

Options Fife Housing Support with Care at Home Housing Support Service

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Type of inspection:
Unannounced

Completed on:
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Service provided by:
Aberlour Child Care Trust

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CS2021000064

About the service

Options Fife Housing Support with Care at Home is a housing support service for young people with additional support needs. This support is provided in their own home and in the community. The service provider is Aberlour Child Care and the service has been registered with the Care Inspectorate since May 2021.

The service provides support to a maximum of four young people, although there was only two young people at the time of inspection. The service comprises of a modern block of five purpose built flats, situated in a residential area of Glenrothes, close to local amenities. The one bedroom flats contain a kitchen/living room area and bathroom. One of the flats is currently used as a staff base and office. There is also a large shared outdoor garden area attached to the building.

It should be noted that this inspection took place during the Covid-19 pandemic restrictions and therefore followed revised methodology for conducting inspections in these circumstances.

About the inspection

This was an unannounced inspection which took place over three days - 17 June 2022 from 10am to 5pm, 20 June 2022 from 9am to 6.30pm and 21 June 2022 from 9am to 4pm. The inspection was carried out by two inspectors from the Care Inspectorate. To prepare for the inspection we reviewed information about this service. This included registration information, information submitted by the service, and intelligence. To inform the inspection, we:

- spent time with the young people living at the service and spoke to two parents
- spoke with seven staff including managers
- observed practice and daily life
- reviewed documents
- spoke with two external professionals

Key messages

- Young people were effectively supported to enjoy family time
- Multiagency partnerships could benefit from improved coordination to support a shared understanding of young people's needs
- Access to independent advocacy for all young people should be put in place by the service
- Young people were supported to use communication aids and make choices
- Young people need to be more connected to the wider community and have the opportunity to enjoy a range of activities
- The majority of staff considered they were supported effectively by management
- Staff were confident about their safeguarding role to enable young people to feel protected
- Young people's experiences could be improved by quality assurance processes being strengthened
- Assessment of the suitability of placements requires improvement.

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?	3 - Adequate
How good is our leadership?	3 - Adequate
How good is our staff team?	3 - Adequate
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?

3 - Adequate

We evaluated this key question as adequate, where strengths just outweigh weaknesses.

The young people benefited from staff who were respectful, warm, and compassionate. Staff spoke in a nurturing way towards and about the young people and were sensitive to their complex needs. Staff used communication aids to promote choice, and this supported the young people to share their preferences.

The young people were encouraged to develop confidence with independent living skills, and the service effectively recognised the diverse needs of the young people which supported their individual outcomes. Family time was also prioritised, with one parent telling us that "family time is great - I can come as and when I like."

Legal Guardianship Orders were in place for both young people, and the service had adapted and improved processes over time to ensure guardians were involved at all levels of decision making, promoting effective working relationships. Staff were committed to advocate and challenge on behalf of the young people, however it is important that the service is proactive regarding establishing independent advocacy for all young people (area for improvement 1).

Staff were confident regarding their responsibilities towards protecting young people from harm and could advise of the processes in place. They were knowledgeable regarding the general health needs of the young people and were keen to celebrate achievements with the young people. This included identifying improved communication skills and increased independence.

Young people were involved in activities such as fishing, stock car racing, local walks and visits to places of interests, and staff were knowledgeable about what they enjoyed. However their connections with the community they live in were limited, with neither young person being part of local clubs, groups or education. Staff also commented that the service could improve on the activities available to young people. The service should be more creative in ensuring there is consistency of opportunity for all young people to develop and explore interests they enjoy to get the most out of life (area for improvement 2).

The service demonstrated positive examples of young people accessing primary health services, and psychology had been involved in direct training for some of the staff team. There should be greater multi agency coordination, which would support the staff to achieve improved understanding of the health complexities of the young people, develop strategies to manage specific behaviours and ensure there is ongoing assessment of current and future needs. (see quality indicator 5.1).

At the time of inspection, staff were up to date with training in medication, and issues regarding competency were effectively dealt with by the service. We undertook a check of the medication and have fed back to the service regarding necessary improvements to ensure young people benefit from a safe medication system (area for improvement 3).

Young people did not have consistently well maintained accommodation and this potentially negatively impacts on young people's sense of belonging and self worth. The service, whilst not responsible directly for the environment, should ensure that young people's rights, which may be impacted by accommodation issues, are met (area for improvement 4).

Areas for improvement

1. To ensure young people's rights, views and choices are supported, the provider should identify an independent advocacy service.

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

I am supported to use independent advocacy if I want or need this (HSCS 2.4).

2. To support young people's health and wellbeing, and support them to get the most out of life, the provider should improve the opportunities for young people to take part in meaningful activities.

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

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)

3. To safeguard and promote young people's health and wellbeing the service must improve their management of medication.

This is to ensure 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)

4. To promote wellbeing and ensure young people's accommodation and environment are maintained to a high standard, the provider should revisit the agreement in place with the housing association to support maintenance being prioritised.

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

I experience an environment that is well looked after with clean, tidy and well maintained premises, furnishings and equipment (HSCS 5.22)

How good is our leadership?

3 - Adequate

We made an evaluation of adequate for this key question as there were some strengths, but these just outweigh weaknesses.

We were concerned that the service was not undertaking any formal self evaluation. As a result, they could not evidence in any detail that improvement was being driven by best practice to meet the needs of the young people. The development plan could also benefit from being more young person focussed, taking into account service user and stakeholders views.

