



## Guidance for providers and applicants on aims and objectives

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### 1. Why are we asking for service's aims and objectives

Within the Social Care and Social Work Improvement Scotland (Applications) Order 2011 (SSI 2011/29) it states that applicants will be asked to provide 'the Aims and Objectives of the Care Service'.

The aims and objectives will be used at the point of registration to ensure prospective providers are clear about the service they aim to provide. We will use these at inspection, to make sure that providers are offering the service they say they will provide in the way they say they would provide this. We may also use the aims and objectives when investigating complaints and processing variations.

The Care Inspectorate expects service providers to be very clear about the service they are providing to people who use care services, why they are providing the service, how it will be provided, who will provide it, and to whom the service will be available. This is also an opportunity to state how the service will address the 'Health and Social Care Standards: My support, My life' and other best practice guidance.

When there is a change, due to commissioning or service developments, the aims and objectives must be reviewed and updated. We will also expect providers to use and review their aims and objectives as part of their quality assurance and improvement work in conjunction with people who use and work in the service.

The aims and objectives should be produced to reflect the needs of people using the service for example easy read, video and child friendly formats.

### 2. What should the statement of aims and objectives contain?

#### a. Introduction to organisation/provider: details of the service

This should set out, who is the provider, any links with other organisations, the type of organisation (e.g. private, 3<sup>rd</sup> sector, public), governance arrangements (i.e. the way the service is managed and the systems in place for managing and operating the service) and the range of services the organisation provides.

#### b. Description of the service:

This should give details about the specific service/statement of purpose. For example, what will be provided including accommodation, for whom the service is intended, age ranges/limits, who will provide the service and on what basis. Where the service is provided from various sites or is provided by various teams, details of these arrangements should be provided.

All services should provide details of the management arrangements. This should state the manager's base and confirm their management responsibility for the full-time management of the service. If the manager is also the manager for another

service, the arrangements for this should be described. This should include a description of management and staffing arrangements including staff roles.

If nursing care is included as part of a care home service this should be stated and details given on how this is provided, for example, if nursing is available in all parts of the service or in specific care units.

**c. Aims:**

This is a short description about what the service aims to do. This may be a single vision statement or a series of aims relevant to this particular service. It should set out the providers overall philosophy and ethos and the general outcomes/experiences people using the service should expect. Any limitations or restrictions should be set out in the aims and objectives, such as, where the service promotes a particular religion or therapeutic approach.

**d. Objectives:**

This is a series of statements specifying what will be done in order that the aims of the service will be achieved. It is useful to consider linking objectives to the headline outcome statements contained within the Health and Social Care Standards. Service specific best practice guidance documents would support the development of the service objectives.

**3. Meeting the Health and Social Care principles and standards: My Support, My Life**

Each service should provide an overall statement which describes how the Health and Social Care principles and standards will be met within the particular service. This can be done by looking at the descriptive statements set out under the key headline standard and explaining how the outcome will be achieved within their service. Not all descriptors will apply to every service, but key elements should be covered explaining how the principles are reflected in the way everyone in the service is treated.

**4. Example of statement of aims and objectives – housing support service**

**Service name:** Kinghorn Sheltered Housing Development

**Address:** 1/20 High Street, Kinghorn, Glasgow GL6 7DB (staff base)

**Organisation/provider:** Kinghorn Sheltered Housing Development is provided by the Drummond Group, a private company that provides services across Scotland to older people with learning disabilities. The Drummond Group was established in 2004 and was initiated to support the son of Company Directors, Mr and Mrs Drummond move from long term hospital care into community-based services. The other company directors are (names).

The Drummond Group is registered with Companies House (number).

The Drummond Group currently provides:

- sheltered housing in three locations: Glasgow (care service number), Stirling (care service number) and Musselburgh (care service number)
- care at some services provided in Glasgow (care service number) and Stirling (care service number).

### **Description of the service:**

Kinghorn Sheltered Housing (is registered to provide a housing support service - CS number (completed on registration)). The service provides accommodation with support to up to 16 tenants living in eight self-contained flats in the development. Tenancies will be offered to people over 55 with a learning disability. Some ground floor flats are accessible for people using wheelchairs or specialist equipment. The service provides support to people to enable them to be as independent as possible, rather than providing personal care.

Staff are located on site from 7am – 10pm daily. Tenants use the local authority out-of-hours emergency service from 10pm – 7am if necessary. We employ a staff team of seven full time staff who support tenants in their homes and as needed within the local community.

