

# Castle Craggs - Housing Support and Care at Home Service: Group Two Housing Support Service

Castle Craggs  
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**Type of inspection:**  
Unannounced

**Completed on:**  
27 January 2023

**Service provided by:**  
City of Edinburgh Council

**Service provider number:**  
SP2003002576

**Service no:**  
CS2021000212

## About the service

Castle Craggs Group 2 Housing Support & Care at Home Service comes under the umbrella of Castle Craggs Complex Care. The service operates in close partnership with Castle Craggs Group 1 Housing support & care at home service as well as Castle Craggs Day Support and Short Breaks registered services. They share an office base with them and with the NHS Specialist Positive Behaviour response team and other healthcare professionals.

Group 2 is a Care and Housing support and care@ home service for currently six individuals. Currently the service consists of four individual tenancies and a two-person tenancy, providing support either on a 1:1 basis or 2:1 basis depending on the individuals risk assessment. The Housing service is for people with Autism, Learning Disabilities, high anxieties and who have complex behavioural support needs; the staff support is over 24-hour period 365 days a year. Staff teams also provide support to ensure the values of the Edinburgh Health and Social Care Partnership are met by providing the right care, at the right time, and in the right place.

The service state "We want to empower service users to maximise their potential of leading a fulfilling and a safe meaningful life with maximised independence and control, whilst being valued active citizens of Edinburgh".

## About the inspection

This was a full Inspection which took place between 19 - 27 January. 2023 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 gathered since the service was registered. In making our evaluations of the service we: spoke with two people using the service and five of their representatives . In addition, we spoke with six staff and the service management. During our Inspection we carried out two home visits, observing staff practice and daily life for people who experienced care. We reviewed and significant range of service documentation and spoke with one external professional.

## Key messages

Support is person-led, with a strong emphasis on partnership working and enabling opportunities.

Staff are very well trained in areas relevant to the work they undertake.

Consistency of staff helped promote positive well-being outcomes for people who experience care.

Systems around medication administration and reporting incidents to the Care Inspectorate need further development.

## 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?	4 - Good
How good is our staff team?	5 - Very 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 assessed the services performance under this Key Question as being very good. Service strengths significantly outweighed any areas for development and helped people achieve a wide range of positive outcomes.

Our observations of staff practice during interactions with people who experienced care highlighted that workers always engaged respectfully, displaying appropriate compassion, kindness and professionalism in the way they provided support.

Family representatives emphasised the service's focus on enabling approaches and were clear that staff placed key values of dignity and respect to the fore when working with their loved ones.

There was a strong emphasis on ensuring that supported people to get the most out of life. We noted creative approaches that facilitated access to a broad range of community resources. This helped people to achieve positive social and recreational outcomes.

In addition, staff sought to maintain and develop people's life skills with enabling approaches to using technology. This helped people maintain family relationships.

The service was good at responding pro-actively when people's health and well-being was undergoing change. Staff's detailed insight into people's presentation, ensured that they linked them to appropriate health and community based professions as circumstances required. This helped deliver very good well-being outcomes for people using Castle Craggs support.

Medication was generally administered in accordance with the prescribers instruction, although we noted some areas for development around recording aspects of medication stock management and administration recordings. (see Key Question 2 of this report).

We were particularly impressed by the way that support sought to minimise resort to as required mood altering medication, instead deploying their training, skills and experience to support people effectively around episodes of stressed/distressed presentation.

The service sought to ensure a consistency of staff that was right for the person who experienced care. Routine and structured support is essential to achieving positive outcomes for people with complex needs and the service did this very well.

Staff had undertaken training around Infection Prevention and Control, including the use of Personal Protective Equipment. This helped keep people safe and well during the Covid 19 pandemic.

## How good is our leadership?

4 - Good

We assessed the performance of the provider in this area as good . There were clear strengths in the way the service performed, with some areas for development. These developments will improve management and leadership approaches, helping to maintain very good support outcomes for people using the Castle Craggs 2 service.

Approaches from the management team modelled good practice, seeking to encourage and promote leadership throughout the whole staff group in the service.

Staff said that they felt valued in their work and listened to by the management. Workers received individual supervision and had access to regular team meetings. Supervision allowed opportunities for people to identify learning needs and speak reflectively about their work. Team meetings provided a forum for staff to share their views on service delivery approaches and contribute to the development of support strategies for the people they work for.

There were areas for development around medication administration recordings. Although management audits took place, we did not see any actions arising from them, noting some recurring themes around medication overstock/supply, as well as gaps in stock count recordings and missing signatures from medication administration records (MAR).

In order to promote management overview of these issues, audit and subsequent actions should be made more robust, with the registered manager ensuring that MAR recordings improve and any remedial actions are effective and undertaken timeously (see Area for improvement 1).

Whilst the service were generally very good at managing accidents and incidents, we found some events which were either not notified to the Care Inspectorate or not notified within time frames outlined in the relevant regulatory guidance. We discussed this with management and received assurance around improving notification compliance.

