

## CERA - Forth Valley Housing Support Service

Limetree House  
North Castle Street  
Alloa  
FK10 1EX

Telephone: 01259 793 175

**Type of inspection:**  
Unannounced

**Completed on:**  
11 September 2023

**Service provided by:**  
CERA Care Operations (Scotland)  
Limited

**Service provider number:**  
SP2009010680

**Service no:**  
CS2019374567

## About the service

CERA - Forth Valley is a combined housing support and care at home service that is based in Alloa. It provides a service to adults with support needs living in their own homes across Stirling, Clackmannanshire, and Falkirk.

At the time of our inspection the service supported 313 people. People received support ranging from a few hours a week to several visits each day.

The service registered with the Care Inspectorate in September 2019. The provider of the service is CERA Care Operations (Scotland) Limited.

## About the inspection

This was an unannounced inspection which took place on 6 and 7 September 2023. The inspection was carried out by two inspectors from the Care Inspectorate.

To prepare for the inspection we reviewed information about the service. This included registration information and information submitted to us by the service.

In making our evaluations of the service we:

- shadowed care staff going about their daily work
- met with five people and their families in their own homes
- received feedback from a further eight people
- spoke with managers and staff from a variety of roles within the service
- received feedback from an external professional linked with the service
- sampled support plans and a variety of other documents and recordings
- looked at quality assurance systems

## Key messages

- Leaders and staff we spoke with had very good values.
- People experienced compassion, dignity, and respect.
- People were supported to get the most out life.
- People had very good health outcomes.
- The service had good quality assurance systems although they would benefit from further 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?	5 - Very Good
How good is our leadership?	4 - 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 made an overall evaluation of very good for this key question as there were major strengths in supporting positive outcomes for people. There were few areas for improvement.

People experienced support with compassion, dignity, and respect. Staff provided personalised support to each individual, which benefited their wellbeing and enhanced their day-to-day life. Relationships between staff and people were warm, respectful, and positive. Staff were sensitive and knowledgeable about people's needs and wishes. Everyone we spoke with praised the service. One supported person told us, "The staff are great, and very friendly." Family members stated, "I don't know what I'd do without the staff," and "It makes my day to hear the staff laughing with my loved one." It was clear the service made a positive difference in people's lives.

People felt valued and respected as they went about their lives. People told us they generally had a consistent staff team so were able to build up trusting relationships. Times of visits were generally consistent, and people could be confident that staff worked hard to arrive at agreed times.

People were enabled to get the most out of life. The main purpose of the service was to provide care and support so that people could continue to live in their own homes. Staff in the service did this very well. Support plans were detailed and person-centred. They contained good detail about things people could do for themselves; areas they needed some staff support; and areas they needed more support. This ensured staff had an enabling approach where people could retain their independence as much as possible.

Some people were supported with social activities in the local community. This meant people could continue to be active citizens. This positively impacted on people's wellbeing. Leaders had recently arranged some activities to bring people together in their main office, with examples being a coffee morning and a game of bingo. Staff tried to ensure as many people as possible could attend. People commented how much they had enjoyed the days. We encouraged leaders to continue to have these events as they clearly enhanced people's general wellbeing.

Staff generally demonstrated a clear understanding of their responsibilities to protect people from harm, neglect, abuse, bullying and exploitation, although some staff did not seem familiar with adult protection procedures. Adult protection training was in place and the topic was visited regularly in staff newsletters. Leaders acted on our feedback immediately and refreshed all staff on the right action to take in the event of any adult protection concerns.

People benefitted from a range of opportunities that promoted their health and wellbeing. Where people required support with medication, this was done by trained staff. Those staff we spoke with showed a good awareness of safety around medication administration, including ensuring an appropriate gap between medications being taken. Medication administration records were clear and allowed staff to quickly address any issues. These measures supported very good health outcomes for people.

There were a number of good examples of people's health being maintained or improving since being supported by the service. Equally, staff were alert to any deteriorations in people's health and took appropriate action, including advocating for changes to people's support to ensure it reflected their current needs and wishes.

**How good is our leadership?****4 - Good**

We made an overall evaluation of good to this key question as there were a number of important strengths which clearly outweighed areas for improvement. The strengths had a significant positive impact on people's experiences and outcomes. However, improvements were required to maximise wellbeing and ensure that people consistently had experiences and outcomes which were as positive as possible.

People were supported to identify and achieve their personal goals and outcomes. Reviews took place at least every six months and people also benefited from regular courtesy calls. This gave people the opportunity to comment on how well they felt the service was performing in terms of meeting their needs and wishes. Leaders were responsive to this feedback and used it to drive improvement.

