

# Care service inspection report

# ACHA Sheltered Housing Service

Housing Support Service

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Inspected by: Elspeth Gibb

Type of inspection: Announced (Short Notice)

Inspection completed on: 31 March 2014



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## Service provided by:

Argyll Community Housing Association Limited

## Service provider number:

SP2011011514

### Care service number:

CS2005093680

## Contact details for the inspector who inspected this service:

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# Summary

This report and grades represent our assessment of the quality of the areas of performance which were examined during this inspection.

Grades for this care service may change after this inspection following other regulatory activity. For example, if we have to take enforcement action to make the service improve, or if we investigate and agree with a complaint someone makes about the service.

## We gave the service these grades

Quality of Care and Support 4 Good

Quality of Staffing 5 Very Good

Quality of Management and Leadership 5 Very Good

#### What the service does well

Argyll Community Housing Association Ltd (ACHA) offers a valued service in local communities throughout Argyll and Bute. The inspection focused on the service in Rothesay and Ford Spence Court in Benderloch.

The people involved in the inspection said they appreciated the input of the staff in each sheltered housing complex and generally there was a very high level of satisfaction with the service

Tenants in the sheltered housing complexes are supported by part-time Community Support Assistants and a 24 hour call system.

#### What the service could do better

Some people have expressed unhappiness about the reduction in hours of their warden service which previously was a 24 hour service. Although the changes were made several years ago there are strong feelings about the impact of this on the general ethos in the complexes. In some geographical areas, the people using the service felt they had little impact on the way the service runs. Some suggestions are made under Quality Statement 1.1.

In some areas staff are isolated and do not have the opportunity to meet with other staff and this is a noted area for development in Quality Statement 3.3.

## What the service has done since the last inspection

The service demonstrates commitment to continuous improvement of the service.

### Conclusion

The service has continued to provide a very positive service to older people throughout Argyll and Bute.

## Who did this inspection

Elspeth Gibb

# 1 About the service we inspected

The Care Inspectorate regulates care services in Scotland. Prior to 1 April 2011, this function was carried out by the Care Commission. Information in relation to all care services is available on our website at www.careinspectorate.com.

The Care Inspectorate will award grades for services based on findings of inspections. Grades for this service may change after this inspection if we have to take enforcement action to make the service improve, or if we uphold or partially uphold a complaint that we investigate.

The history of grades which services have been awarded is available on our website. You can find the most up-to-date grades for this service by visiting our website, by calling us on 0845 600 9527 or visiting one of our offices.

Requirements and recommendations

If we are concerned about some aspect of a service, or think it could do more to improve its service, we may make a recommendation or requirement.

A recommendation is a statement that sets out actions the care service provider should take to improve or develop the quality of the service but where failure to do so will not directly result in enforcement.

A requirement is a statement which sets out what is required of a care service to comply with the Public Services Reforms (Scotland) Act 2010 and Regulations or Orders made under the Act, or a condition of registration.

Where there are breaches of the Regulations, Orders or conditions, a requirement must be made. Requirements are legally enforceable at the discretion of the Inspectorate.

Argyll Community Housing Sheltered Housing Service is owned and managed by Argyll Community Housing Association Ltd (ACHA). The service provides a Housing Support Service to older tenants who live in sheltered housing complexes throughout Argyll and Bute.

The service has 11 separate complexes in various locations throughout Argyll and Bute. The complexes have on site community support assistants who mostly work mornings with an emergency call system covering the rest of the time the complex in unmanned.

Based on the findings of this inspection this service has been awarded the following grades:

Quality of Care and Support - Grade 4 - Good Quality of Staffing - Grade 5 - Very Good Quality of Management and Leadership - Grade 5 - Very Good

This report and grades represent our assessment of the quality of the areas of performance which were examined during this inspection.

Grades for this care service may change following other regulatory activity. You can find the most up-to-date grades for this service by visiting our website www.careinspectorate.com or by calling us on 0845 600 9527 or visiting one of our offices.

# 2 How we inspected this service

### The level of inspection we carried out

In this service we carried out a low intensity inspection. We carry out these inspections when we are satisfied that services are working hard to provide consistently high standards of care.

### What we did during the inspection

We wrote this report following an unannounced inspection which was conducted by Elspeth Gibb. The inspection took place between over five days; 28th February,14th, 24th, 26th and 31st March 2014.

