

The National Autistic Society - Central Scotland Services Housing Support Service

109 Hope Street
Glasgow
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Telephone: 01412218090

Type of inspection:

Unannounced

Completed on:

6 February 2020

Service provided by:

The National Autistic Society

Service provider number:

SP2004006215

Service no:

CS2007162782

About the service

The National Autistic Society - Central Scotland Services is a combined Housing Support and Care at Home service. It comprises supported living and community outreach. The supported living service is located in Springburn where supported people live in a modern tenement block and there are flats for five people. There are currently ten people receiving the outreach service in the community. The service's main office base is located in the centre of Glasgow.

The service aims, "to create a positive caring environment that promotes development, independence and life skills." Supported individuals are "encouraged and supported to develop skills through a range of experiences where emphasis is given to social skills, the development of meaningful recreational and leisure activities, group living and a commitment to ensuring they learn for life."

What people told us

Generally we heard positive comments regarding the support planned and use of reviews to hear service users' views. Comments included:

"My support manager asks me about my support workers and really wants me to be honest. Budget cuts and needing a more expensive service leaves me with not enough time to carry out agreed support and care."

"I have to phone to find out where staff member is and they tell me just as support is about to start. I get to choose my support times which is really positive."

"Staff are easy to talk with and I use a diary to be in control."

"I am in charge of my support when it happens, what I do. These days better matches are made, and I am always told to speak up if things are not working. This culture is very important for my mental health as I was silenced as a child."

Aspects of care planning that people were not happy with included:

"The manager wants to send me my support plan documents for me to complete via email, however I would find it easier to do it in person rather than via email to discuss it. I know people have different opinions, but I would prefer to speak for myself as only I am able to say how I feel or why I would act a certain way."

Self assessment

The service were not asked to supply a self assessment for this inspection year.

From this inspection we graded this service as:

Quality of care and support	5 - Very Good
Quality of staffing	not assessed
Quality of management and leadership	5 - Very Good

What the service does well

We could see that staff saw people as experts in their own support and their views were always sought in any decisions about their care. We could see that the service had a strong ethos of consultation and participation by taking actions arising from the various events, meetings and care reviews. These gave comprehensive information about each person.

There was strong emphasis of promoting and maintaining people's health and wellbeing of being supported to live healthy lifestyles by promoting healthy diets and exercise. We saw many examples of opportunities for people to get out and about and take part in activities. Risk assessments in place were up-to-date and relevant to the current needs of each person.

Service users told us how they were involved in the assessment and support planning process. There was a very high level of detail found in the support plans which were individualised. Responses were generally positive and had been actioned.

Service users told us that they had their own dedicated staff team and were fully involved in making decisions about their support. People told us that they felt respected and that their wishes and preferences had been used to shape how they were supported. Families and people using the service told us that the staff team were approachable. People using this resource told us that they had confidence that staff used methods that reflected up-to-date knowledge and best practice guidance. This helped service users maintain a high level of control while staff had promoted choices. We were told that people felt that consistent approaches had helped them to have maintained their dignity and self-esteem.

Support plan information detailed the agreed activities for the service user and were introduced in line with the needs and wishes of each individual. The staff team confirmed that meetings and supervision were taking place regularly to have kept them informed about changing needs and service users told us that this effective communication helped to individualise each support plan.

Healthcare was well monitored and managed and there were established links in place with other healthcare staff like GP's, district nurses and speech and language therapists. Record keeping held by the service indicated that health care needs were promoted, and service users felt at ease to make their opinions known. The exchange of information was person centred and specific. Minutes of meetings were written using plain English which service users told us assisted with the understanding of the content.

There was a high priority given to making sure that the people using the service felt safe, listened to and well supported in a way that met their needs in accordance with their individual choices and preferences. Staff interviewed confirmed that an ethos of respect was expected and promoted and stated that this helped to ensure that respect for people and a right to dignity was always encouraged. Staff confirmed that they documented and practiced providing personal support in a sensitive manner. Practical support was provided to service users to help them express their opinions and views to fully participate in the opportunities provided. This had resulted in service users experiencing improvements to the quality of care and support.

What the service could do better

Archiving needs to take place within support plans to assist with clarity to ensure that service users understand and have a lead in the content of information. The service should continue to explore the effective use of reviews undertaken, their content, as agreed with each service user. These should all be completed within planned timescales in formats that work for each individual. (See recommendation 1).

Requirements

Number of requirements: 0

Recommendations

Number of recommendations: 1

1. More robust archiving needs to take place within support plans to assist service users to understand and to follow the content easier. Only current information contained in each support plan from the previous review, where appropriate, will ensure less repetitive information and will help with clarifying the current needs of each individual when identifying positive outcomes achieved.

This will ensure care and support is consistent with the Health and Social Care Standards, which state: "My care and support meets my needs and is right for me."
(HSCS 1.19)

Complaints

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

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

To ensure everyone can feel confident in receiving continuity of support, the manager should continue to review and improve staffing resources available to the service and minimise the need to use those agency staff who are unfamiliar with the person's needs and preferences.

