

Options Fife Housing Support with Care at Home Housing Support Service

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Type of inspection:
Unannounced

Completed on:
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Service provided by:
Aberlour Child Care Trust

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CS2021000064

About the service

Options Fife Housing Support with Care at Home is a housing support service for young people with additional support needs. This support is provided in their own home and in the community. The service provider is Aberlour Child Care and the service has been registered with the Care Inspectorate since May 2021.

The service provides support to a maximum of four young people. The service comprises of a modern block of five purpose built flats, situated in a residential area of Glenrothes, close to local amenities.

The one bedroom flats contain a kitchen/living room area and bathroom. One of the flats is currently used as a staff base and office. There is also a large shared outdoor garden area.

About the inspection

This was an unannounced inspection which took place on 15 September 2023 from 09:15 to 16:30, 18 September 2023 from 09:15 to 16:45 and 19 September 2023 from 09:15 to 16:30. The inspection was carried out by one inspector from the Care Inspectorate. To prepare for the inspection we reviewed information from the service. This included registration information, information submitted by the service, and intelligence. To inform the inspection, we:

- spent time with young people
- spoke with eight members of staff including managers
- observed practice and daily life
- reviewed documents
- spoke with two external professionals and one parent
- accessed feedback questionnaires.

Key messages

- Young people experienced supportive and compassionate relationships with staff.
- Young people had developed and were continuing to develop connections within the local community.
- There were strong links in place to support young people maintain relationships with family and friends.
- Young people's health care was prioritised.
- The service improvement plan required to be more dynamic.
- Quality improvement processes could be improved.
- Staff were committed and enthusiastic towards ensuring young people's needs and confident about raising safeguarding concerns.
- Care planning goals and risk assessments could be enhanced.

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?	4 - Good
How well is our care and support planned?	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 evaluated this key question as very good, as we found major strengths in supporting positive outcomes for young people.

Young people were experiencing supportive and compassionate relationships with staff, which were warm, encouraging and benefitted from a consistent core group of staff. Young people were respected and staff had genuine enthusiasm to support young people's progression and understand their preferences.

Communication supports were being utilised to gain young people's views, enhancing choice, with activities being based on their interests and hobbies.

Independent living skills were being positively promoted for young people, with the service recognising individual identities, rights and needs. Staff were skilful at ensuring tasks were at a level and pace that was suitable for each young person, ensuring their dignity was respected at all times. This supported young people to grow in confidence with household tasks, cooking and shopping.

Young people had developed and were continuing to develop connections within the local community, and were supported by staff who were keen to expand their knowledge regarding resources that could be utilised for the young people.

We were impressed by the strong links that the service had in place to support young people to maintain their sense of belonging through relationships with family and friends, and there were positive relationships between staff and legal guardians with opportunities for them to be meaningfully involved in decision making. Staff were also knowledgeable regarding their safeguarding responsibilities, recognising their role in ensuring young people were protected from harm.

The service had ensured that young people were able to access independent advocacy to ensure their rights were being fully supported, and staff were passionately advocating and challenging on behalf of young people when required.

The service had a well balanced approach to effectively encouraging young people to be involved in decisions regarding their support, but also recognising when young people asserted their right to refuse support or an activity. Staff recognised and celebrated the progress of the young people and were also alert to changes in wellbeing and presentation.

Education and learning opportunities were successfully encouraged and supported by the service, with examples of young people enjoying full time education and volunteering opportunities; developing strengths and skills. Young people's interests were successfully promoted, with a variety of activities in place such as football, swimming and community centre engagement. The service intends to further progress and expand this to ensure young people consistently connect with creative and stimulating experiences.

The service had an impressive understanding of their role in terms of supporting young people to access health care. This was supported by the wide range of services that Options Fife had links with. Young people were accessing services relevant to their needs with examples of partnership working with the learning disability team, psychology and epilepsy professionals; ensuring the appropriate individuals were involved in decision making, with prevention and early detection being a priority for the service.

Options Fife helpfully supported young people to benefit from a healthy lifestyle; encouraging them to spend time outdoors, undertake physical exercise and expanding their eating options. The service had also positively engaged a dietician to support healthy eating. With regard to medication, the service had made sound progress in adopting an effective medication management system; supporting young people with extremely complex health needs.

How good is our leadership?

4 – Good

We made an evaluation of good for this key question, as several important strengths, outweighed areas for improvement. The strengths had a significant positive impact on young people's experiences and outcomes.

