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<b>Report To:</b>	<b>Health and Social Care Committee</b>	<b>Date:</b>	<b>23 February 2017</b>
<b>Report By:</b>	<b>Brian Moore Corporate Director (Chief Officer) Inverclyde Health and Social Care Partnership (HSCP)</b>	<b>Report No:</b>	<b>SW/18/2017/BC</b>
<b>Contact Officer:</b>	<b>Beth Culshaw Head of Health and Community Care</b>	<b>Contact No:</b>	<b>01475 715283</b>
<b>Subject:</b>	<b>Learning Disability - Outreach and Community Supports Service</b>		

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## 1.0 PURPOSE

- 1.1 To advise the Health & Social Care Committee of the outcome of the inspection of November 2016 conducted by the Care Inspectorate in relation to the Outreach and Community Support Service.
- 1.2 To advise the Committee of the reduction in Grades for Quality of Care and Support, and Staffing and the developments that will be put in place to address this.

## 2.0 SUMMARY

- 2.1 The Care Inspectorate carried out an unannounced inspection of the Learning Disability Day Opportunities, Outreach and Community Supports on 3<sup>rd</sup> November 2016.
- 2.2 Questionnaires were utilised to gather feedback from service users and carers and families.
- 2.3 Summary of Grades:-
  - Quality of Care and Support – 4 – Good (Previously 5)
  - (Quality of Environment – Not assessed, remain at 5 – Very good)
  - Quality of Staffing - 4 – Good (Previously 5)
  - (Quality of Management and Leadership – Not assessed, remain at 5 – Very good)
- 2.4 The feedback received from service users, families and carers who use the service was very positive:-
  - "Could not do without the service as it has built up my confidence in reading and writing"
  - "Would like to do more activities like swimming, gym and football"
  - "Staff are nice to us at all times, always providing us with choices"
  - "Having this service has made a huge difference to my life in a very positive way"
- 2.5 The Care Inspectorate noted during their visit that the service's quality of care and support provided to service users was good. Staff and service users were observed to have developed positive relationships, built over a number of years.

- 2.6 Staff told the Care Inspectorate that they felt listened to and appreciated in their roles. They also feel that they are provided with good training with which to fulfil their responsibilities. The training offered was noted as being directly related to the needs of service users receiving support.
- 2.7 Staff reported feeling valued for their opinion and told the Care Inspectorate that the morale within the team was high as everyone is encouraged to contribute to the continuous development of the service and support being provided.

### **3.0 RECOMMENDATIONS**

- 3.1 There were no requirements or recommendations from the Care Inspectorate. The Care Inspectorate has suggested some development work that the Service could undertake to develop their grades.

**Brian Moore**  
**Corporate Director (Chief Officer)**  
**Inverclyde HSCP**

## **4.0 BACKGROUND**

- 4.1 Learning Disabilities Day Opportunities Service provides community support to adults with a learning disability within Inverclyde.
- 4.2 Day Opportunity Services offer care and support to enhance an individual's quality of life and improve opportunities to be involved in lifelong learning, leisure/recreation, employment and social inclusion. The service promotes independence and encourages and enables individuals to participate in community based activities of their choice.

## **5.0 PROPOSALS**

5.1 To advise the Committee of the Care Inspectorate grading of 4 (Good) across all areas inspected and the areas of development that have been highlighted for the service to undertake in the next 12 months.

5.2 The service should look to develop the following in the next twelve months:-

- Care and support plans need to be audited more regularly to ensure that the latest information is held on each service user, allowing staff to provide consistent and person-centred supports.
- Streamlining quality assurance techniques is advised so that a new member of staff can read through a support plan and be sure that the information they have is appropriate and current.
- While reviews have been taking place on a more regular basis than in previous inspections, the Care Inspectorate would like to see an improvement in the product of these reviews, as at present the information gathered within the review form can be basic. There should be an emphasis on how the service aims to improve outcomes for service users.
- The service should also be mindful of ensuring that two reviews are to be conducted for each service user every year especially where the support for an individual is split between two agencies.
- The Care Inspectorate has noted that the service is working to develop its outcomes based approach to the presentation of care and support plans. Progress on developing this approach has been slower than expected resulting in only a small number of the care plans evidencing this type of outcomes focused work. The Care Inspectorate have suggested that this document is read by the management team and that a development day for service staff is arranged to ensure that all have the opportunity to understand what an outcome is and how they can make improvements in this area.
- The Service should note that the issue of quality assurance should be the responsibility of everyone in the service, not just the management team. One way to demonstrate this is for the staff to be asked to contribute to the self-assessment, which the service is obliged to submit prior to inspection each year. This can be done through the introduction of a more formal team meeting, perhaps taking place every 6-8 weeks, allowing for discussion on how the service can progress as well as passing on relevant staff information. The information gathered from the staff at these meeting should be used by the management team to develop a holistic self-assessment of the service.

