

Magdalen House Housing Support Service

41 Roseangle
Dundee
DD1 4LZ

Telephone: 01382 200890

Type of inspection:

Unannounced

Completed on:

24 October 2019

Service provided by:

Priority Care Limited

Service provider number:

SP2015012621

Service no:

CS2015342720

About the service

This service registered with the Care Inspectorate on 11 September 2017. The service is provided to adults and older people with a learning disability living in their own home. The service is available 24 hours a day, seven days a week and is provided by a range of staff including senior support workers and support workers. There were 21 people living in Magdalen House at the time of this inspection.

Magdalen House aims to: 'support individuals to maintain their core tenancies by providing housing support and care at home services individually targeted to meet the needs of our service users'.

What people told us

Prior to this inspection we received three completed care standards questionnaires from people using the service and their relatives, of these two strongly agreed and one agreed that they were overall happy with the support that they or their loved one received.

During the inspection we spoke directly to four people living in Magdalen House who were receiving support and others in passing. They gave us positive feedback about the support they receive and the staff who provide it. Comments included:

'Nothing could make it better.'

'Very happy here, staff are wonderful and help me a lot.'

'Everything is ok.'

'I am happy where I am.'

'Everything is fine and the staff are nice.'

'I have no complaints about the staff they help you if you want anything.'

'I am quite happy with everything.'

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 the quality of the provision within the service.

From this inspection we graded this service as:

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

Quality of care and support

Findings from the inspection

People should have a personal plan that is right for them because it sets out how their needs will be met, as well as their wishes and choices. The provider had introduced a new format for care plans. We looked at five of these during the inspection. We saw that there was a range of information contained within these and the new version was very person-centred and more reflective of the persons individual needs. There was also good evidence of how people received support when they became unwell and effective partnership working with professionals to assess and evaluate what support people needed in relation to their health.

What the service could improve on is where people's health needs or risks changed. We saw that this was recorded in the person's daily notes, however, in some instances the support plan as well as the risk assessments had not been updated, in addition we discussed with the manager that there should not be large gaps in people's notes. We saw for one person there had been a gap of over a month in the records.

If people need help with their medication, they can expect to have as much control as possible. We looked at a sample of records where people required full assistance to manage their medication. We saw that people had been provided with secure storage for their medication and that staff provided support to order and administer medication. For oral medication, administration was generally accurate as well as for topical prescriptions like creams and lotions.

We looked at accident and incident records and saw these had been followed up appropriately or notified to relevant agencies. We had a discussion with the manager about the type of significant events that should be notified to the Care Inspectorate.

We saw that people had access to regular reviews which are important formats for people to discuss and evaluate the support they receive and to plan for future needs.

The senior team completed monthly reviews and updates of each persons' support plans and provided a summary of any incidents, activities and issues for each month.

We were pleased to see that people were getting out more and were slowly getting more control over their lives within the housing support and care at home model. Although there had been some progress, there was still more work to be done to ensure everyone had a tenancy agreement and access to relevant benefits.

People using the service we had spoken with, provided positive feedback about the support and the staff who provide it.

Requirements

Number of requirements: 0

Recommendations

Number of recommendations: 0

Grade: 4 - good

Quality of staffing

Findings from the inspection

People using the service should have confidence in the staff because they are trained, competent, skilled, are able to reflect upon practice, and follow their professional and organisational codes.

Staff training records showed staff had access to a variety of training to support them to carry out their role. We discussed the training needs of staff at previous inspections and were pleased to see that the provider had reviewed the training available, to help staff to understand how they should provide support to people in line with the home to housing support and care at home model and to meet health and wellbeing needs.

We sampled recruitment records for new staff and found that the provider was following best practice in relation to safer recruitment.

Staff had access to formal qualifications such as Scottish Vocational Qualifications (SVQ) 2, 3 and 4.

Staff were registered or were aware of the need to register with the Scottish Social Services Council (SSSC). We saw that the manager undertook regular checks of the SSSC register to ensure staff had met their responsibilities in this area.

To support staff to do their jobs the provider had processes such as team meetings, supervision and appraisals where they could share information, experiences, suggestions and issues.

Staff had been given adult protection training and were able to describe what actions they would take if they had or witnessed any concerns.

Staff told us that they felt far better supported and were much happier since last year, particularly because they could see positive changes in the way people using the service were being supported which had led to better outcomes for them.

Requirements

Number of requirements: 0

Recommendations

Number of recommendations: 0

Grade: 4 - good

Quality of management and leadership

Findings from the inspection

We were pleased to find during the inspection that there had been progress made in making the changes required to the support provided in line with the new model of care. The manager had developed an action plan

involving the people using the service and their families showing the changes that were required to be made and the timescales for doing so. They had also provided the Care Inspectorate with updates about the progress being made to implementing the necessary improvements.