During the inspection, evidence was gathered from a number of sources including:

Discussions with the people using the service, relatives, the Community Support Assistants, local area managers and the registered manager of the service

The most recent self assessment and annual return

Personal plans

Staff records

Minutes of staff meetings

Minutes of tenants' meetings

Accident and incident logs

Risk assessment procedures

Quality assurance records

Observation of staff interactions

We took all of the above into account in writing this report.

## Grading the service against quality themes and statements

We inspect and grade elements of care that we call 'quality themes'. For example, one of the quality themes we might look at is 'Quality of care and support'. Under each quality theme are 'quality statements' which describe what a service should be doing well for that theme. We grade how the service performs against the quality themes and statements.

Details of what we found are in Section 3: The inspection

## Inspection Focus Areas (IFAs)

In any year we may decide on specific aspects of care to focus on during our inspections. These are extra checks we make on top of all the normal ones we make during inspection. We do this to gather information about the quality of these aspects

of care on a national basis. Where we have examined an inspection focus area we will clearly identify it under the relevant quality statement.

## Fire safety issues

We do not regulate fire safety. Local fire and rescue services are responsible for checking services. However, where significant fire safety issues become apparent, we will alert the relevant fire and rescue services so they may consider what action to take. You can find out more about care services' responsibilities for fire safety at www.firelawscotland.org

#### The annual return

Every year all care services must complete an 'annual return' form to make sure the information we hold is up to date. We also use annual returns to decide how we will inspect the service.

Annual Return Received: Yes - Electronic

#### Comments on Self Assessment

Every year all care services must complete a 'self assessment' form telling us how their service is performing. We check to make sure this assessment is accurate.

The Self Assessment was completed thoroughly prior to the inspection and included information about what the service thought they did well and identified areas for improvement. The provider should continue to explore and implement meaningful ways of involving staff and service users in the process of self assessment to promote awareness of the Quality Themes and the grading process.

## Taking the views of people using the care service into account

"The wardens and the relief wardens are all very good. We are lucky to have such nice people supporting us"

"Staff are very helpful to me - I need more help now and it is good to have kind people here every day"

"I think staff do a great job"

"I don't think the staff have nearly enough time to do the things they need to do in the time they have been allocated."

"I am grateful I can stay in my own home and have the support I get"

" We couldn't ask for better person than our warden. She is just a gem"

"I think it is a real shame that there is no sense of community here since ACHA made the wardens work part-time. Nothing goes on here now. I feel very isolated"

"I don't feel that ACHA involves us enough in decisions. I don't like the guest rooms being given to workmen. I think it happens too often and we don't know who is in the building"

## Taking carers' views into account

The carers we spoke with felt very strongly about the reduced working arrangements for staff and did not feel that they were consulted effectively about past or current issues. They felt their opinions were not valued by the organisation.

# 3 The inspection

We looked at how the service performs against the following quality themes and statements. Here are the details of what we found.

## Quality Theme 1: Quality of Care and Support

Grade awarded for this theme: 4 - Good

#### Statement 1

We ensure that service users and carers participate in assessing and improving the quality of the care and support provided by the service.

#### Service strengths

We found that this service's performance was good in the areas covered by this statement. We concluded this after looking at personal plans and speaking with staff, and the people who use the service. We also used the questionnaires received from service users and staff in the geographical areas not visited to decide on the grading for the service.

The inspection showed that the staff respond very well to issues raised by the people using the service.

Each person has a support plan which describes the support which has been agreed and these are reviewed twice a year or as required.

In some geographical areas there was a high level of engagement with service users and the local communities were involved in arranging activities in the communal areas.

The complaints process is advertised and tenants are reminded of this process in the quarterly Newsletter.

People are made aware of the services of local advocacy organisations.

There are three sheltered housing tenants on the Association's Board of Management and the organisation continues to promote involvement at this level.

#### Areas for improvement

Although the majority of people involved in the inspection, either directly of using questionnaires, said that overall they were happy with the service, a significant percentage said that the service did not ask them how it could improve and many people said they didn't know if they had a personal plan.

Discussion during the inspection showed that service users would welcome a more local approach to consultation and more involvement in the way the service runs. An example of this was the suggestion by one person that a rota could be drawn up for light gardening and maintenance of the flower tubs and flower beds outside the building. Some people were very able and willing to be involved in improving the quality of the service and promotion of social activities.