Leaders in the service promoted responsibility and accountability within the larger staff team. There was a robust management structure including the registered manager; depute; supervisors, and seniors. Administrative staff in the central office also had an improvement focus. All staff we spoke with felt supported by their managers. They demonstrated knowledge of their role in driving improvement and were proud of people's achievements.

We saw some examples of quality assurance at service level that were good. Electronic monitoring and assurance tools produced information to identify areas requiring attention. However, the service was currently in the process of merging different systems which meant these tools were disjointed, with information being on different systems. Leaders in the service were working hard to rectify this, but it meant some issues had been missed.

In looking at systems for staff scheduling we identified issues with a minority of staff not staying with people for the full scheduled visit time. There may have been a reasonable explanation for this, but leaders had not identified it and therefore had not addressed it with staff. There were also issues with staff being scheduled to be with two different people at the same time. All staff we spoke with identified this as an issue. We made an area for improvement about this and will check progress at our next inspection. See area for improvement 1.

External professionals gave positive feedback on the quality of the service and the responsiveness of staff to changes in people's needs. Leaders were responsive to our feedback and took immediate steps to address actions.

**Areas for improvement**

1. To ensure people experience care and support in a safe and well-planned manner, leaders should ensure that quality assurance systems are effective and used to address any areas of concern. This includes, but is not limited to, ensuring support times are of agreed durations and staff scheduling is accurate. A protocol should also be implemented for staff to follow in the event of any issues with their daily schedule.

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), and 'I experience high quality care and support because people have the necessary information and resources' (HSCS 4.27).

## 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

In order to ensure positive outcomes for people experiencing care, the service should ensure that care records are reflective of the care and support delivered during scheduled visits. This should include, but is not limited to, who has provided the support, what support was provided, what support was declined, and the reasons why support was ended earlier or later than anticipated. This would ensure that support continued to reflect the person's changing needs.

**This area for improvement was made on 12 January 2023.**

#### Action taken since then

Leaders in the service had generally responded well to this area for improvement. Progress had been made in ensuring care records were reflective of the support provided. This had improved health outcomes for people.

The service had met this area for improvement. However, there continued to be issues with support being ended earlier than anticipated. We made a new area for improvement about this. Please refer to the section of this report titled "How good is our leadership" for further details.

#### Previous area for improvement 2

In order to ensure good outcomes for people experiencing support, the service should ensure that support plans are reflective of their changing support needs. This should include, but is not limited to, details of their health concerns and how these can impact on their capability and motivation, and how support should change to meet these fluctuating needs.

**This area for improvement was made on 12 January 2023.**

#### Action taken since then

Leaders in the service had responded well to this area for improvement.

The quality of support plans had improved. They were detailed and up-to-date. Plans accurately reflected people's current needs and wishes. They also captured areas where people should be encouraged to retain their independence along with those areas where people required staff support. These changes had improved health outcomes for people being supported by the service.

This area for improvement had been met.

## Complaints

Please see Care Inspectorate website ([www.careinspectorate.com](http://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
1.2 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

How good is our leadership?	4 - Good
2.2 Quality assurance and improvement is led well	4 - Good



## To find out more

This inspection report is published by the Care Inspectorate. You can download this report and others from our website.

Care services in Scotland cannot operate unless they are registered with the Care Inspectorate. We inspect, award grades and help services to improve. We also investigate complaints about care services and can take action when things aren't good enough.

Please get in touch with us if you would like more information or have any concerns about a care service.

You can also read more about our work online at [www.careinspectorate.com](http://www.careinspectorate.com)

## Contact us

Care Inspectorate  
Compass House  
11 Riverside Drive  
Dundee  
DD1 4NY

[enquiries@careinspectorate.com](mailto:enquiries@careinspectorate.com)

0345 600 9527

Find us on Facebook

Twitter: @careinspect

## Other languages and formats

This report is available in other languages and formats on request.

Tha am foillseachadh seo ri fhaighinn ann an cruthannan is cànan eile ma nithear iartras.

অনুরোধসাপেক্ষে এই প্রকাশনাটি অন্য ফরম্যাট এবং অন্যান্য ভাষায় পাওয়া যায়।

یہ اشاعت درخواست کرنے پر دیگر شکلوں اور دیگر زبانوں میں فراہم کی جاسکتی ہے۔

ਬੇਨਤੀ 'ਤੇ ਇਹ ਪ੍ਰਕਾਸ਼ਨ ਹੋਰ ਰੂਪਾਂ ਅਤੇ ਹੋਰਨਾਂ ਭਾਸ਼ਾਵਾਂ ਵਿਚ ਉਪਲਬਧ ਹੈ।

هذه الوثيقة متوفرة بلغات ونماذج أخرى عند الطلب

本出版品有其他格式和其他語言備索。

Na życzenie niniejsza publikacja dostępna jest także w innych formatach oraz językach.