

Dundee Specialist Mental Health Outreach Service Housing Support Service

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Unannounced

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Service provided by:
Scottish Association For Mental
Health

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About the service

Dundee Specialist Mental Health Outreach Service is a service provided by the Scottish Association for Mental Health (SAMH) which provided support to people with mental health problems, living in their own homes across Dundee. The support focused on enabling people to build on their existing skills or develop new skills, increase their self-esteem and confidence, which in turn encouraged involvement and promoted independence.

About the inspection

This was a full inspection which took place on 20, 22 and 25 September 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 six people using the service and one of their family
- spoke with seven staff and management
- observed practice and daily life
- reviewed documents
- spoke with visiting professionals.

Key messages

- The service provided good support for most of the people it worked with.
- There was a small group of people, with more complex needs, for whom support had not been as effective.
- Staff told us that their leaders were supportive, approachable and knowledgeable and their colleagues were also supportive.
- The service had recently recruited new staff, which had improved staffing levels.
- We found that staff were enthusiastic and eager to learn and wanted to improve their practice.
- Additional staff training was required, to improve the quality of support for all of the people the service supported.
- The service had clear policies and procedures in place, which were reviewed on a regular basis.

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?	4 - Good
How good is our leadership?	4 - Good
How good is our staff team?	3 - Adequate
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?

4 - Good

We evaluated how well the service supported the wellbeing of people experiencing support and overall concluded that the performance of the service in this area was good. We identified that there were important strengths and taken together these strengths clearly outweighed areas for improvement. These strengths had a significant positive impact on people's experiences and outcomes.

We heard many positive comments from people who were supported by the service, as well as professionals, that people were treated with dignity and respect. We witnessed interactions between the people the service supported and staff and observed that these were always respectful and compassionate. We spoke to a number of staff, all of whom told us that they were familiar with SAMH's principles and values such as equality, dignity, choice and hope. Staff were non-judgemental of people's situations and they were conscientious in the way they sought to support people. Staff were enthusiastic in their commitment to supporting recovery for people. Community nurses told us that, in respect of the people known to them, staff demonstrated good values and they knew people's support requirements.

When we spoke to staff many understood the health benefits for people engaging in meaningful activities. We heard from some supported people that staff encouraged them to access activities in the community, but a few said that they struggled with motivation to do so. Diminished motivation can be a symptom of poor mental health. We saw the potential for staff to support people, specifically regarding improving their motivation.

People's care and support should meet their needs and be right for them. Most of the people we spoke to, who used the service, told us that staff supported them with their mental health and well-being. In general, we heard that support was working well for the majority of people who were supported. Several of the people we spoke to said that part of their support was not in person and they thought that they would benefit from more face-to-face support. Some people told us that they were supported by several different staff. A few people told us that they had experienced anxiety because of this inconsistency. Some professionals spoke very highly about the service and they reported positive support outcomes for people. One professional said that they 'could not praise the service enough' and that 'communication from the service was fantastic'.

We heard different views from professionals, who worked with a much smaller group of people who had more complex mental health difficulties. For these people we heard that the turnover of staff and changes in support worker had often compounded engagement problems, leading to people not getting the support they required. We found that the support for these people did not meet their needs and the outcomes they experienced were poorer. We heard a significant range of views regarding how well the service supports health and well-being. A general theme which emerged was that the service was performing well for most of the people it supported, but for a few people with more complex mental health support needs this was not always people's experience.

Areas for improvement

1. In order that people are supported with their medication safely the provider should ensure that the medication administration records are clear, accurate, that errors can be quickly identified and they can be easily audited.

This is to ensure care and support is consistent with 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 leadership?

4 - Good

We evaluated how good the service's leadership was and overall concluded that the performance of the service in this area was good. We identified that there were important strengths and taken together these strengths clearly outweighed areas for improvement. These strengths had a significant positive impact on people's experiences and outcomes.