Staff spoken with told us that it was like night and day and that they felt better supported, involved and listened to. During this inspection, we felt the atmosphere in the service had improved greatly, people using the service told us they were happier and seemed to be more relaxed because they were engaged and their views, opinions and choices were actively being sought.

The provider had a range of audits and checks in place to ensure the support provided to people was of a good standard. We noted these were being undertaken regularly and that they were effective in identifying issues.

We were also pleased the provider and manager had a clear role in the development and improvement of the service including regular quality assurance checks to ensure that the service provides a good quality of care and support.

The provider had supported the team to ensure that there is clear, effective and supportive leadership for all staff. There was still work to do, however, we were assured that the necessary actions would be taken to ensure that the progress made would be continued.

Requirements

Number of requirements: 0

Recommendations

Number of recommendations: 0

Grade: 4 - good

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

Previous requirements

There are no outstanding requirements.

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

Previous recommendations

Recommendation 1

We recommend that the provider and registered manager reviews the system of recording and reporting accidents and incidents to include consideration to Care Inspectorate notifications as detailed in 'Records that all registered care services (except childminding) must keep and guidance on notification reporting', Care Inspectorate (Published 2012, amended 2015).

This ensures care and support is consistent with the Health and Social Care Standards which state that, 'My care and support is provided in a planned and safe way, including if there is an emergency or unexpected event.' (HSCS 4.14).

This recommendation was made on 9 October 2018.

Action taken on previous recommendation

We looked at accident and incident records that had occurred since the last inspection. We saw that the records were detailed and clear and included any follow-up actions where appropriate. We again had a conversation about notifications and the importance of these for evidencing how they have been managed and referred. On balance this recommendation was found to have been met.

Recommendation 2

The provider should continue to review the training that staff receive to undertake their roles and this should include risk assessment, vagus nerve stimulator, catheter care, Adults with Incapacity Act, Learning and Physical disabilities, and the housing support and care at home model.

This ensures care and support is consistent with the Health and Social Care Standards which state that, 'I have confidence in my staff because they are trained, competent and skilled, are able to reflect upon their practice and follow their professional and organisational codes.' (HSCS 3.14).

This recommendation was made on 9 October 2018.

Action taken on previous recommendation

We saw that the provider and manager had produced a training plan for 2019 and training had been carried out at the time of this inspection. Action had been taken to meet this recommendation.

This recommendation has been met.

Recommendation 3

The provider should involve the people who use the service and their families in developing an action plan for taking the service forward and for making improvements. The Care Inspectorate is to be provided with monthly updates about the progress being made.

This ensures care and support is consistent with the Health and Social Care Standards which state that: 'I can be meaningfully involved in how organisations that support and care for me work and develop.' (HSCS 4.6).

This recommendation was made on 9 October 2018.

Action taken on previous recommendation

During this inspection we could see that the provider, manager and staff were working very hard to make improvements to the service and to provide care in line with the Housing Support and Care at Home Model. We were pleased to see some progress made in ensuring people living in the service had tenancy agreements. This in turn meant they were able to access the benefits they are entitled to. We would like to see the provider continue to work with the appropriate agencies to ensure that all the tenancy agreements are set in place as soon as possible. However, some of the legal work in relation to this was not in the hands of the provider and they are continuing to liaise with relevant professionals to move this forward.

This recommendation was found to have been met.

Recommendation 4

The provider and manager should ensure that quality assurance processes are effective at identifying issues and how these are dealt with.

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

This recommendation was made on 9 October 2018.

Action taken on previous recommendation

The manager and staff were undertaking regular audits and checks, we saw how some of these had been refined to move away from care home style to ones more in line with checks focused on what makes a good housing support and care at home experience for people. We saw that these could be developed and improved further, however, in balance we found this recommendation had been met.

Recommendation 5

The manager and provider should continue to work with the other agencies involved to ensure that people living in the service have a tenancy agreement as soon as possible, and are supported to access the benefits and any arrears they are entitled to.

This ensures care and support is consistent with the Health and Social Care Standards which state that: 'I am empowered and enabled to be as independent and in control of my life as I want and can be.' (HSCS 2.2) and 'I am supported to understand and uphold my rights' (HSCS 2.3).

This recommendation was made on 7 March 2019.

Action taken on previous recommendation

We were pleased to see some progress had been made in setting in place tenancy agreements for people living in the service. The provider had done what they can to move this forward, however, some of the legal work and processes required to complete these were not within the remit of the provider and work was still required to ensure all tenants had their agreement. The manager advised that they were continuing to have regular meetings with the local authority to move this forward. We have asked the manager to give us regular updates on the progress being made. In balance we feel the provider is meeting their responsibilities in this area and are doing all they can, therefore this recommendation has been 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
7 Mar 2019	Unannounced	Care and support Environment Staffing Management and leadership
		Not assessed Not assessed Not assessed Not assessed
24 Sep 2018	Unannounced	Care and support Environment Staffing Management and leadership
		3 - Adequate Not assessed 3 - Adequate 3 - Adequate

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