

Cantray Square Housing Support Service

Housing Support Service

House 9. Cantray Square
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Inverness
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Telephone: 01667 493 500

Type of inspection:
Unannounced

Completed on:
3 November 2022

Service provided by:
Cantraybridge

Service provider number:
SP2003001718

Service no:
CS2004073116

About the service

Cantray Square service is a housing support and care at home service provided by Cantraybridge Ltd. It is for young adults with additional support needs.

Many people who the service support stay in their own flat or house at Cantray Square. However, there are others who use the service who live in other locations in the Inverness and Nairn areas.

About the inspection

This was an unannounced inspection which took place on 28 and 31 October and 1 November 2022. The inspection was carried out by one inspector from the Care Inspectorate. To prepare for the inspection we reviewed information about this service. This included previous inspection findings, registration information, information submitted by the service and intelligence gathered since the last inspection. In making our evaluations of the service we:

- spoke with six people using the service and four of their family
- spoke with five staff and management
- observed practice and daily life
- reviewed documents
- spoke with visiting professionals.

Key messages

- People were very happy with the Cantray Square service.
- There was a very positive and relaxed atmosphere.
- The support provided had made a big difference to people.
- People kept up with family and important others if that was what they wanted.
- Staff and management were knowledgeable, caring and kind.
- The service worked well with other services and agencies.
- This service had a clear vision and people were at the centre of their support.
- Relatives were happy and had trust in the staff and management team.
- People had a lot of say and involvement in how the service was provided.
- Some improvement is needed for how training is organised.
- Quality assurance systems could be made more robust.

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?	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

We evaluated the service as very good at supporting positive outcomes for people. There were major strengths and very few areas to improve in.

People were very well supported with their health and wellbeing. Staff had a relaxed, friendly manner and people were comfortable in their company. Positive, trusting relationships had been built up and this usually meant that people were happy to raise matters about their health or wellbeing with a staff member.

People were supported by staff who knew them well and had good guidance and information about any health conditions they may have. People expressed their views and wishes for their support. They were listened to and the service sought to meet their needs and wishes in ways that suited them. People got person centred support and were respected. People were able to develop their abilities and grow in confidence.

When a person had a complex health condition, there was detailed information to guide staff. This helped people keep well and content. People could also occasionally experience some stress or upset in their lives. Staff had a very good understanding of this and knew how to appropriately support a person in a way that individually suited them. People had confidence in their staff.

To also ensure people's health and wellbeing was supported as well as it could be, the service had suitable systems for health support matters such as medication. Suitable records for a person's care and support were completed, including for medication, any health changes or accidents. The service also worked very well with key other agencies including the NHS and social work. People can trust that agencies involved in their support work well together.

People's abilities, decision making and confidence were all encouraged and supported at this service. People were centrally involved in their support plan. The focused support enabled people to gain more and new skills. People's confidence in themselves was boosted.

As well as getting on with the day to day matters of life, such as shopping and looking after their own homes, people had many opportunities to do other things they enjoyed. Socialising with others, keeping up with family, going on a trip or to the cinema were some examples of this. People were enjoying getting the most out of life.

Before starting the service and during the time they got support from the service, people were supported to give their views and wishes. Family members and key professionals were involved and this helped to make sure that people's needs and wishes were always fully and carefully considered. Regular and meaningful review meetings took place. All these steps helped to make sure people were being supported by a service that was able to meet their wishes and outcomes.

When people were planning a change in their life, the service was very good at making sure that any planning, discussion and meetings were organised to assist a person to succeed. Depending on their wishes people were able to make the most of opportunities and resources in their community. New interests were pursued and other learning or work opportunities engaged with.

The service had measures in place to support infection prevention and control (IPC) and minimise the

chances of infection spread. Staff had received guidance and training on IPC. They understood when it would be necessary to wear personal protective equipment (PPE), for example masks, and were kept up to date with any changes in guidance. If the service was experiencing an outbreak of an infectious disease, additional measures would also be followed. People were supported to keep safe and well by the service's actions for IPC.

The service had resources for cleaning and disinfecting and had sufficient stock of PPE. Senior staff carried out checks, including supporting staff to follow the appropriate IPC guidance at all times. There were monitoring sheets for cleaning and keeping the service environment safe from infection risk. Overall, these were well completed but there were gaps. We advised management of this and for the need to keep a focus on staff's IPC training and practice. By doing this, the service will be prepared and quickly able to respond to any infection risks. Again, helping staff to keep informed and up to date in their IPC practice assists people to keep safe and avoid any unnecessary infection risks.

How good is our leadership?

5 - Very Good

We evaluated the service as having very good performance in this area. There were many strengths with only a few areas needing to improve. The main focus was on quality assurance and improvement being well led.

People had many different opportunities to put forward their views and wishes. This was both on an individual level and at a group level. The service fully understood the importance of people's involvement and contribution for their own care and support decisions and planning. As a group people had opportunities to decide on matters that effected the whole service. An example was the DC Gaze group that came up with ideas for activities, suggestions for changes and improvements to the service, as well as providing opinions and helping to decide on other matters in the service. It was very good to see how people's expertise and knowledge would inform the service's provision.

Communication within the service was very good. Staff were insightful into people's needs and wishes and they had regular opportunities to speak with other staff and senior staff about people. Staff were responsive and would notice if a person was not their usual self or experiencing some difficulty. People can be reassured that staff will aim to make sure the support provided is just right for them.

The service promoted positive and respectful values. Staff supervision and team meetings were in place. At these meeting the importance of values were promoted and staff were able to discuss people's wishes and outcomes, how well the service was meeting these and whether any changes were needed. As well as this, there were daily opportunities to discuss the support provision as a group of staff and senior staff. This all contributed towards both considering and providing high quality care and support based around the outcomes and wishes of each person.