The service's aims were clearly set out and were person centred, focussing on independence, sustainability and recovery. The aims and objectives reflected the service's compassionate approach to working with people who suffer from poor mental health.

We saw that the service had a wide range of relevant policies and procedures in place. These were well written and showed when they were due to be reviewed. We saw that the service's adult support and protection policy and procedures were clear and understandable. We saw that the service had a strong equalities policy and staff told us that they had recently attended training around diversity and inclusion. We found that safe and effective recruitment practices were in place to recruit staff in accordance with good practice and national safer recruitment guidance. People could be confident that the staff who supported them had been appropriately recruited. There was a clear complaints procedure in place, which explained how to make a complaint and stated who could make one.

Staff told us that they felt supported by their senior and the manager. We saw that the service had clear and effective governance and oversight systems in place to ensure quality care and support was provided. The service had an up-to-date service improvement plan in place. We saw the service improvement plan was effective in identifying areas where improvements were required, but in some respects, it was not as strong in driving forward improvements. For example, many areas of staff training were identified centrally by SAMH, rather than locally, where both the support needs of people receiving the service and the training needs of staff providing it could be best identified.

How good is our staff team?

3 - Adequate

We evaluated how good the service's staffing was and overall, we concluded that the service was performing at an adequate level. We saw that there were some strengths, which had a positive impact on people's experiences, but these were just outweighed by weaknesses in this area.

We saw the service had clear supervision plans. Staff received regular supervision, which was minuted. We heard from some of the newly appointed staff, who told us that they had received (or were receiving) an informative and helpful induction programme.

We saw that earlier in the year the service had experienced a high turn over of staff and staff shortages. We heard from established staff that these shortages had put strain on the staff team and staff felt overworked. To ease the workload of the staff group, the manager had used agency staff, as an interim measure, to cover some nights shifts. At the time of our inspection there was still a vacancy for one of the service's two senior posts. Despite these recent staffing difficulties, the established staff we spoke to, said that they remained positive about their work. We found that staffing levels had improved and we saw that there had been a number of recent appointments.

People should be able to have confidence in the staff who support them because they are trained, competent and skilled, are able to reflect on their practice and follow their professional and organisational codes. Staff told us that they had a range of training opportunities and we could see that they had achieved high participation rates in the training available to them. Staff were knowledgeable about some important areas of practice such as adult support and protection and infection prevention and control. We saw that the majority of training courses were online. We thought that there was scope for more training to be in person as this would encourage participation and discussion amongst staff. As well as supporting people with mental health difficulties we heard that the service was increasingly supporting people who also had physical health support needs. We saw that staff had not received training in some relevant areas of practice. From the sample of training records, we looked at, staff had not received training to support people with personal care nor had they been trained in safe moving and handling techniques. We concluded that these were important training needs for staff.

We found that the majority of the people who were supported by the service experienced positive outcomes. For a small group of people, with more complex mental health support requirements, many of whom also struggled to engage with services, outcomes were less favourable. Although we found that staff were enthusiastic and wanted to provide the best support they could, many were inexperienced and did not have the knowledge and skills to work effectively with people who required more specialist support. Although SAMH is a specialist mental health support provider, we concluded that there was a pressing need for staff to receive training to equip them to support those people with more complex support needs. We are making a requirement for staff to receive additional training (**see requirement 1**).

Requirements

1. By 01 April 2024, the provider must ensure staff access training appropriate to their role and apply their training to practice. This is to ensure people experience safe, high quality care and support, which promotes both their physical and mental health and wellbeing. To do this the provider must at a minimum:

- a) Ensure staff access training in all relevant aspects of supporting people with their personal care needs;
- b) Ensure that staff access training in all relevant safe moving and handling techniques;
- c) Ensure that staff access training in how to engage and support people who have enduring and complex mental health needs;
- d) Ensure that staff access training in how to support people who may have historically struggled to engage with services.