The provider should explore more meaningful ways of promoting participation and involvement in ways that are suitable for each different geographical location. The inspection showed that people did not find the use of questionnaires meaningful and that there was a preference for meeting with local community support assistants and those involved in the service.

The service recently consulted service users about the time of day the daily phone call should be made by the staff to check on each individual's wellbeing. This resulted in some people's requests for an early phone call rather than an afternoon call being overlooked, as the majority were happy with an afternoon call. Best practice would encourage a more individualised and flexible approach to such decision making allowing for more flexibility and choice.

Grade awarded for this statement: 4 - Good

Number of requirements: 0

Number of recommendations: 1

#### Recommendations

1. The provider should develop a more regular forum for people to get together and make suggestions to promote improvement to the service.

NCS 8 Housing Support Services - Expressing Your Views.

#### Statement 3

We ensure that service users' health and wellbeing needs are met.

#### Service strengths

We found that this service's performance was good in the areas covered by this statement. We concluded this after looking at personal plans, speaking with staff and the people who use the service.

The inspection showed that the people using the service were being supported to maintain their independence and that the majority of service users were very happy with the quality of the service they receive.

There were some excellent examples of staff providing a very high level of care and support and strong evidence that they were motivated to provide a high quality service. Strong relationships were evident and many positive comments were made about the service received.

Each person receives a daily phone call from a staff member to ensure that they are well and secure. Referrals are made to health professionals as required and there were good links with local health services.

There is a brief personal support plan in place for each person using the service.

Individual review meetings are scheduled 6 monthly offering the opportunity of indepth focus on any matters of concern including any health issues.

## Areas for improvement

We found that the service's performance was good in the areas covered by this statement. We concluded this after looking at personal plans and speaking with staff, and the people who use the service.

Although each person has a concise support plan which includes their personal details and some information about support, the quality of information in these plans was variable. Individual involvement in and awareness of their personal plan was also variable throughout this service. The content of the personal plans should be improved to include more detail about how each person's support should be arranged. The way personal health information and other significant information is recorded should be individualised rather than written in a communal diary, to comply with data protection and freedom of information legislation. This will also promote accountability for response, intervention and follow through of the health issues and other important information recorded.

Staff should use the review process to encourage more awareness of the individual's right to a flexible service which meets their needs. The recording of reviews seen during inspection showed a rather passive approach to monitoring the current

satisfaction of service users and there was limited evidence seen of the service changing in response to the review. It was not clear how service users' relatives' comments were being included in decisions about improving the service.

Each person has daily contact with a staff member to ensure that they are well and secure.

Some people expressed concern that the guest rooms were used as accommodation for tradesmen working for ACHA. Some felt that this impinged on their sense of security in the building as there were lots of different people coming into the building.

Grade awarded for this statement: 4 - Good

Number of requirements: 0

Number of recommendations: 1

#### Recommendations

1. Individual support planning and reviews of support arrangements should be improved to demonstrate a proactive approach to promoting improvement. Recording systems should be individualised to promote accountability.

NCS 4 Housing Support Services - Housing Support Planning.

## Quality Theme 3: Quality of Staffing

Grade awarded for this theme: 5 - Very Good

#### Statement 1

We ensure that service users and carers participate in assessing and improving the quality of staffing in the service.

#### Service strengths

We found that the service's performance was very good in the areas covered by this statement. We concluded this after looking at personal plans and speaking with staff, and the people who use the service.

The inspection showed that the organisation had consulted and gathered feedback which has contributed to the evaluation of staff.

Comments on participation and involvement are noted at Quality Theme 1, Statement 1.

### Areas for improvement

The provider should consider ways of involving service users in staff recruitment.

Areas for development with regard to participation and involvement are noted at Quality Theme 1, Statement 1.

**Grade awarded for this statement:** 5 - Very Good

Number of requirements: 0

Number of recommendations: 0

#### Statement 3

We have a professional, trained and motivated workforce which operates to National Care Standards, legislation and best practice.

#### Service strengths

We found that the service's performance was very good in the areas covered by this statement. We concluded this after looking at personal plans and speaking with staff, and the people who use the service.

The inspection showed that there were many examples of excellent staff performance and motivation. The people using the service gave very positive feedback about the way staff support them and observation of the interaction between staff and service users was, in some instances, excellent.

All staff have access to a comprehensive training programme and training needs are identified through the appraisal system.

Staff have access to individual support from their line manager and in some areas team meetings take place.