Tenants may be self-funding/private or they may pay their rent and support costs from benefits. All potential tenants are assessed by social work as needing the support we provide before we offer any tenancies.

Transport is not provided. Tenants are required to fund transport themselves and for their support worker. Details of all additional costs are detailed in the tenants handbook which is updated annually in April.

### **Staff team:**

Manager: Mrs Mary Murphy

Team leader/depute: Alan Fraser

Staff team: 6 WTE support workers.

### **Aims of the service:**

The service provides accommodation with high-quality support to older people with a learning disability. The service aims to support tenants to remain in their own homes, rather than going into long-term care homes or hospital and supports people to remain as independent as possible and participate as active citizens within their local community.

The service aims to support tenants achieve their own personal aspirations and:

- promote independence through goal-setting and re-enablement approaches
- support people to explore and develop new personal life experiences and maintain existing interests

- encourage social networking or leisure pursuits, maximising the wider use of the community
- actively involve people in shaping their service, how it will be delivered and reviewed
- develop active partnerships with families and other agencies.

## **Objectives:**

### **Meeting the Health and Social Care principles and standards: My Support, My Life**

We are committed to meeting and promoting the principles of: Dignity and respect, Compassion, Be Included, Responsive support and Wellbeing. If we do not meet these, tenants can raise their concerns with us, use our complaints procedure or complain to the Care Inspectorate.

#### **Standard 1: I experience high quality care and support that is right for me**

This service provides high quality support to tenants that is right for them. With people using the service, we assess and review their needs, wishes and aspirations and record these in their personal plan and we will provide support people in order that people can realise these.

We support people to take control over the support they need and how and when this is delivered.

Tenants specify when they want the support they need (as agreed in their personal plan) and where possible choose the member of staff who they would like to provide the support. This is agreed and recorded on a weekly planner. Tenants' personal plans are reviewed at least every six months. Where there are significant people in the tenant's life, they will also be invited to attend. These may include relatives or social work or health staff.

Where changes in tenants' needs are identified, appropriate contact and/or referrals will be made to ensure multi-disciplinary team working.

Staff recognise the risk of isolation and the importance of health and wellbeing. As such, healthy freshly prepared meals - lunch and tea, are available from the communal canteen daily. This is to encourage people to meet, chat and hold social activities. A social committee made up of staff and tenants support these activities.

#### **Standard 2: I am fully involved in all decisions about my care and support**

Tenants are encouraged to attend community groups and activities, particularly where they have established links or previous interests. Staff will provide support to enable people to attend, where this is set out in the personal plan, but will work to support independent attendance or to create networks with members of the local community. Tenants are supported to do their own shopping, collect their own medicines and manage their own money and look after their own flat. Staff do not

provide a shopping, cleaning, laundry or meal preparation service for tenants in their own flats. Where people are unable to do this themselves with minimal support/direction, visiting services would need to be provided from a care at home service.

### **Standard 3: I have confidence in the people who support and care for me**

All support staff and their managers are members of the PVG scheme and all staff are recruited safely as detailed in our recruitment policy. Staff are trained to a minimum of SVQ level 3 and we deliver in-house training and development to ensure staff are working to the organisation's values and ethos. All staff have undertaken 'caring about rights' the Scottish Human Rights Commission training programme. In addition to staff induction, in-house training and qualifications, staff receive specific input on issues relating to tenants' needs, such as communication, ageing, dementia awareness.

Staff receive regular supervision and attend staff meetings where continual professional development is reviewed and an annual training and development plan is produced. Staff are expected to keep up-to-date with good practice and meet the codes of conduct required of them.

### **Standard 4: I have confidence in the organisation proving my care and support**

Tenants are encouraged to actively participate in decisions about how the service operates, this includes staff recruitment, staff training and decisions about the menus and redecoration of communal areas. Tenants are encouraged to take part in our internal quality and improvement reviews and the Care Inspectorate's inspection activities.

We carry out an annual service review as part of our own internal quality assurance processes and people using the service, and where they wish, their family/representatives are fully included in this process. We welcome comments, feedback and/or complaints in order to improve tenants' experience of using our service.