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 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).

How well is our care and support planned?

4 - Good

We evaluated how well care and support was planned and overall, we concluded that the performance of the service in this area was good. We identified that there were important strengths and taken together these strengths clearly outweighed areas for improvement. These strengths had a significant positive impact on people's experiences and outcomes.

Most of the people we spoke to told us that they were encouraged by the service to be involved in their personal support planning. We saw that people were asked their views about the service and some people had completed a service evaluation form. We looked at a sample of these evaluations and, on the whole, people were positive about the approach of staff and the quality of support they received. We found that support plans contained the right information to support most people well. Support plans were person centred and for the majority of people reflected their wishes and their desired outcomes. Importantly people's files held risk assessment and management documents. These identified risks and detailed how these should be managed, to support people's independence and safety.

Some of the professionals, who worked with people with more complex support needs, told us that support was inconsistently delivered by the service. We thought that it would be beneficial for the relevant parties to address any inconsistencies to enhance the prospects of achieving more positive outcomes for people. We are making this an area for improvement (**see area for improvement 1**).

Areas for improvement

1. In order to improve support for all of the people who are supported by the service, the provider should work closely with them and other relevant agencies to develop and agree multi agency support plans, which reflect people's wishes and their desired outcomes.

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 by more than one organisation, this is well coordinated so that I experience consistency and stability' (HSCS 4.17).

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

Requirements

Requirement 1

The provider must ensure that at all times suitably qualified and competent persons are working in the care service in such numbers as are appropriate for the health, welfare and safety of service users.

This is in order to comply with the Social Care and Social Work Improvement Scotland (Requirements for Care Services) regulations 2011, SSI 2011/210 regulation 4 (1)(a) and 15 (a) (b)(i) and takes account of the Health and Social Care Standards – My support, my life:

3.14 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.

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

To commence immediately and be completed by 22nd July 2019

This requirement was made on 8 April 2019.

Action taken on previous requirement

We concluded that this requirement had been partially met. The provider had previously increased staff numbers by using bank and agency staff when this was required. The provider had recently recruited new staff and staff shortages were no longer an acute problem. The provider had improved the completion rate of staff attending training courses as identified by the service.

However, at this inspection we identified areas of training needs for staff in respect of supporting people with their physical health support needs. We also identified that staff should attend specialist training to help them support people with complex mental health support needs, and who may also struggle to engage with services (see requirement 1 made at the current inspection).

Not met

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

Where a service user's independence, choice or control is restricted, the provider should have clear information about the legislation and orders which are in place to keep the person safe.

This takes account of the Health and Social Care Standards - My support, my life:

1.3 If my independence, control and choice are restricted, this complies with relevant legislation and any restrictions are justified, kept to a minimum and carried out sensitively.

This area for improvement was made on 8 April 2019.

Action taken since then

The service had consulted with service users and where indicated their welfare guardians and had revised their approach to reflect people's wishes.

Previous area for improvement 2

The provider must ensure that, where appropriate, clear assessments of risk are developed which highlights potential hazards to the service user and the safety arrangements in place. These should include any arrangements which may be restrictive such as door alarms.

This takes account of the Health and Social Care Standards - My support, my life:

1.3 If my independence, control and choice are restricted, this complies with relevant legislation and any restrictions are justified, kept to a minimum and carried out sensitively.

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

This area for improvement was made on 8 April 2019.

Action taken since then

The service had consultation with service users, and where indicated their welfare guardians. Door alarms were no longer used. Any future of door alarms will be based on risk assessment and the agreement from service users and where indicated their welfare guardians.

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?	4 - Good
1.1 People experience compassion, dignity and respect	4 - Good
1.2 People get the most out of life	4 - Good
1.3 People's health and wellbeing benefits from their care and support	4 - 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?	3 - Adequate
3.2 Staff have the right knowledge, competence and development to care for and support people	3 - Adequate

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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