 10 August 2018.

Action taken since then

This recommendation was now met. We make further comment about care planning within this report.

Previous area for improvement 3

In order that people benefitted from strong leadership skills and a supportive living environment, the manager should,

- develop Champion roles, for instance, with regards to expanding and sustaining health promotion initiatives within the service.
- consider using the 'Step into Leadership' programme to promote good leadership skills within the team.

This will ensure care and support is consistent with the Health and Social Care Standards, which state: I use a service and organisation that are well led and managed (HSCS 4.23)

This area for improvement was made on 10 August 2018.

Action taken since then

This recommendation was met. Champion roles had been introduced and the senior advised that she was linked into the Step into Leadership programme. We understand that other staff will soon be undertaking this programme of learning as well. At feedback the manager indicated that he was further developing champion roles, for instance, to have a champion co-ordinating meaningful activity within the service.

Previous area for improvement 4

In order that people benefited from robust and transparent quality assurance processes in which all interested parties were consulted and involved, the manager should ensure relevant external agencies are asked their views on the quality of the service provided to residents.

This will ensure care and support is consistent with the Health and Social Care Standards, which state: I benefit from a culture of continuous improvement, with the organisation having robust and transparent quality assurance processes (HSCS 4.19).

This area for improvement was made on 10 August 2018.

Action taken since then

This recommendation was still a work in progress for the new management team. The manager had developed a feedback tool for stakeholders, but it was at an early stage of introduction.

Complaints

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

Detailed evaluations

How well do we support people's wellbeing?	5 - Very Good
1.1 People experience compassion, dignity and respect	5 - Very Good
1.2 People get the most out of life	5 - Very Good
1.3 People's health benefits from their care and support	5 - Very Good
How well is our care and support planned?	5 - Very Good
5.1 Assessment and care planning reflects people's planning needs and wishes	5 - Very Good

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