

# St Joseph's Services - Circle of Best Practice 1 - Housing Support Housing Support Service

St Joseph's Services  
Sycamore House  
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Rosewell  
EH24 9AW

Telephone: 01314 407 200

**Type of inspection:**

Announced (short notice)

**Completed on:**

10 February 2023

**Service provided by:**

St Joseph's Services, a company  
limited by guarantee

**Service provider number:**

SP2015012454

**Service no:**

CS2015335975

## About the service

St Joseph's Services - Circle of Best Practice 1 - Housing Support / Care at Home provides care and support to people in the Bonnyrigg, Rosewell and Penicuik areas of Midlothian.

The vision of St Joseph's Services is where opportunity and inclusion is open for all people with a learning disability, so that they may contribute their gifts to society and live the life they dream of in today's work.

## About the inspection

This was a short notice announced inspection between 30 January and 9 February 2022. We spent time in the office meeting with staff and attending meetings followed by visiting people in their own homes.

To prepare for the inspection we reviewed information about the service. This included previous inspection findings, registration information, information submitted by the service and intelligence gathered since the last inspection.

## Key messages

- St Joseph's values of respect, trust, choice, inclusion, friendship, skills and hope were embedded into day-to-day practice by carers to support positive outcomes for people.
- Supported people's views, wishes and choices were at the centre of the providers focus for continuous improvement and development.
- A positive culture of forward thinking, innovation and of learning from any incidents supported improvement to support improved outcomes for people.
- There was a high level of staff consistency, resulting in meaningful working relationships being established.
- Low staffing levels was impacting some people directly, with not being able to go out of their home or attend health appointments at times.
- There was a need for improvements to be made around maintaining records relating to the care needs of people. The service was aware of this and was implementing improvements.
- Refresher training of staff was behind schedule due to the Covid-19 pandemic and an action plan was in place to make improvements.

## 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
How good is our staff team?	4 - Good
How well is our care and support planned?	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 this key question as very good as the provider demonstrated major strengths in supporting positive outcomes for people. There were very few areas for improvement.

Staff demonstrated the principles of the Health and Social Care Standards including dignity, respect and compassion when communicating with people verbally.

There were very good opportunities for people to influence the development of the care they received. This included participating in the Our Voices Forum, board of advisors, the values group and house meetings. This meant people felt respected and listened to because their wishes and preferences were used to shape how they were supported in their home.

People told us that they were happy where they lived and participated in meaningful activities both within the home and out in their local community. This included leisure pursuits, attending community groups, doing voluntary work, making new friends and visiting family. To support their own learning, many had the opportunity to attend training courses along with staff, widening their knowledge of those who support them and promoting independent living skills.

During periods of Covid-19 restrictions on travel, people benefited from joining online groups including music therapy. People were proud of their involvement and achievements, enhancing their self-esteem and confidence.

Staff were knowledgeable about people's support needs and displayed a strong sense of their duty of care towards people. Relatives spoke positively about the care their family members received.

Comments from relatives included:

*"I feel X receives exceptional care. The carers have X's best interests at heart."*

*"The carers have great compassion to those they support."*

*"I am very happy with the level of support X receives. The carers are lovely and friendly. It's like a little family."*

*The staff liaised well with health professionals to offer a range of opportunities and regular healthcare assessments and treatment from competent trained practitioners that promoted people's health and wellbeing needs.*

*Staff were able to recognise and respond to people in the event of suspected or confirmed cases of Covid-19 including following local reporting procedures and contacting local Health Protection Teams.*

There was a very good supply of personal protective equipment (PPE) to reduce any cross infection of any viruses including Covid-19. Guidance was shared with people, staff and relatives on a regular basis and appropriate risk assessments were completed to ensure these measures continued to keep people safe.

The service had embraced the 'Open with Care' visiting guidance from the Scottish Government. Visiting was

open without restriction. This supported people's emotional and physical wellbeing and protected their rights. The service enabled family members to continue playing an active part in their loved one's care and supported meaningful relationships for people living in the home.

The management team were aware that improvements were needed with the administration of medication for people and staff refresher training along with competency assessments was in place.

Staffing levels have been lower than planned (not uncommon within the care sector at this time) and this was having an impact on some people with not being able to go out as much or attend health appointments. The provider had a recruitment drive to attract new staff.

## How good is our leadership?

## 5 - Very Good

We evaluated this key question as very good as the provider demonstrated major strengths in supporting positive outcomes for people. There were very few areas for improvement.

A variety of comprehensive quality assurance processes were in place which enabled the management team to have a good oversight of the care delivered to people. This ensured people had confidence that their care was being managed affectively and responded to appropriately.

People were supported to understand the standards they should expect from their care and support and were encouraged to be involved in evaluating the quality of the service provided. People were confident giving feedback and raising any concerns because they knew leaders would act quickly and use the information to help improve the service. Leaders demonstrated a clear understanding about what was working well and what improvements were needed. They ensured that the outcomes and wishes of people who were using the service were the primary drivers for change.