This will ensure care and support is consistent with the Health and Social Care Standards, which state: "My care and support is consistent and stable because people work together well" (HSCS 3.19).

This recommendation was made on 21 May 2018.

Action taken on previous recommendation

Agency staff that are employed are familiar with the service and there are now no vacancies within the service. This recommendation is now Met.

Recommendation 2

To ensure that people's care and support needs are appropriately met, managers should,

- a. carry out tighter audits of support plans which are time-bound and
- b. adopt a more outcome focused approach to support planning that clearly measures how well the outcomes that matter most to people are being achieved.

This will ensure care and support is consistent with the Health and Social Care Standards, which state: "My care and support meets my needs and is right for me." (HSCS 1.19)

This recommendation was made on 21 May 2018.

Action taken on previous recommendation

- a. PCP champions are now in place and action has been taken to meet time frames, however organization needs to give more credit to own reviews – staff key team meetings could meet timeframes if recognized.
- b. Support planning is more focused. This recommendation is now Met.

Recommendation 3

To ensure that people are suitably informed about what the service has to offer, the manager should devise a welcome pack of information in appropriate formats as soon as possible.

This will ensure care and support is consistent with the Health and Social Care Standards, which state: "I receive and understand information and advice in a format or language that is right for me." (HSCS 2.9).

This recommendation was made on 21 May 2018.

Action taken on previous recommendation

Welcome packs are now individualised. This recommendation is now Met.

Recommendation 4

To ensure that people are protected by robust staff safer recruitment procedures, the service provider should adhere to good practice guidance (Safer Recruitment through Better Recruitment, 2007) and include as standard the examination of prospective employees' declared qualifications prior to them starting with the service.

This will ensure care and support is consistent with the Health and Social Care Standards, which state: "I am confident that people who support and care for me have been appropriately and safely recruited." (HSCS 4.24)

This recommendation was made on 21 May 2018.

Action taken on previous recommendation

Clearly following best practice guidance, paperwork supports this. This recommendation is Met.

Recommendation 5

In order to ensure family carers' and supported individuals' have confidence in experiencing consistent and appropriate staff conduct and practice, managers should provide staff with opportunity to discuss and reflect on good practice guidance at meetings.

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) and, "I experience high quality care and support based on relevant evidence, guidance and best practice." (HSCS 4.11).

This recommendation was made on 21 May 2018.

Action taken on previous recommendation

Appraisals pro-forma clearly demonstrates that this is met. Complemented by shadow shifts. Recommendation has been Met.

Recommendation 6

The manager should embed regular direct observation of practice for the whole service workforce into quality assurance processes, so that supported individuals and family carers can be assured of consistent and professional staff conduct and practice.

This will ensure care and support is consistent with the Health and Social Care Standards, which state: "I am actively encouraged to be involved in improving the service I use, in a spirit of genuine partnership." (HSCS 4.7) and, "I benefit from a culture of continuous improvement, with the organisation having robust and transparent quality assurance processes."

This recommendation was made on 21 May 2018.

Action taken on previous recommendation

Appraisals clearly triangulate-all views. Recommendation has been Met.

Recommendation 7

To ensure that when things go wrong, failings are properly identified and dealt with and people's human rights remain firmly at the centre of management's actions, the manager should receive the organisation's investigation training, which was developed in the aftermath of the Mendip House scandal.

This will ensure care and support is consistent with the Health and Social Care Standards, which state: "My human rights are central to the organisations that support and care for me." (HSCS 4.1)

This recommendation was made on 21 May 2018.

Action taken on previous recommendation

Management team have all received training under this area, confirmed by interviews and records held. Recommendation has been Met.

Inspection and grading history

Date	Type	Gradings
16 Apr 2018	Unannounced	Care and support 4 - Good Environment Not assessed Staffing 4 - Good Management and leadership 4 - Good
2 May 2017	Unannounced	Care and support 3 - Adequate Environment Not assessed Staffing 3 - Adequate Management and leadership 3 - Adequate
28 Oct 2016	Unannounced	Care and support 2 - Weak Environment Not assessed Staffing 2 - Weak Management and leadership 2 - Weak
14 Dec 2015	Unannounced	Care and support 4 - Good Environment Not assessed Staffing 4 - Good Management and leadership 4 - Good
15 Dec 2014	Unannounced	Care and support 3 - Adequate Environment Not assessed Staffing 3 - Adequate Management and leadership 3 - Adequate
6 Jan 2014	Announced (short notice)	Care and support 4 - Good Environment Not assessed Staffing 4 - Good

Date	Type	Gradings	
		Management and leadership	4 - Good
25 Jan 2013	Unannounced	Care and support	4 - Good
		Environment	Not assessed
		Staffing	4 - Good
		Management and leadership	4 - Good
26 Apr 2010	Announced	Care and support	4 - Good
		Environment	Not assessed
		Staffing	Not assessed
		Management and leadership	5 - Very good
19 May 2009	Announced	Care and support	4 - Good
		Environment	Not assessed
		Staffing	4 - Good
		Management and leadership	4 - Good

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