As part of quality promotion, it was very good to see how service policies and documents within people's support folder referenced relevant parts of the health and social care standards. These reinforced the quality, and respect for their rights, people should expect from their care and support.

The management had an active and engaged presence within the service. They were in touch with what was going on for each person and had a good overview of any priority matters. They were approachable and conveyed a readiness and openness to listening. People can have confidence that the management team focus on what are people's wishes and in their best interests.

Improvements were happening on an ongoing basis at the service. Some of the communal spaces within the service were being developed. People were involved in putting forward their improvement ideas. This helped to make sure that these changes enhanced the facilities and opportunities for them.

The service had a quality assurance system in place. There were various checks and monitoring systems for ensuring the service was running smoothly, safely and meeting people's outcomes. Whilst, overall, quality assurance was very good there were some improvements needed. Useful and important information about how well the service was performing was not always easy to find. Better ways for storing and organising information would be beneficial. The quality assurance officer recognised that some further improvements were needed. Areas we identified were clear recording for all staff's training and making sure consistent completion of some care and support documentation always happened. We discussed some examples with the management team. A service having robust, effective and meaningful systems for quality assurance and ensuring positive outcomes for people is important. We advised further work on this so as that people can have full confidence in the management and oversight processes of their service. **(See area for improvement 1)**

Areas for improvement

1. To support positive outcomes for people, the provider should make sure that all necessary quality assurance activities are in place, completed to a good level and actions to address any concerns are always identified and followed up on. This should include, but not limited to, staff training records, management follow up actions for incidents of concern and key performance information for the service.

This is to ensure that care and support is consistent with the Health and Social Care Standard (HSCS) which states that: 'I experience high quality care and support based on relevant evidence, guidance and best practice' (HSCS 4.11) and 'I benefit from a culture of continuous improvement, with the organisation having robust and transparent quality assurance processes.' (HSCS 4.19)

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

Requirements

Requirement 1

The provider must ensure that all staff are sufficiently trained, competent and skilled to identify and respond promptly and appropriately to any protection concerns. This should include: - Ensuring any protection concerns are reported in a timely manner to the relevant agencies and that any necessary immediate action is taken. - Ensuring all staff understand their responsibilities as set out in the SSSC Codes of Practice for Social Service Workers and Employers. - Ensuring all staff have comprehensive training and guidance regarding adult protection, and that this is regularly revisited with staff to check their understanding. - Ensuring the provider's adult protection policy and procedures are reviewed and are accessible to staff.

This requirement was made following a complaint.

To be completed by: 31 March 2022

This is in order to comply with:

Health and Social Care Standard 3.20: 'I am protected from harm, neglect, abuse, bullying and exploitation by people who have a clear understanding of their responsibilities'.

Regulation 4(1)(a) of The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011 No. 210 Social Care)

This requirement was made on 17 September 2021.

Action taken on previous requirement

This requirement was met. The provider was able to evidence actions taken to ensure all relevant staff were provided with training, guidance and supervision to make sure they were aware of matters that would constitute a protection concern, how to respond and appropriately inform others. This helped to make sure people were assisted to be safe and be protected from harm.

Whilst we found the requirement to be met, the service should continue to focus on this area as staff will benefit from further focused learning in this area. We have made an area for improvement in relation to this in the main body of the report under 'How good is our leadership?'

Met - within timescales

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

The provider should ensure they have an effective emergency system in place to support people who use their service. When there are incidents and the emergency system is activated, there should be a review of how effective the system has been. If for any reason the emergency system has not been effective, appropriate action should be taken.

This area for improvement was made following a complaint.

This is in order to comply with:

Health and Social Care Standard 4.11: 'I experience high quality care and support based on relevant evidence, guidance and best practice.'

This area for improvement was made on 7 April 2021.

Action taken since then

The service were able to show suitable responses for incidences of concern. Overall, we found this area for improvement met. However, how information is organised and made easily accessible is still able to be developed more by the service.

Previous area for improvement 2

The service should ensure that agreed levels of communication with people's representatives is maintained, and that all staff are aware of the expectations in this regard.

This area for improvement was made following a complaint.

This is in order to comply with:

Health and Social Care Standard 2.12: 'If I am unable to make my own decisions at any time, the views of those who know my wishes, such as my carer, independent advocate, formal or informal representative, are sought and taken into account.'

This area for improvement was made on 17 September 2021.

Action taken since then

This area for improvement was met. We found the service was regularly communicating with people's representatives and there was suitable understanding and agreement of what and how often this should be for each person's representative.

Previous area for improvement 3

The service should ensure appropriate systems are in place for the use of "when required" medication, including clear guidance on if, when and how it should be used, possible alternative strategies, expected outcomes, and a clearly documented record of instances and patterns of use and whether outcomes are met.

This area for improvement was made following a complaint.

This is in order to comply with:

Health and Social Care Standard 1.19: 'My care and support meets my needs and is right for me'

This area for improvement was made on 17 September 2021.

Action taken since then

This area for improvement was met. There was individual guidance in place for each person who needed support with 'as required' medications. Suitable records were completed by staff.

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?	5 - Very Good
1.1 People experience compassion, dignity and respect	5 - Very Good
1.3 People's health and wellbeing benefits from their care and support	5 - Very Good
1.5 People's health and wellbeing benefits from safe infection prevention and control practice and procedure	5 - Very Good
How good is our leadership?	5 - Very Good
2.2 Quality assurance and improvement is led well	5 - Very Good

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