### **Standard 5: I experience a high-quality environment if the organisation provides the premises**

Tenants have a legal tenancy agreement for their own flats. Communal areas within the sheltered housing development are provided by the Drummond Group and are for the use of tenants, specifically a communal lounge, laundry and a guest bedroom. The guest room is available to tenants for the use of relatives/friends where they do not wish to sleep over in the tenants own flat. We will involve tenants in any changes to the environment, such as redecoration or purchasing of furniture. The public areas are subject to health and safety auditing and are cleaned and maintained by external contractors. Pets are allowed within the tenants' own flats. For restrictions see the tenancy agreement.

Date: 22 May 2019

Review date: before end of April 2020

## **5. Example of updated statement of aims and objectives – existing childminder**

**Service name:** Magpie Childminding

**Organisation/Provider:** Mrs Margaret Smith

### **Background:**

I am a qualified primary school teacher but stopped work when I had my three children. I began childminding in 2010 and have been assessed by the Care Inspectorate to be a very good service receiving grades 5 and 6 at my inspections. I operate the service from my family home (address).

### **Description of the service:**

I offer a childminding service for up to five primary school children. The service is available weekdays from 7am-9am and 3pm-6pm. I do not provide a service during school holidays due to my own family commitments.

I am assisted on a daily basis by my 18-year-old daughter who, like myself is a member of the PVG scheme. We are both up-to-date with child protection practice. The service that I provide is run from my own home and so it is my priority to create a homely and welcoming atmosphere for all children in my care to relax, play and have fun with each other in a safe environment. All rooms on the ground floor (toilet/shower room, lounge, dining room and access to a secure garden) are available to the children in my care.

I do not provide any transport. We accompany children on the 10-minute walk to the local primary school (Castle Primary School)

I provide healthy breakfast options and snacks after school, in line with nutritional standards. Children can also bring tuck boxes if this is the child's/carers preference. After school activities primarily will take place within the family home/garden and the local park. Children will be supervised at all times.

I aim to provide:

- a warm, friendly, nurturing and safe home in which parents/carers will feel comfortable and confident to leave their children
- a home suitable for primary school children which meets all of the children's individual needs and interests
- a happy and fun service for the children with a range of active, educational and engaging activities
- healthy and nutritious breakfast and snacks, while encouraging children to participate in preparation.

I do this by meeting the SHANARRI Principles and the Health and Social Care Standards: My Life, My Support.

**My Life, My Support Principle - Dignity and respect: SHANARRI Indicator/s: Respected**

I recognise that all people, irrespective of age or ability, are unique individuals and will at all times respect and promote their human rights. I respect children's privacy for example, when providing personal care in private and when having private conversations with carers about their children in a way these are not overheard by others.

**My Life, My Support - Compassion: SHANARRI Indicator/s: Nurtured**

I provide a caring service in an environment which is a 'home from home'. Children can cosy down on the settee or bean bags to relax after school. If distressed, I will comfort the children in the way they prefer, this may be simply by giving the child a hug.

**My Life, My Support - Be Included: SHANARRI Indicator/s: Included, Responsible**

I ask carers and the children to complete a questionnaire when they start the service. This gives me information about the children's needs and interests. I use this information as well as discussions with the children to plan the activities I provide. I operate a complaints and complements procedure which is child friendly and will aim to resolve complaints quickly.

**My Life, My Support Principle - Responsive care and support: SHANARRI Indicator/s: Safe, Healthy**

I update the children's plans at the beginning of each school terms but at any time where there is a change of circumstances or needs. This means that the care and activities I provide is designed to meet children's ever-changing needs/interests. I have relevant procedures in place to make sure I alert and contact the right people at the right time. This may be carers when the children take unwell or social services should child protection issues be apparent.

**My Life, My Support Principle - Wellbeing: SHANARRI Indicator/s: Safe, Healthy, Achieving, Active**

The children's safety and wellbeing are central to my service. I provide leisure and educational activities in order that children keep active and can achieve new practical and emotional skills and keep healthy.

I also work to achieve the Health and Social Care Standards: My Life, My Support:

**Standard 1: I experience high quality care and support that is right for me – I will provide a caring, child-centred, stimulating, educational but fun service.**

**Standard 2: I am fully involved in all decisions about my care and support - I will encourage the children to make choices about what they do, what they eat/drink.**

**Standard 3: I have confidence in the people who support and care for me – I will strive to give children and their family carers confidence in me as a childminder.**

**Standard 4: I have confidence in the organisation providing my care and support**  
– I will strive to give children and their families confidence in my service and how I provide this.

**Standard 5: I experience a high-quality environment if the organisation provides the premises** – I will provide a safe, stimulating and warm environment within the house and use outdoor spaces frequently.

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