

ASC Orchard Court and Dalguise Care Home Service

Balbeggie
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Type of inspection:

Unannounced

Completed on:

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Service provided by:

Advanced Specialist Care Limited

Service provider number:

SP2005007542

Service no:

CS2011298007

About the service

This service has been registered since 2011.

ASC Orchard Court and Dalguise is owned and managed by Advanced Specialist Care Ltd which is part of the Balhousie Care Group. It provides accommodation and care for up to 24 adults with learning disabilities who may have associated mental health issues and challenging behaviour.

The company states:

"All our efforts, resources and energy will be put towards ensuring that residents enjoy a good quality of life through receiving professional care in a safe, comfortable and welcoming environment. We want our staff to be the kindest people from our communities: life's natural carers and givers, the unsung heroes who make the world a better, warmer place for the rest of us."

At the time of inspection 22 people were being supported by the service.

What people told us

We heard a range of views about the quality of the service with some people saying that they were happy with it and others who were not at all happy.

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?	2 - Weak
How good is our leadership?	2 - Weak
How good is our staffing?	2 - Weak
How good is our setting?	not assessed
How well is our care and support planned?	3 - Adequate

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

How well do we support people's wellbeing?

2 - Weak

The service was not operating at the level we would expect and, although we found some strengths, there were important weaknesses with priority action required. This meant that we assessed their performance as weak.

The service supported people who had significant complex needs and some, as a result of their assessed needs, had restrictions placed on their independence, choice and control that included the use of physical and/or medical restraint. For some people the use of physical restraint had become a regular feature of their support and this had increased the risk of them experiencing physical and emotional harm. We discussed with the service that it must ensure that physical restraint was a 'last resort' intervention and should be used only where there was absolutely no alternative that would reduce an identified, specific risk, to the person concerned to an acceptable level. **(See requirement 1)**

We were concerned that workers had only limited knowledge about adult support and protection and had not been provided with clear guidelines as to how to respond appropriately to incidents affecting the safety of people. This put people's safety and wellbeing at risk because workers did not have clear information about their roles and responsibilities or about the relevant legislation, policies and procedures they must follow. **(See area for improvement 1 and requirement 1 under 'How good is our staff team')**

It is important to note that we saw people being supported with compassion and respect where the main priority for workers was to try and promote the best interests of those who used the service. The service had a core group of dedicated workers who had good social care values and tried to do their best for the people they supported. With the right support, training and development opportunities, these workers will be very important to help bring about the service improvements that are needed.

People had opportunities to take part in a range of activities and we heard about some positive outcomes for individuals, for example, increased cooking abilities and some who had developed their skills in the on-site workshop where very impressive things were made. This had also led to some wider community involvement and was a good example of what could be achieved when the right approach and resources were in place. We also joined a group who were discussing activities/events that had taken place or that they were planning. The focus was on group activities and people seemed enthusiastic and engaged about what was being planned.

However, when we assessed if people were getting the most out of life, we found a mixed picture overall and people would really have benefited from more emphasis being put on identifying and supporting their individual needs and wishes. This would require key workers to be more involved in helping people to plan their day without such a reliance on activity co-coordinators to plan and facilitate the things that people did. In addition, during a discussion with relatives the view was expressed that more transport options were needed, particularly because of the service's rural location.

People who communicated in different ways did not have these needs met because workers had not been provided with the appropriate training to support them to communicate their thoughts and wishes. For example, there was very limited knowledge of Makaton amongst the staff team even though several people used this communication method. We were told that 'Talking Mats' training had been arranged and that the service was establishing closer links with the local Speech and Language Therapy service. These were positive steps; however, more effort was needed to make sure that each person was supported to communicate in the ways that were right for them.

People and their relatives told us that they felt a sense of safety and security that the service had a nurse led team. The service was proactive in supporting people to regularly access external health supports when this was required. In addition, we heard about examples of health promotion, working in partnership with the local

community learning disability team. This meant that people were supported to make informed lifestyle choices affecting their health and wellbeing and were helped to use relevant screening and healthcare services.

When it came to supporting people with their mental health needs, we found that workers had not been provided with the necessary training and development opportunities to allow them to fully understand people's needs in relation to mental health. As a result, we could not be confident that mental health support was always based on relevant evidence, guidance and best practice.

The Orchard Court part of the service supported a group of people who had a varied mix of personalities and needs. They must regularly assess the overall size and composition of the group and make every effort to support people to resolve conflict, agree rules and build positive relationships with each other as much as possible. This would ensure that each person's individual needs can be met, and that people are experiencing care and support that is right for them.

Requirements

1. By 31 August 2020 where people's independence and choice are restricted, this is justified, kept to minimum and done sensitively. The service must ensure that:

- a) That no person is subjected to physical restraint unless it is the only practicable means of securing their, or other people's, welfare.
- b) The use of restraint is necessary to prevent harm to the individuals and was the least restrictive option available.
- c) The Mental Welfare Commission guidance 'Rights, Risks and Limits to Freedom' is adhered to; and
- d) Workers have the skills, knowledge and understanding to respond to individual needs and to follow the above guidance and individual support plans.