## **6.0 IMPLICATIONS**

### **FINANCE**

6.1 Financial Implications

None

Cost Centre	Budget Heading	Budget Years	Proposed Spend this Report £000	Virement From	Other Comments

Annually Recurring Costs/(Savings)

Cost Centre	Budget Heading	With Effect from	Annual Net Impact £000	Virement From (If Applicable)	Other Comments

## LEGAL

6.2 There are no legal issues within this report.

## HUMAN RESOURCES

6.3 There are no human resources issues within this report.

## EQUALITIES

6.4 There are no equality issues within this report.

Has an Equality Impact Assessment been carried out?

	YES (see attached)
√	NO – This report does not introduce a new policy, function or strategy or recommend a change to an existing policy, function or strategy. Therefore, no Equality Impact Assessment is required.

## REPOPULATION

6.5 There are no repopulation issues within this report.

## 7.0 CONSULTATION

7.1 None.

## 8.0 BACKGROUND PAPERS

8.1 Care Inspectorate – Outreach and Community Supports, Support Services; November 2016.

## Outreach and Community Supports Support Service

Fitzgerald Centre  
110 Lynedoch Street  
Greenock  
PA15 4AH

Telephone: 01475 715820

Type of inspection: Unannounced  
Inspection completed on: 3 November 2016

**Service provided by:**  
Inverclyde Council

**Service provider number:**  
SP2003000212

**Care service number:**  
CS2007164625

## About the service

Outreach and Community Supports is provided by Inverclyde Council Health and Social Care Partnership and is registered to provide community based support to people with a learning disability.

There are three parts to the service - Outreach, Community Supports and Older People. The Outreach and Community Support services are community based and access a variety of resources throughout Inverclyde and the surrounding areas. The Older People's service is a building-based day service near Greenock for older people or those who prefer a quieter environment.

The services are managed by a Day Opportunities Coordinator whose office base is in the Fitzgerald Centre, Greenock.

The service states that it aims "to encourage and enable individuals to live as full a life as possible and to place at the core of service provision the need, wishes and aspirations of our service users."

## What people told us

For this inspection, we spoke individually with eight people using the service. We also received 25 completed care standard questionnaires.

From the responses gathered, 23 were either very happy or happy with the quality of care and support provided and confident that the staff team had the necessary skills to provide the support and that they always treat service users with respect.

Comments from those we spoke with included:

"Could not do without the service as it has built up my confidence in reading and writing"

"Would like to do more activities like swimming, gym and football"

"Staff are nice to us at all times, always providing us with choices"

"Having this service has made a huge difference to my life in a very positive way"

## Self assessment

The Care Inspectorate received a completed self-assessment from the provider. The provider identified what it thought the service did well and gave examples of improvements in various areas. The self-assessment clearly identified some key areas that the provider believed can be improved and showed how the service intended to do this.

We spoke with the local management team about involving more stakeholders in the development of the self assessment, including the staff and service users.

## From this inspection we graded this service as:

Quality of care and support	4 - Good
Quality of environment	not assessed
Quality of staffing	4 - Good

Quality of management and leadership

not assessed

## What the service does well

During our visit, we noted that the quality of care and support provided to service users was very good. Staff and service users were observed to have developed very good relationships, built over a number of years and through hard work.

The service users we spoke with told us how happy they are with the support provided and were very complimentary about the staff providing that support. We were told that they feel safe, respected, in control of their own support and are treated with dignity at all times.

Service users told us they were empowered by the staff to make their own choices, in terms of the support provided and activities they take part in.

The service continues to work well with other partnership agencies, to develop more outcomes based support plans. The transition to a more outcomes focussed care plan for each individual continues. We will make further comment on this within the following section on areas for improvement.

The care and support plans we examined were noted to be inclusive of the thoughts and feelings of those being supported.

Questionnaires have been used to gather feedback from service users and their families. The information gathered here can then be used to develop the services improvement plan and other important development documents. Again we will make further comment on this plan within the following section.

The staff told us that they felt listened to and appreciated in their roles. They also feel that they are provided with good training with which to fulfil their responsibilities. The training offered was noted as being directly related to the needs of service users receiving support.

Staff reported feeling valued for their opinion and told us that the morale within the team was high as everyone is encouraged to contribute to the continuous development of the service and supports being provided.

Staff are comfortable and familiar with the support arrangements in place for service users. We spoke with a new member of the team who talked of their thorough induction which has included shadowing more experienced members of the team. This provides very good opportunities to learn from experience while also being able to discuss any relevant issues they may have with those who know the service well.

Staff also feel well supported by their colleagues, including the local management team. An open door policy exists to ensure that a colleague is always on hand to answer questions and provide any necessary guidance.