The aims and objectives for the service were not clear, and the service has been unable to fully meet the needs of one of the young people, impacting negatively on outcomes and leading to barriers for key stakeholders to overcome. Options Fife had placement assessment paperwork in place; however, this would benefit from a clear vision of who the service can support, matching this with the skills, knowledge and staff numbers. This would reduce the likelihood of placement breakdown and further transitions for young people (area for improvement 1).

The manager had plans to implement a comprehensive quality assurance process, but this is still a work in progress and requires further action to ensure this is fully embedded to identify learning and enable improvement. This process could be further enhanced by developing the external oversight activity from senior managers, to promote care that is aspirational, driven by a clear understanding of the young people's need and supports the service to make improvements for the current and future young people (area for improvement 2).

The service had an effective incident analysis procedure. Incidents were consistently followed up by management, with the opportunity for staff to reflect and learn. Feedback from the vast majority of staff indicated that they were confident in raising concerns and suggestions to management, and the service was able to demonstrate a robust complaints procedure.

Areas for improvement

1. For young people to have the service that is right for them, the provider should ensure that decisions regarding admissions are fully informed.

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

My care and support meets my needs and is right for me (HSCS 1.19).

2. To support continuous improvement and meet young people's changing needs, the provider should improve their quality assurance processes.

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

I benefit from a culture of continuous improvement, with the organisation having robust and transparent quality assurance processes (HSCS 4.19).

How good is our staff team?

3 - Adequate

We evaluated this key question as adequate as there were some strengths, but these just outweigh weaknesses.

Aberlour has a suitable induction process in place, and staff completion of mandatory training in this service was high. Beyond this, there were a range of training opportunities, however we did not have confidence that this matched the complexity of the needs of the young people in the service. Bespoke learning opportunities, along with a clear assessment of need for staff will ensure they have the relevant skills to support young people to meet their full potential (area for improvement 1).

For one of the young people, Options Fife staff did not have the appropriate skills to safely and competently meet their needs, resulting in another provider delivering day to day care. This has stabilised the placement, however created a further transition for the young person, and consistent relationships had to be reestablished.

Overwhelmingly staff were clear about their role in challenging poor practice and could identify key individuals within the organisational structure to approach. We were impressed by the regular and well planned supervision and appraisal for the Options Fife staff. Team meetings also routinely took place which provided a further opportunity to support best practice. The service does use a core group of agency staff which raises concern regarding consistency for the young people, and Options Fife should ensure that the level of supervision/support in place for these staff recognises the complexities of the young people.

Regarding the agency exclusively caring for one of the young people, these staff were not directly managed or formally supervised by Options Fife which diluted accountability. Formal governance arrangements would provide further protection for the young person and clear direction for staff (area for improvement 2).

Areas for improvement

1. To support the wellbeing and development of young people, the provider should ensure staff access specialist training appropriate to their role, and apply this to practice.

This is 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)

2. To ensure young people are safe and protected, the provider should ensure there is a formal agreement in place with the agency providing day to day care on their behalf which details governance and accountability of practice. This should include but is not restricted to whistleblowing and complaints procedures.

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

I am protected from harm, neglect, abuse, bullying and exploitation by people who have a clear understanding of their responsibilities. (HSCS 3.20)

How well is our care and support planned?

3 - Adequate

We made an evaluation of adequate for this key question as there were some strengths, but these just outweigh weaknesses.

Young people had individualised personal plans which all staff could meaningfully contribute towards. These had positive examples of routines, likes, dislikes and ways the young person may use to communicate with staff. Plans would benefit from being more aspirational, and despite young people being supported and progressing in a variety of ways these were not sufficiently captured in the documents to measure and detail progression (area for improvement 1).

To ensure there is a consistent, well informed approach to meeting the needs and safety of young people, the service should establish behaviour support plans for both young people, and risk assessments should be enhanced. A multi agency approach towards these would ensure they are truly enabling documents to promote young people to have a greater range of experiences, rather than solely maintaining current stability levels (area for improvement 2).

Those we spoke to advised of a number of scheduled meetings consistently taking place to review the care and support for the young people. Many of the professionals attending were not directly involved with the young people, staff providing day to day care for one young person did not attend, and during inspection we did not have sight of any minutes or recordings of these meetings. Additionally, the views of the young people and legal guardians were not represented through this process. This made it difficult to identify how care was being coordinated, what actions were being progressed and how young people's outcomes were being measured (area for improvement 2).

Areas for improvement

1. To support effective planning for young people, the service should ensure care plans are SMART, outcome focused, and reflect the variety of ways young people are being supported.

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

My personal 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)

2. To promote children and young people to get the most out of life, the provider should ensure there are multi agency partnerships and collaborations in place which facilitate care planning processes, and these meetings are consistently recorded.

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

If I am supported and cared for by a team or more than one organisation, this is well coordinated so that I experience consistency and continuity (HSCS 4.17)

I benefit from different organisations working together and sharing information about me promptly where appropriate, and I understand how my privacy and confidentiality are respected (HSCS 4.18).

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?	3 - Adequate
1.1 People experience compassion, dignity and respect	4 - Good
1.2 People get the most out of life	3 - Adequate
1.3 People's health and wellbeing benefits from their care and support	3 - Adequate

How good is our leadership?	3 - Adequate
2.2 Quality assurance and improvement is led well	3 - Adequate

How good is our staff team?	3 - Adequate
3.2 Staff have the right knowledge, competence and development to care for and support people	3 - Adequate

How well is our care and support planned?	3 - Adequate
5.1 Assessment and personal planning reflects people's outcomes and wishes	3 - Adequate

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