This is in order to comply with Regulation 4 (1) (a) and (c) and 9 (2) (b) of the Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/210)

Areas for improvement

1. The service should have clear adult support and protection reporting procedures in place that are easily accessible for workers to follow if they become aware of any person who has been harmed or is at risk of harm. This is in line with best practice guidance from:

The Scottish Social Services Council (SSSC) Codes of Practice for Employers requires that care providers:

2.1 Put into action and monitor written policies and procedures, particularly about reporting allegations of harm or abuse to the relevant authority.

Also,

This is in order to ensure that care and support is consistent with the Health and Social Care Standard which states: 'I am protected from harm, neglect, abuse, bullying and exploitation by people who have a clear understanding of their responsibilities.' (HSCS 3.20)

How good is our leadership?

2 - Weak

We assessed the performance of the service in this area as weak, meaning there were important weaknesses with priority action required to improve the leadership of the service at all levels.

Workers told us that their morale was low, about how they felt isolated and that there had been a lack of communication, direction and support. They were not aware of any planned improvements or about current service objectives. We found a fragile atmosphere at the service that could affect the outcomes for the people supported, including having a negative impact on their anxiety levels. We spoke with the provider about our concerns and highlighted the urgent need for a system of effective management and leadership to be put in place in order to restore workers confidence and morale.

The service had been without a formally registered manager since 27 November 2019 and this had resulted in a lack of clear direction and support for workers with depute managers and seniors having to take on additional responsibilities that took the focus away from their own job roles. Therefore, people could not be confident that they were supported by a service and organisation that was well led and managed. **(See requirement 1)**

We were informed that a new, permanent manager would be appointed in the next few weeks and expect a formal notification to be made as soon as this takes place.

Requirements

1. By 30 June 2020 the service must ensure that it has a registered manager in post who:

- a) Has the necessary skills and experience to lead the improvement work that is required.
- b) Will put in place systems that support effective team-working and communication.
- c) Will put in place systems to provide more effective analysis of incidences where physical restraint was used.

This is in order to comply with Regulations 3, 4 (1) a) (b) and (c) and 7 (c) of the Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011. (SSI 2011/210)

How good is our staff team?

2 - Weak

We assessed the performance of the service in this area as weak, meaning there were important weaknesses with priority action required. Some strengths were identified, however, workers needed more direction, guidance and support and to work more effectively as a team to improve people's experiences and outcomes.

There had been a significant lack of training and development opportunities for a team who were supporting people who had a wide range of support needs. This included; learning disability, mental health, autism, forensic, and other complex needs. We also found that there was too much focus on training workers to be able to use reactive strategies, for example, physical restraint, and not enough time devoted to educating workers in support strategies such as Positive Behaviour Support (PBS) that could, if applied effectively, reduce the need for physical restraint to be used. This meant that people's needs were not being consistently met because workers were not sufficiently trained, competent and skilled to support them in line with the relevant evidence, guidance and best practice. **(See requirement 1)**

New worker inductions did not appear to have adequately prepared them to support the complexities of the needs of some of the people who used the service. This had been recognised by the service and they had planned to develop a much more bespoke induction for new workers. We will follow this up at the next inspection.

Workers did have the opportunity to have one to one supervision meetings but would benefit from more time to reflect on their practice to support improved outcomes for people. We encouraged the service to introduce regular observations of practice for workers in order to highlight positive practice, and to support improvements in practice where these were identified. This would ensure that workers were able to reflect on their practice and follow their professional and organisational codes enabling them to provide better support for people who used the service.

Requirements

1. By 31 August 2020 workers employed in the provision of care and support must have the skills and support required for their role from taking part in effective induction, training and supervision. In order to achieve this the provider must ensure that:
 - a) There is on going assessment of workers competence and skills in relation to the identified needs of people supported by the service.
 - b) Workers receive training based on the above assessment.
 - c) There are effective systems in place to monitor that workers are competent and skilled to fulfil their job role.

This is in order to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that: '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)

And in order to comply with Regulation 15 (b) (i) of the Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulation 2011. (SSI 2011/210)

How good is our setting?

This key question was not assessed.

How well is our care and support planned?

3 - Adequate

We assessed performance in this area as adequate as there were some strengths but these just outweighed weaknesses. Strengths may still have a positive impact but the likelihood of achieving positive experiences and outcomes for people was reduced because key areas of performance need to improve.

Each person had a paper copy support plan and an online plan and although the key information required for each person was contained within them it was not clear how effective this system was as a means of supporting people's needs. For example, we found information in paper files that was not replicated in the online version. The service had recognised the need for a more user-friendly version of each person's support plan that would provide the most up-to-date, and easy to follow, information regarding their needs.

There was a need for more detailed communication support planning and, overall, plans were not always being updated and evaluated within the service's specified timescales. Improvements in those areas would ensure that plans clearly set out how needs would be met, as well as people's wishes and choices. We will follow this up at the next inspection.

