

# Inspire Moray Housing Support Service

## Housing Support Service

5A Thunderton Place  
Elgin  
IV30 1BG

Telephone: 01343 610 532

**Type of inspection:**  
Unannounced

**Completed on:**  
1 December 2022

**Service provided by:**  
Inspire (Partnership Through Life) Ltd

**Service provider number:**  
SP2003000031

**Service no:**  
CS2004073056

## About the service

Inspire Moray is a care at home and housing support service for people living in Moray. At present, the service supports five adults across two services, one in Elgin and one in the wider Moray area.

The service provides 24 hour support to people in their own homes and also has an office base in the centre of Elgin.

## About the inspection

This was a follow up inspection which took place on 22 August to 30 November 2022. 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 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 one person using the service
- Spoke with three staff and management
- Reviewed documents.

## Key messages

- The manager had a good understanding of the systems and processes to help promote good outcomes for people.
- The service had people living in it who did not want to be there which created distress and this took a lot of support time.
- The staff team were working hard, and supporting one another.

## 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

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**

People's wellbeing was supported to an adequate level. Information relating to this is in the Outstanding Requirements section of this report. Some areas require improvement as described in requirement 1

### Requirements

1. By 24 March 2023, the provider must embed opportunities for people to have influence and control over their daily lives.

This is to comply with Regulation 4(1)(a)(Welfare of users) of The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/210).

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).

## How good is our leadership?

**3 - Adequate**

Leadership was at an adequate level. Information relating to this is in the Outstanding Requirements section of this report. Some areas require improvement as described in requirement 1

### Requirements

1. By 24 March 2023, the provider must ensure that the manager has a good oversight and understanding of the service, and uses this to support staff and effect improvements.

This is to comply with Regulation 4(1)(a)(Welfare of users) of The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/210).

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

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

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

### Requirements

#### Requirement 1

By 31 October 2022, the provider must create and promote opportunities for people to have influence and control over their daily lives.

To do this, the provider must, at a minimum:

- a) Ensure that peoples' feedback is sought, listened to and acted upon
- b) Ensure that there is involvement from other professionals, where required, to support people
- c) Identify, implement and review strategies for supporting people to meet their needs and wishes to improve their daily lives.

This is to comply with Regulation 4(1)(a)(Welfare of users) of The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/210).

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).

**This requirement was made on 29 June 2022.**

#### Action taken on previous requirement

Regular house meetings were taking place, which was good, and these were minuted, so everyone could check what had been agreed. There were some positive discussions noted. However, the meetings were dominated by discussions about the dynamics of the residents relationships. The manager said they hoped to discuss a wider variety of topics once one of the residents moved to their new home. We were told by staff that they make sure that individual people have time with staff and this could be an opportunity to talk. We were told by someone who lived in the house that they got on well with the staff.

There were records of multi disciplinary involvement for people, and members of staff knew what guidance had been given for people. This would improve the support for people and enable it to be more individualised.

While there was a will to identify, implement and review strategies for supporting people to meet their needs and wishes, this was difficult because of the unhappy dynamics and relationships. As these change, there will be more opportunity to work with people towards fulfilling their wishes.

Some work had taken place towards promoting opportunities for people to have influence and control over their daily lives, and this should continue to be developed.

**Met - within timescales**

## Requirement 2

By 27 July 2022, the provider must ensure that people's health and wellbeing benefits from safe and effective infection prevention and control measures.

This is to comply with Regulation 4(1)(a) and (d)(Welfare of users) of The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/210).

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

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

**This requirement was made on 29 June 2022.**

### Action taken on previous requirement

Several improvements had been made in the service and it now appeared clean. Cleaning schedules had been redeveloped to be more comprehensive, ensuring that all aspects of the service were cleaned on a regular basis. These were being completed by the contracted cleaner and by Inspire staff members at weekends.

Bathrooms had been thoroughly cleaned. All sealant and tile grout had been replaced, giving a fresh appearance and reducing the presence and risk of mould. A new shower chair was in place in the downstairs bathroom, which was fit for purpose. Paper towel dispensers had been moved to a more appropriate location within the bathrooms, to reduce the risk of infection transmission.

The carpet on the stairs had been replaced, reducing any risk of contamination from dirty areas. Storage of cleaning materials in the utility room had been reviewed, and there were now allocated storage spaces for cleaning items.

People's health and wellbeing benefits was benefitting from safe and effective infection prevention and control measures, and this requirement had been met.

**Met - within timescales**

## Requirement 3

By 31 October 2022, the provider must ensure that people benefit from a well-maintained environment.

To do this, the provider must, at a minimum, support people to notice and plan for areas for improvement.

This is to comply with Regulation 4(1)(a)(Welfare of users) of The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/210).