The leadership at Options Fife had a clear commitment towards ensuring continuous improvement across the service, and were well placed to make further progress in this area. We had confidence that young people's outcomes were being met. It was more difficult to fully appreciate how quality assurance systems were consistently contributing towards service development, so have made areas for improvement to ensure young people's experiences and outcomes continue to be as positive as possible.

The service improvement plan could be more dynamic and would benefit from detailing how improvements will be made to support young people's outcomes. There were a number of intended areas of development that were highlighted during the inspection, but not promoted or evidenced in the improvement plan (area for improvement 1). Alongside this, the service should ensure that their aims and objectives are more comprehensive, capturing the focus of the service and how positive outcomes for young people will be supported (area for improvement 2).

There was an organisational framework of quality assurance which included safeguarding and incident monitoring and reports to senior committee members, with the service itself having helpful oversight tools to ensure health and safety checks and staff training were being undertaken. The auditing process could be improved by ensuring recommendations and actions are visible, effectively tracked and incorporate consistent senior management oversight. This will ensure additional safeguarding to support the young people to get the most out of life (area for improvement 3).

Staff were confident that they felt supported by managers following particularly challenging times within the service and the service had plans to further develop their system of recording and reporting of incidents, promoting increased staff reflection and learning. The process of incident recording could be strengthened by the development of an analysis of incidents to enhance learning and safeguarding opportunities (area for improvement 4).

Staff were assured that they could raise concerns or suggestions to management, feeling listened to and included, with opportunities for staff and stakeholders to provide feedback.

Areas for improvement

1. To develop and enhance the service for young people, the organisation should review and develop their service improvement plan.

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).

2. To ensure the needs of young people are being met, and to provide clarity for stakeholders, the providers should develop their aims and objectives for the service.

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)

3. To support continuous improvement and meet young people's changing needs, the provider should improve their quality assurance processes. This should include the external manager role.

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).

4. To support continuous improvement and meet young people's changing needs, the service should establish an analysis of incidents.

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).

How good is our staff team?

4 - Good

We made an evaluation of good for this key question, as several important strengths, clearly outweighed areas for improvement. The strengths had a significant positive impact on young people's experiences and outcomes.

The staff team were committed and enthusiastic towards ensuring young people's needs were being met. They were knowledgeable and sensitive regarding individual wishes.

The organisation had the appropriate principles in place regarding safer recruitment, with a supported induction and probation period in place for staff. There was a positive learning culture with a good level of training for staff.

It was also welcomed that specific needs training was in place to ensure individualised support could be provided to young people. The service plans to increase staff knowledge regarding autism to enhance staff competency in supporting young people.

The staff team had a number of relatively new members, many in their probation period; to strengthen ongoing learning and promote greater consistency across the staff team, the service could consider how learning from training could be collectively applied directly to the young people (area for improvement 1).

There was a model of supervision in place for all staff, and staff overwhelmingly considered this process as a collaborative forum, well balanced to support personal reflection alongside consideration of the needs of the young people. Staff were also confident about approaching colleagues and managers to ensure best practice and to raise safeguarding concerns.

Areas for improvement

1. To ensure young people achieve the best outcomes, the service should strengthen staff group learning and reflective opportunities, specific to the young people within the service.

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

I have confidence in people because they are trained, competent and skilled, are able to reflect of their practice and follow their professional and organisational codes (HSCS 3.14).

How well is our care and support planned?

4 - Good

We made an evaluation of good for this key question, as several important strengths, outweighed areas for improvement. The strengths had a significant positive impact on young people's experiences and outcomes. We have made areas for improvement to ensure young people's experiences and outcomes continue to be as positive as possible.

Young people had individualised personal plans, containing relevant and key information for getting to know each person, acknowledging particular strengths. Personal planning, particularly goals were static at times and not always aspirational. Although being reviewed and often achieved, goals were not being promptly updated; despite young people being effectively supported in a variety of ways (area for improvement 1).

Multi disciplinary meetings were well established and taking place consistently. This process was flexible, with young people benefitting from appropriate professional advice and positive communication channels sharing and gathering information. The service was also undertaking regular assessment reviews, taking the views of guardians into account to help shape and direct support. This could be enhanced by ensuring these reviews help inform and update personal plans.

A young person had a number of relevant risk assessments in place, enhanced by a behaviour support plan with strategies of support; however, there was not a consistent approach towards young people's risk assessments. To ensure staff are fully informed and able to provide a consistent approach to meeting needs and safety, all young people should have appropriate risk assessments in place (area for improvement 2).