People had activity planners that were linked to their individual preferences but these often related to leisure activities and more thought should be put into how to help people plan a more meaningful day involving all aspects of daily living and improving their skills and abilities in the things that were important to them. This would mean that people were able to get the most out of life because the people who supported and care for them had an enabling attitude and believed in their potential.

The service supported people to have regular review meetings that involved key people involved in their lives. We would encourage them to make sure that they use these meetings to discuss future goals/outcomes for people and to help people put forward their views on how the service was meeting their needs.

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

Requirements

Requirement 1

The provider must demonstrate that all personal plans record all risk, health, welfare and safety needs in a person centred manner which identifies how needs are met. In order to do this the provider must ensure that documentation and records are accurate, sufficiently detailed and reflect the care planned or provided for people.

To be completed by: 05 January 2020

This is in order to ensure that care and support is consistent with Health and Social Care Standard which states: 'My needs, as agreed in my personal plan, are fully met, and my wishes and choices are respected.' (HSCS 1.23)

This is in order to comply with:

Regulation 4(1)(a) of The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/210)

This requirement was made on 25 November 2019.

Action taken on previous requirement

Personal plans identified needs in a more person centred manner and reflected care planned and individual preferences.

Met - within timescales

Requirement 2

People using the service should be able to freely access a range of activities that will improve the quality of their lives. In order to achieve this the service must develop a structured activity system that takes account of people's

needs and wishes. The service will ensure that resources are available to ensure that any activity system is sustainable.

To be completed by: 05 January 2020

This is in order to ensure that care and support is consistent with Health and Social Care Standard which states: 'I can choose to have an active life and participate in a range of recreational, social, creative, physical and learning activities every day, both indoors and outdoors.' (HSCS 1.25)

This is in order to comply with:

Regulation 4(1)(a) of The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/210)

This requirement was made on 25 November 2019.

Action taken on previous requirement

Progress had been made with this requirement and there was a programme of activities in place, primarily based around group activities. However, the service must focus more on supporting people to achieve their individual outcomes and assess what activities are meaningful for each person.

Not met

Requirement 3

In order to ensure that people living in this care home have their needs safely met by staff who have the necessary skills and competencies, the provider must ensure that staff experience regular training and refresher training when required.

The provider must also ensure that staff are registered with the appropriate professional bodies and are aware of their professional and organisational codes.

To be completed by: 05 January 2020

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

This is in order to comply with:

Regulation 9(2)(b) of The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/210)

This requirement was made on 25 November 2019.

Action taken on previous requirement

Insufficient progress had been made with ensuring that staff had the necessary skills and competencies and appropriate training had not been provided.

All staff were now registered with the appropriate professional body.

Not met**Requirement 4**

In order to promote the health, wellbeing and safety of service users, the manager should ensure that notifications are made to the Care Inspectorate in line with good practice guidance; records that all registered care services (except childminding) must keep and guidance on notification reporting.

To be completed by: 05 January 2020

This is in order to ensure that care and support is consistent with Health and Social Care Standard which states: 'I use a service and organisation that are well led and managed.' (HSCS 4.23)

This is in order to comply with:

Regulation 4(1)(a) of The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/210)

This requirement was made on 25 November 2019.

Action taken on previous requirement

The service had improved its practice in this area and the required notifications were now being made to the Care Inspectorate.

Met - within timescales**Requirement 5**

The provider must demonstrate that staff supervision is provided in accordance with the provider's policy and procedures in order to ensure that staff are supported.

To be completed by: 05 January 2020

This is in order to ensure that care and support is consistent with Health and Social Care Standard which states: 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)

This is in order to comply with:

Regulation 4(1)(a) of The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/210)

This requirement was made on 25 November 2019.

Action taken on previous requirement

The provider's staff supervision policy is for three one to one supervision meetings and an annual appraisal. There was evidence of meetings having taken place and future dates planned.

Met - within timescales

Requirement 6

In order to promote the health, well being and safety of service users, the provider must ensure that the level of staffing is adequate to provide the assessed level of support to service users at all times.

To be completed by: 05 January 2020

This is in order to ensure that care and support is consistent with Health and Social Care Standard which states: 'My care and support meets my needs and is right for me.' (HSCS 1.19)

This is in order to comply with:

Regulation 15(a) of The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/210)

This requirement was made on 25 November 2019.

Action taken on previous requirement

Staffing levels now appeared to be adequate to provide the assessed level of support.

Met - within timescales

Complaints

Please see Care Inspectorate website (www.careinspectorate.com) for details of complaints about the service which have been upheld.

Detailed evaluations

How well do we support people's wellbeing?	2 - Weak
1.1 People experience compassion, dignity and respect	2 - Weak
1.2 People get the most out of life	2 - Weak

1.3 People's health benefits from their care and support	3 - Adequate
How good is our leadership?	2 - Weak
2.3 Staff are led well	2 - Weak
How good is our staff team?	2 - Weak
3.2 Staff have the right knowledge, competence and development to care for and support people	2 - Weak
How well is our care and support planned?	3 - Adequate
5.1 Assessment and care planning reflects people's planning needs and wishes	3 - Adequate

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