Personal plans and associated documentation were audited and subject to quality scrutiny. The service are currently transitioning to a new suite of support planning documents. It is hoped that this will allow staff to maintain the current quality of documentation and enhance aspects of service review.

Some improvement was required with regard to ensuring that staff were registered on the relevant part of the Scottish Social Services Council (SSSC) register. We raised some discrepancies with the management team and received an appropriate and prompt response.

The development of a service specific registration matrix would help ensure that all staff register with the SSSC appropriately (see area for improvement 2).

Reviews took place within the statutory timeframes required of the service. They were generally good at describing outcomes arising from support, but some needed a greater emphasis on capturing key stakeholders views and associated quality evaluations.

## Areas for improvement

1. To ensure that any treatment or intervention is safe and effective the provider should improve on current medication systems and practice. This should include, but not be limited to, ensuring that:

1) that processes are in place to regularly assess staff practice and competency in medication management and records maintenance.

2) accurate records are kept for all medications being administered, stock counts should be maintained and the service should implement systems that prevent overstock of medication.

3) audits should generate an action checklist which evidences that desired changes have been effectively implemented.

This is to ensure that care and support is consistent with the Health and Social Care Standards which state, 'If I need help with medication, I am able to have as much control as possible.' (HSCS 2.23)

2. To ensure that all staff are registered with the SSSC and that management have an overview of service compliance with registration best practice, the provider should:

1) develop a service wide matrix or database that evidences when staff were registered.

2) ensure that staff are registered on the appropriate part of the register.

This is to ensure that care I use a service and organisation that are well led and managed support is consistent with the Health and Social Care Standards which state,

'I use a service and organisation that are well led and managed', (HSCS 4.23 )

and

'I am confident that people who support and care for me have been appropriately and safely recruited' (HSCS 4.24).

## How good is our staff team?

## 5 - Very Good

The service performed at a very good standard across this Key Question. This very good performance contributed to key well being outcomes for people who experienced care.

The Provider followed national guidance around safe recruitment for new staff.. This helped ensure safe staffing outcomes for people who use the service.

Staff told us that they felt that were encouraged and develop their skills in the workplace. In addition to undertaking a range of service wide mandatory training, workers had access to more specialised learning directly linked to the needs of the people they supported.

Additional learning included a focus on managing people's stressed/distressed presentation and positive behavioural support. This training helped ensure workers had the expertise required to deliver positive support outcomes for people with complex presentation.

Induction training was comprehensive and includes values, the Health and Social Care Standards and included applicable codes of practice and conduct, as well as specific areas of practice. There were many examples of staff being able to access person-specific learning, such as; epilepsy training (including emergency medication administration) and training around skin integrity.

The development of a service wide training matrix would be useful, allowing management and oversight of all learning undertaken by staff.

We spoke with an external health professional who worked with people using the service. They told us that the staff understood when referral for additional assessment was required and that workers could follow

any guidance arising from their involvement. This meant people could feel confident that they were supported in a way that conformed to professional best practice.

Feed back from family representatives was very good. People said that they had confidence in the staff team and their capacity to manage complex support situations. It was clear from our conversations that staff were viewed as a valuable asset by key stakeholders in the service.

## How well is our care and support planned?

**5 - Very Good**

We assessed the services performance under this Key Question as being very good. Service strengths significantly outweighed any areas for development and contributed to a wide range of positive support and involvement outcomes.

Personal plans contained detailed information around people's choices, routines and support goals. Some documentation contained elements which were adapted into an easy read format. This helped engage people who experienced care in evaluating aspects of their support.

It was clear from our own observations, and from conversations with family representatives that personal plans were co-produced, with an emphasis on significant input from family representatives. Where additional advice and guidance had been provided by external, professionals, we could see that this had been integrated into support documentation.

The personal plans were outcomes focused. However, we felt that aspect of service review could be developed in order to fully record the way support had enabled people to meet their identified goals. Reviews should fully evidence the quality appraisals of people who experience care and their family representatives.

Aspects of personal plans could be further developed. A chronology which contained a summary of key contacts with health and community based professionals would evidence how the service supported people to access a range of services essential to their health and well being.

We also discussed the development of "hospital passports", a document which contains a summary of key information required to provide effective support for use in event of any emergency admission.

Both these suggestions mirror best practice guidance from the Scottish Government's "Keys to Life" a national strategy for improving outcomes for people with learning difficulties and other complex support needs.

## 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
1.1 People experience compassion, dignity and respect	5 - Very Good
1.2 People get the most out of life	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?	4 - Good
2.2 Quality assurance and improvement is led well	4 - Good

How good is our staff team?	5 - Very Good
3.1 Staff have been recruited well	5 - Very Good
3.2 Staff have the right knowledge, competence and development to care for and support people	5 - Very 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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