Leadership was supportive, responsive and visible, which enabled staff to voice their concerns, share ideas and explore ways to promote resilience. Staff knew that their contribution was valued and recognised by leaders in the organisation. This helped keep people motivated, remain adaptable and to focus on how best to provide care and support.

Staff were empowered to innovate and work in partnership to provide person-led care and support, fostering a culture of positive risk-taking. Learning from this was shared, including when things go wrong. In the spirit of genuine partnership, all relevant plans, policies and procedures reflect a supportive and inclusive approach. Leaders and staff recognise the importance of an individual's human rights and choices, and embrace the vision, values and aims of the service to support these being met.

Leaders demonstrated a clear understanding about what was working well and what improvements were needed. They ensured that the outcomes and wishes of people who were using the service were the primary drivers for change. Leaders at all levels had a clear understanding of their role in directing and supporting improvement activities, and where to obtain support and guidance. The pace of change reflected the priority of the improvements needed.

The provider had recently achieved accredited status with Investors In People in recognition of the support staff to have, opportunities for employee engagement, training and development, communication and embedding an enriching culture.

## How good is our staff team?

4 - Good

We evaluated this key question as good as the provider demonstrated some strengths in supporting positive outcomes for people. There were a few areas for improvement.

Staff clearly demonstrated the principles of the Health and Social Care Standards and were compassionate about meeting the care needs of people.

Due to the staffing levels and the need to prioritise primary care, the frequency of staff receiving support and supervisions with their line manager was not in line with the provider's policy. However, staff told us that they did feel supported by their manager, their peers and could seek support when required.

Some staff felt that they would like to see senior management more often and did not always feel listened to. We found that there were very good opportunities for staff to feel they have a voice and feel listened to, including the support worker forum. We concluded that staff had a role to play in ensuring that they were accountable for their own practice and development in line with the Scottish Social Services Council code of practice.

Team meetings were held monthly online until recently and were now face to face. These meetings incorporated reflective practice of supporting people to achieve their personal outcomes and how these can be met with the support from staff and other external support agencies. Staff were supported to keep up to date with current and changing practice.

Staff refresher training was behind schedule, largely due to the Covid-19 pandemic and the accessibility of training. This was highlighted at our last inspection when an area for improvement was made. The provider has appointed a full-time training manager and an action plan was in place to ensure staff have the appropriate skill and knowledge to continue to meet people's care needs. **(Please see area for improvement one).**

### Areas for improvement

1. The service should ensure that staff are appropriately trained and receive refresher training as and when required to meet the care and support needs of people. This should also be reflected in robust training records, so the care provider is confident that its workforce is appropriately skilled.

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).

## How well is our care and support planned?

5 - Very Good

We evaluated this key question as very good as the provider demonstrated major strengths in supporting positive outcomes for people. There were very few areas for improvement.

People benefited from dynamic and aspirational care and support planning which consistently informed all aspects of the care and support they experienced. People, and where relevant, their families or those important to them, were fully involved in developing their personal plans. Strong leadership, staff

competence, meaningful involvement and embedded quality assurance and improvement processes supported this happening.

Although people's care plans were very comprehensive, there were instances where information was duplicated and some lacked detail, for example, why someone was at risk of choking (due to their health diagnosis) or mobilised with support of a walking aid but there was no safe moving and handling guidance for staff.

Although regular reviews and care plan audits were taking place, the provider was conscious that an overhaul was needed to ensure care planning continued to reflect people's identified and agreed outcomes. We favoured the new outcome focused care planning being rolled out as part of an ongoing improvement initiative. The new format embraced the Keys to Life outcomes; healthy life, choice & control, independence and active citizenship.

The provider should develop care plans to include anticipatory care elements to ensure people's wishes are taken into account when receiving end of life care. We will follow this up at the next inspection.

## 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 service should ensure that staff are appropriately trained and receive refresher training as and when required to meet the care and support needs of people. This should also be reflected in robust training records, so the care provider is confident that its workforce is appropriately skilled.

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).

**This area for improvement was made on 12 September 2019.**

#### Action taken since then

Gaps were present in the frequency of staff completing their refresher training. We have therefore repeated this area for improvement. **(See area for improvement one under 'How good is our staff team?')**

## Complaints

There have been no complaints upheld since the last inspection. Details of any older upheld complaints are published at [www.careinspectorate.com](http://www.careinspectorate.com).



## Detailed evaluations

How well do we support people's wellbeing?	5 - Very Good
1.3 People's health and wellbeing benefits from their care and support	5 - Very Good
1.4 People are getting the right service for them	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
How good is our staff team?	4 - Good
3.2 Staff have the right knowledge, competence and development to care for and support people	4 - Good
How well is our care and support planned?	5 - Very Good
5.1 Assessment and personal planning reflects people's outcomes and wishes	5 - Very Good

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