

Tenancy Support Service Cumbernauld Housing Support Service

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Unannounced

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Service provided by:
North Lanarkshire Council

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About the service

Tenancy Support Service Cumbernauld is provided by North Lanarkshire Council. The service was previously registered with the Care Commission and transferred its registration to the Care Inspectorate on 1 April 2011.

The aim of the service is to provide housing support to people who are homeless or at risk of becoming homeless by focusing on their housing support needs and tenancy sustainment. The service is provided to people living across areas of North Lanarkshire who reside in a variety of accommodation types including a temporary accommodation unit, dispersed accommodation provided by North Lanarkshire Council, with family/friends and in their own tenancies.

At the time of the inspection, support was being provided to individuals by a team of housing advisors and accommodation staff. Support was provided to the team by the support coordinator and registered manager. The team had access to a welfare rights advisor who helped ensure that eligible people receiving the service could access their entitlement to benefits.

About the inspection

This was an unannounced inspection which took place on 16 and 18 August 2023. 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 two people using the service
- spoke with four staff and management
- observed practice in office and phone calls to people supported
- reviewed documents.

Key messages

- People achieved great outcomes.
- Staff were long standing and very experienced.
- The service had a small team which worked closely with seniors.
- People experiencing care trusted their staff and felt safe.

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 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, where there were major strengths in supporting positive outcomes for people.

Support was offered with compassion and had very positive relationships built between staff and people accessing the service. This helps people to feel relaxed, comfortable and contributed to people meeting very good outcomes.

People felt totally respected and listened to because their wishes and preferences are documented and acted upon by staff. We saw evidence of this from the phone conversations within the office between staff and people looking for advice. The choice to decline support was an option which meant there was no pressure to engage when people did not feel up to it.

Staff support was offered if people wanted contact with relatives; however, people were also protected when they wished no contact. This meant people could feel a great sense of security and safety within their tenancy. We heard about the really creative ways in which the service thought about bringing supported people together. This was due to the staff knowing what works and does not work for people. This demonstrated how skilled and knowledgeable staff were of the people they supported.

People are completely involved in decisions about their service in ways that are meaningful to them. People are asked for their opinions on a regular basis when they met with their housing officer. Harm reduction approaches are used alongside support which is based on promoting recovery in physical, mental health and wellbeing.

People were supported very effectively to build their aspirations and confidence and to have a strong sense of their own identity and wellbeing. The culture of the service promoted recognition of strengths, which had a positive impact on people's self-esteem.

People were enabled and supported to have control of their own health and wellbeing. To enhance and encourage this, people were given technology devices to use for self-help and other purposes. The service provides an emergency response service. This meant that people were confident and felt reassured that their critical needs were responded to.

Where Naloxone is required, it is stored and supplied by the service; this is in line with guidance and accurate records were maintained. As a result, people could receive emergency and life saving interventions if required.

The service also communicated to the relevant authorities when children were involved. This was due to the fact that children's mental health and education could be impacted on negatively due to housing issues. This meant that the service understood their duty of care to children and offered a family approach to their service delivery.

How good is our leadership?**5 - Very Good**

We evaluated this key question as very good. There were significant strengths which had a positive impact on people's support experience and helped ensure they had very good outcomes.

Team meetings were held for various staff roles. Substantial agenda items were recorded, such as Health and Safety, Capacity, staff supervisions, client reviews and Adult and child protection. Although these were relevant topics, there were limited discussions recorded. It appeared more of a manager's report that was given to the staff team.

We should see evidence of what agenda items the team wished to discuss. This would give part ownership to the staff. Minutes should reflect discussions, dates, and times for actions to be completed and by whom. Roles of the staff team attending should be noted. This would ensure accountability and responsibility for improvements.

Weekly diary meetings for staff were in place to share ongoing information and enabled a smooth and consistent sharing of communication. However, the manager should make sure there is a minute recorded. This would ensure that important information relating to people is not missed.

Staff supervisions were carried out within the timescales given by the service policy. This offered the time and opportunity for staff and their line manager to discuss staff practice and support needs. We acknowledged that staff participated in informal supervision most days due to the nature of sharing an office with their line manager. Supervision was well facilitated overall; however, the process should have a more reflective approach.

Staff felt very supported by their line manager and the registered manager. The team were in post for many years and were very experienced in working with each other and with the people they supported.

We found that end of service interviews were very positive and people were overwhelmingly happy with the support they received.

How well is our care and support planned?**5 - Very Good**

We evaluated this key question as particularly good, where there were major strengths in supporting positive outcomes for people.

Support plans were made up of questions with multiple answers to be ticked. This was the 'Better futures' outcomes monitoring tool which had a unique scoring system. This created the support and tracking progress. Plans could be improved further to contain a more meaningful narrative. This would ensure a deeper understanding of the person and the outcomes towards which they were striving.

Support plans were reviewed regularly to discuss progress in housing issues and to support any health and safety issues that may be a concern. As a result, people could be greatly confident and secure that their outcomes continued to be assessed and worked towards. The recording of reviews could be more person

centred and outcome focussed. The narrative should demonstrate how people were meeting their outcomes as a result of the service's intervention.

The service referred people to the right agencies at the right time. This meant people had the considerable benefit of a wraparound service from expert professionals. Staff from all agencies communicated efficiently with each other to ensure an integrated approach to supporting the person.

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 that individual risk assessments that are in place for people using the service are robust and effective. They should be reviewed in line with the provider's policy and as soon as there is a change to the person's needs. The risk assessment should detail control measures that are to be put in place in order to remove or reduce the risk.

This area for improvement was made on 14 April 2017.

Action taken since then

We saw evidence of how risk assessments were updated onto the digital planning system. One example was observed where a supported person was expressing his upset in a threatening manner towards the housing officer. This was set up as an alert on the system so that other staff were aware of the risk.

Complaints

There have been no complaints upheld since the last inspection. Details of any older upheld complaints are published at 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

How good is our leadership?	5 - Very Good
2.2 Quality assurance and improvement is led well	5 - Very Good

How well is our care and support planned?	5 - Very Good
5.2 Carers, friends and family members are encouraged to be involved	5 - Very Good

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