## What the service could do better

We noted that care and support plans need to be audited more regularly to ensure the latest information is held on each service user, allowing staff to provide consistent and person centred supports.

By streamlining quality assurance techniques, a new member of staff can read through a support plan and be sure that the information they have is appropriate and current. At times when reading through the folders during the inspection we found information which dated back to 2012. The information may still be relevant, however as there was no record of a review of the documentation we could not be sure.

While reviews have been taking place on a more regular basis than in previous inspections, we would like to see an improvement in the product of these reviews.

At present the information gathered within the review form can be basic, while we would like to see more emphasis on how the service aims to improve outcomes for service users. (more to follow)

The service should also be mindful of ensuring that 2 reviews are to be conducted for each service user every year. When the support for an individual is split between two support agencies, it is imperative they work together to ensure that this is achieved.

We have seen that the service is working to develop its outcomes based approach to the presentation of care and support plans. At the last inspection we made reference to the Joint Improvement Team's document - Talking Points, focussing on improving the way staff think and provide support with regards to driving an outcomes based agenda.

Progress on developing this approach has been slow, resulting in only a small number of the care plans evidencing this type of outcomes focussed work, we would have expected to see much more in the way of this given the last inspection was over 2 years ago.

We have suggested again that this document is read by the management team and perhaps a development day of some sort for the staff is arranged to ensure that all have the opportunity to understand what an outcome is and how they can make improvements in this area.

The issue of quality assurance should be the responsibility of everyone in the service, not just the management team. One way to demonstrate this is for the Staff to be asked to contribute to the self-assessment, which the service is obliged to submit prior to inspection each year. This can be done through the introduction of a more formal team meeting, perhaps taking place every 6-8 weeks, allowing for discussion on how the service can progress as well as passing on relevant staff information.

the information gathered from the staff at these meeting should be used by the management team to develop a holistic self assessment of the service.

We found that the service improvement plan, while effective, is now 12 months out of date. The service should seek to find ways of continuously developing and measuring itself against targets set.

## Requirements

Number of requirements: 0

## Recommendations

Number of recommendations: 0



Complaints

There have been no complaints upheld since the last inspection. Details of any older upheld complaints are published at [www.careinspectorate.com](http://www.careinspectorate.com).

Inspection and grading history

Date	Type	Gradings								
25 Mar 2014	Announced (short notice)	<table border="0"> <tr> <td>Care and support</td> <td>5 - Very good</td> </tr> <tr> <td>Environment</td> <td>5 - Very good</td> </tr> <tr> <td>Staffing</td> <td>5 - Very good</td> </tr> <tr> <td>Management and leadership</td> <td>5 - Very good</td> </tr> </table>	Care and support	5 - Very good	Environment	5 - Very good	Staffing	5 - Very good	Management and leadership	5 - Very good
Care and support	5 - Very good									
Environment	5 - Very good									
Staffing	5 - Very good									
Management and leadership	5 - Very good									
26 Oct 2010	Announced	<table border="0"> <tr> <td>Care and support</td> <td>6 - Excellent</td> </tr> <tr> <td>Environment</td> <td>Not assessed</td> </tr> <tr> <td>Staffing</td> <td>Not assessed</td> </tr> <tr> <td>Management and leadership</td> <td>Not assessed</td> </tr> </table>	Care and support	6 - Excellent	Environment	Not assessed	Staffing	Not assessed	Management and leadership	Not assessed
Care and support	6 - Excellent									
Environment	Not assessed									
Staffing	Not assessed									
Management and leadership	Not assessed									
10 Mar 2010	Announced	<table border="0"> <tr> <td>Care and support</td> <td>5 - Very good</td> </tr> <tr> <td>Environment</td> <td>Not assessed</td> </tr> <tr> <td>Staffing</td> <td>5 - Very good</td> </tr> <tr> <td>Management and leadership</td> <td>Not assessed</td> </tr> </table>	Care and support	5 - Very good	Environment	Not assessed	Staffing	5 - Very good	Management and leadership	Not assessed
Care and support	5 - Very good									
Environment	Not assessed									
Staffing	5 - Very good									
Management and leadership	Not assessed									
10 Feb 2009	Announced	<table border="0"> <tr> <td>Care and support</td> <td>5 - Very good</td> </tr> <tr> <td>Environment</td> <td>5 - Very good</td> </tr> <tr> <td>Staffing</td> <td>5 - Very good</td> </tr> <tr> <td>Management and leadership</td> <td>5 - Very good</td> </tr> </table>	Care and support	5 - Very good	Environment	5 - Very good	Staffing	5 - Very good	Management and leadership	5 - Very good
Care and support	5 - Very good									
Environment	5 - Very good									
Staffing	5 - Very good									
Management and leadership	5 - Very good									

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