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); and

'If I need help managing my money and personal affairs, I am able to have as much control as possible and my interests are safeguarded. (HSCS 2.5).

This requirement was made on 29 June 2022.

#### Action taken on previous requirement

The house was well maintained and clean at the time of inspection. The stair and hall carpet had been replaced, making a significant difference in the appearance of the home. House meetings were taking place which would be a good opportunity to discuss future plans for regular maintenance of the home, and how they would be financed. The manager mentioned that the kitchen may be painted and people would help to choose colours. People still need more support to notice and plan for improvements in their own home and garden. They need to be supported to see and understand what ongoing maintenance and aesthetics will be needed, and to save money for this, and work out the best time for it to happen.

Although some work has taken place towards this, more is needed and this will be addressed in a requirement in the section How well do we support people's wellbeing.

**Not met**

### Requirement 4

By 31 October 2022, the provider must ensure that the manager has a good oversight and understanding of the service.

To do this, the provider must, at a minimum:

- a) Ensure the manager has access to all quality assurance and staffing systems for the service
- b) Ensure the manager understands how to use these systems, and uses them effectively to promote improvement
- c) Ensure the manager coordinates an improvement plan for the service.

This is to comply with Regulation 4(1)(a)(Welfare of users) of The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/210).

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, and are able to reflect on their practice and follow their professional and organisational codes' (HSCS 3.14).

This requirement was made on 29 June 2022.

#### Action taken on previous requirement

The manager had an oversight and understanding of the service. They were able to access the Inspire systems in the main office and also from their laptop which was useful when they were working in the houses. There were aspects that still needed to be improved, for example the rota was on the electronic system but had not yet been printed out for the staff to access. This was not good for staff planning their work/life balance, especially when they were sometimes doing extra shifts.

The staffing systems should cover supervision and training for staff. A supervision process was in place but was not working as well as it should, with three monthly meetings running behind schedule.

The manager accessed and showed me the training system. This access to training records was encouraging and should be utilised to support staff with up to date skills and knowledge.

There was an overarching Service Improvement Plan. This had good, overarching areas for development. It would be beneficial to also have something that was more focused for each individual house, maybe an Action Plan, or a To Do plan. The manager agreed that this could be useful to keep small improvements happening.

Some of the quality assurance systems were working well and some needed to be further embedded to ensure areas for improvement were picked up and rectified quickly.

Some work had taken place towards a good oversight and understanding of the service. This requirement is met and these systems need to be embedded and consistently used to good effect for people, which will be reflected under the section How good is our leadership.

## Met - within timescales

### Requirement 5

By 31 October 2022, the provider must ensure that all staff are fully supported to develop their competence and improve outcomes for people who use the service.

To do this, the provider must, at a minimum:

- a) Ensure that a tool is implemented to show scheduled and actual supervision dates for all staff
- b) Ensure all supervision or development meetings are recorded, with a note of how further development will be achieved
- c) Ensure plans for further development of staff are carried out and evaluated.

This is to comply with Regulation 4(1)(a)(Welfare of users) of The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/210).

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, and are able to reflect on their practice and follow their professional and organisational codes' (HSCS 3.14).

**This requirement was made on 29 June 2022.**

### Action taken on previous requirement

Staff told us that the managers were great when they were in the building, but they were not here often enough, so they don't always feel well supported. This was discussed with the manager who did not disagree. For example, over the course of a week there was not always a manager in the building. There was an aim for the assistant manager to do one sleepover a week but that hasn't happened. Staff need to see the manager regularly and feel positive management support when they are not in the building.

A system had been introduced where staff would look at the rota and schedule their supervision meetings, which would bring a shared accountability and lessen the likelihood of them being missed. Despite this most staff were a little late for their three monthly supervision meeting. An assistant manager had been newly introduced to the service and once they have completed their induction and training, they will support with supervisions. This should develop further in the next few months.

The manager was tracking development for staff through training and could easily see what training had been completed and what was due to be done. One example where this had been used to good effect was



that staff needed development to be confident supporting people in distress, and therefore had completed Positive Behavioural Support training.

Staff said they were genuinely worried about some of the situations at their work so this development and support must continue.

This requirement has been met and support for staff to develop skills required to support good outcomes for people needs to be continue. This will be reflected under the section How good is our leadership.

**Met - within timescales**

## 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?	3 - Adequate
1.3 People's health and wellbeing benefits from their care and support	3 - Adequate
1.4 People are getting the right service for them	3 - Adequate
1.5 People's health and wellbeing benefits from safe infection prevention and control practice and procedure	3 - Adequate
How good is our leadership?	3 - Adequate
2.2 Quality assurance and improvement is led well	3 - Adequate

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