Areas for improvement

1. To support effective planning for young people, the service should ensure care planning and goals are regularly updated, reflecting the variety of ways young people are being supported.

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

My personal plan is right for me because it sets out how my needs will be met, as well as my wishes and choices (HSCS 1.15).

2.
To ensure young people and staff safety, the provider should ensure that all young people have risk assessments which detail measures and strategies for staff to effectively support the young people.

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

I am protected from harm because people are alert and respond to signs of significant deterioration in my health and wellbeing, that I may be unhappy or may be at risk of harm (HSCS 3.21).

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

To ensure young people's rights, views and choices are supported, the provider should identify an independent advocacy service.

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

I am supported to use independent advocacy if I want or need this (HSCS 2.4).

This area for improvement was made on 27 June 2022.

Action taken since then

Young people have access to advocacy and this is available as required.

Previous area for improvement 2

To support young people's health and wellbeing, and support them to get the most out of life, the provider should improve the opportunities for young people to take part in meaningful activities.

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

I can choose to have an active life and participate in a range of recreational, social, creative, physical and learning activities every day, both indoors and outdoors (HSCS 1.25).

This area for improvement was made on 27 June 2022.

Action taken since then

This inspection identified significant progress in this area, which continues to be improved on, with additional planning in place to further enhance this.

Previous area for improvement 3

To safeguard and promote young people's health and wellbeing the service must improve their management of medication.

This is to ensure 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 27 June 2022.

Action taken since then

The service has made considerable progress to ensure additional safeguarding processes were in place to improve the safe management of medication.

Previous area for improvement 4

To promote wellbeing and ensure young people's accommodation and environment are maintained to a high standard, the provider should revisit the agreement in place with the housing association to support maintenance being prioritised.

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

I experience an environment that is well looked after with clean, tidy and well maintained premises, furnishings and equipment (HSCS 5.22).

This area for improvement was made on 27 June 2022.

Action taken since then

This inspection found the accommodation and environment to be maintained to high standard, with no concerns regarding the environment and maintenance.

Previous area for improvement 5

For young people to have the service that is right for them, the provider should ensure that decisions regarding admissions are fully informed.

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 area for improvement was made on 27 June 2022.

Action taken since then

The organisation had processes and procedures in place for admissions, and this inspection highlighted that these should be used consistently for all new young people, even if they had previously been known to other Aberlour services.

Previous area for improvement 6

To support continuous improvement and meet young people's changing needs, the provider should improve their quality assurance processes.

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).

This area for improvement was made on 27 June 2022.

Action taken since then

A further area for improvement has been put in place for this inspection relating to quality assurance.

Previous area for improvement 7

To support the wellbeing and development of young people, the provider should ensure staff access specialist training appropriate to their role, and apply this to practice.

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 27 June 2022.

Action taken since then

Staff have undertaken additional training and this continues to be built upon.

Previous area for improvement 8

To ensure young people are safe and protected, the provider should ensure there is a formal agreement in place with the agency providing day to day care on their behalf which details governance and accountability of practice. This should include but is not restricted to whistleblowing and complaints procedures.

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

I am protected from harm, neglect, abuse, bullying and exploitation by people who have a clear understanding of their responsibilities. (HSCS 3.20).

This area for improvement was made on 27 June 2022.

Action taken since then

Aberlour staff are the sole provider of care and support for the young people, and day to day care is no longer being provided by an agency.

Previous area for improvement 9

To support effective planning for young people, the service should ensure care plans are SMART, outcome focused, and reflect the variety of ways young people are being supported.

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

My personal plan is right for me because it sets out how my needs will be met, as well as my wishes and choices (HSCS 1.15).

This area for improvement was made on 27 June 2022.

Action taken since then

This inspection highlighted further improvements that could be made to care planning.

Previous area for improvement 10

To promote children and young people to get the most out of life, the provider should ensure there are multi agency partnerships and collaborations in place which facilitate care planning processes, and these meetings are consistently recorded.

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

If I am supported and cared for by a team or more than one organisation, this is well coordinated so that I experience consistency and continuity (HSCS 4.17)

I benefit from different organisations working together and sharing information about me promptly where appropriate, and I understand how my privacy and confidentiality are respected (HSCS 4.18).

This area for improvement was made on 27 June 2022.

Action taken since then

Multi agency meetings are taking place regularly and these are being consistently recorded.

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?	4 - Good
2.2 Quality assurance and improvement is led well	4 - 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?	4 - Good
5.1 Assessment and personal planning reflects people's outcomes and wishes	4 - Good

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