Staff demonstrated awareness of the SSSC Code of Conduct and the provider is aware of the requirements for registration with the council for all staff.

The inspection showed that the Human Resources department was very well organised and that the culture of the organisation in relation to staff development and training was very positive. There were examples of excellent practice.

### Areas for improvement

A plan for SVQ training to comply with the requirements of registration is being put in place.

In some isolated geographical areas, formal individual supervision of staff is irregular and there is no opportunity to meet up with other community support assistants.

Regular opportunities for staff to contribute their suggestions and participate in the ongoing improvement of the service should be put in place.

**Grade awarded for this statement:** 5 - Very Good

Number of requirements: 0

Number of recommendations: 1

#### Recommendations

1. All staff should have access to individual support and supervision and should be able to meet with other staff to discuss concerns and suggestions for improvement. Regular staff meetings should be scheduled in all areas to achieve this.

NCS 3 Housing Support Services - Management and Staffing Arrangements

## Quality Theme 4: Quality of Management and Leadership

Grade awarded for this theme: 5 - Very Good

#### Statement 1

We ensure that service users and carers participate in assessing and improving the quality of the management and leadership of the service.

#### Service strengths

We found this service was performing very well in the areas covered by this statement. We concluded this after we spoke to the manager and the staff team, reviewed staff training plans and talked to people who use the service.

There was a positive ethos throughout the service and the inspection showed that managers and staff were committed to providing a high quality service.

Details of the procedures and methods used to promote participation are included at Quality Theme 1, Statement 1.

### Areas for improvement

As discussed in Quality Statement 1.1 there is a need for more focussed involvement at a local level to support service users to impact on the way local services are managed.

Grade awarded for this statement: 5 - Very Good

Number of requirements: 0

Number of recommendations: 0

#### Statement 4

We use quality assurance systems and processes which involve service users, carers, staff and stakeholders to assess the quality of service we provide

#### Service strengths

We found this service was performing very well in the areas covered by this statement. We concluded this after we spoke to the registered manager, local managers and the community support assistants in the areas visited. We also reviewed staff training plans and talked to people who use the service.

The service to each person is reviewed regularly and meetings are arranged for each person supported by their family member if they request this. Reviews take place every six months to discuss the level of support provided and whether it is meeting the service user's needs.

The majority of service users and relatives told us that they were very happy about the way the service is managed and that they felt confident that issues raised with the manager would be addressed efficiently and sensitively.

The inspection also noted that in most geographical areas there were good systems in place to ensure that communication between staff was effective. Team meetings are scheduled regularly to allow staff to discuss important matters and raise any issues.

We found that the organisation had effective systems in place to evaluate the quality of the service and that robust policies and procedures were in place to ensure the smooth running of the service.

### Areas for improvement

As discussed at Quality Statement 3.3, local arrangements for the management of staff in some geographical areas could be improved.

**Grade awarded for this statement:** 5 - Very Good

Number of requirements: 0

Number of recommendations: 0

# 4 Other information

## Complaints

No complaints have been upheld, or partially upheld, since the last inspection.

#### **Enforcements**

We have taken no enforcement action against this care service since the last inspection.

#### Additional Information

#### **Action Plan**

Failure to submit an appropriate action plan within the required timescale, including any agreed extension, where requirements and recommendations have been made, will result in the Care Inspectorate re-grading a Quality Statement within the Quality of Management and Leadership Theme (or for childminders, Quality of Staffing Theme) as unsatisfactory (1). This will result in the Quality Theme being re-graded as unsatisfactory (1).

# 5 Summary of grades

Quality of Care and Support - 4 - Good				
Statement 1	4 - Good			
Statement 3	4 - Good			
Quality of Staffing - 5 - Very Good				
Statement 1	5 - Very Good			
Statement 3	5 - Very Good			
Quality of Management and Leadership - 5 - Very Good				
Statement 1	5 - Very Good			
Statement 4	5 - Very Good			

# 6 Inspection and grading history

Date	Туре	Gradings	
25 Jan 2011	Announced	Care and support Staffing Management and Leadership	5 - Very Good 5 - Very Good Not Assessed

All inspections and grades before 1 April 2011 are those reported by the former regulator of care services, the Care Commission.

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#### Translations and alternative formats

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-ے بایتسد ریم روزابز رگید روا رولکش رگید رپ شرازگ تعاشا می

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