
Report To:	Health & Social Care Committee	Date:	23 February 2017
Report By:	Brian Moore Corporate Director (Chief Officer) Inverclyde Health and Social Care Partnership (HSCP)	Report No:	SW/17/2017/BC
Contact Officer:	Beth Culshaw Head of Health and Community Care	Contact No:	01475 715283
Subject:	Inverclyde Learning Disability Support and Care at Home/Supported Living Service - Care Inspection Report		

1.0 PURPOSE

- 1.1 To advise the Health and Social Care Committee of the outcome of the Care Inspectorate inspection held on 30th November 2016 in relation to the Support & Care at Home James Watt Court/McGillvary Ave and Supported Living services.

2.0 SUMMARY

- 2.1 The Care Inspectorate carried out an unannounced inspection on 30th November 2016 to James Watt Court and the Supported Living team.

- 2.2 Summary of Grades:-

Quality of Care and Support – Grade 5 – Very Good

Quality of Staffing - Grade 5 – Very Good

Quality of Management and Leadership - Grade 5 – Not assessed

- 2.3 Recommendations and requirements from the last inspection in January 2016:-

There were no recommendations or requirements from the last inspection, but several suggestions for areas of improvement. What the Care Inspectorate highlighted during the inspection is detailed below:

- The service has streamlined the care and support plans used across all locations served by the team.
- Effective quality assurance procedures are now in place. This includes regular auditing of support plans and a range of observational monitoring sessions with staff.

3.0 RECOMMENDATIONS

- 3.1 The Health and Social Care Committee is asked to note the outcome of the inspection and the actions taken to address the areas of improvement highlighted within it.

Brian Moore
Corporate Director (Chief Officer)
Inverclyde HSCP

4.0 BACKGROUND

4.1 The inspection was unannounced and carried out on a low intensity basis. These inspections are carried out when the Care Inspectorate is satisfied that the services are working hard to provide consistently high standards of care and support. This also reflects the grading history of the service.

4.2 Two Quality Themes were inspected (Quality of Care and Support and Quality of Staffing). The grades in both themes have remained Very Good.

4.3 Feedback received by the Care Inspectorate from the people who use the service, their relatives and staff:-

- Relatives commented favourably on the service. Comments included: “The management team and staff are efficient and very caring. The family is always made to feel welcome” and “The Supported Living Team is excellent. I cannot praise them enough”.
- Service users also spoke favourably about the service they receive. Everyone said that staff treated them with respect and they were given plenty of opportunity to put their opinions across on how the service can improve.
- Staff that were spoken to said they liked and valued their job. There was evidence that this ethos shone through in the work done and relationships built with service users.

4.4 There were no Requirements or Recommendation from this Inspection.

4.5 Areas for improvement:-

- It was suggested that we consider the personal outcomes approach found within the Joint Improvement Team’s document of the same name. This is seen as a more effective way to gauge the outcomes achieved by adults than SHANARRI indicators, which are primarily aimed at children and young people.
- It was also suggested that we focus on staff development through more in-house training.

5.0 IMPLICATIONS

FINANCE

5.1 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

5.2 There are no legal issues within this report.

HUMAN RESOURCES

5.3 There are no human resources issues within this report.

EQUALITIES

5.4 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

5.5 There are no repopulation issues within this report.

6.0 CONSULTATION

6.1 None.

7.0 BACKGROUND PAPERS

7.1 Care Inspectorate Report – Inverclyde Learning Disability Support and Care at Home/Supported Living Service

Inverclyde Learning Disability Support & Care at Home Service Housing Support Service

Inverclyde Supported Living Team
Flat G2
36 Lyndoch Street
Greenock
PA15 4AE

Telephone: 01475 715816

Type of inspection: Unannounced
Inspection completed on: 30 November 2016

Service provided by:
Inverclyde Council

Service provider number:
SP2003000212

Care service number:
CS2004078035

About the service

Inverclyde Learning Disability Support and Care at Home has been registered with the then Care Commission since November 2004. The service provides a Housing Support and Care at Home service to people with a learning disability living in their own homes. There were 34 people using the service at the time of the inspection.

The service provides 24 hour support to people living in three main locations in Greenock. The service also has a team of support workers who provide support to people living in their own homes throughout Inverclyde.

The service aims to "provide high quality person centred services that support and encourage people with a learning disability to live valued, fulfilling lifestyles in their own homes, as part of the community."

What people told us

For this inspection, we spoke individually with 5 of 34 people using the service. We also received 26 completed care standard questionnaires. These questionnaires were completed by a mixture of those using the service and their family members.

We were pleased to note that all responses from stakeholders were very positive with regards to the care and support provided for this service. From those gathered, all were either very happy or happy with the quality of care and support provided. Everyone agreed that the staff in the service treated them with respect and that they were given plenty of opportunity to put their own opinions across about how the service can improve. Comments from those we spoke with included:

"All the staff are great because they help me with everyday tasks"

"I enjoy living in James Watt Court and the people who support me"

"The management team and all staff are efficient and very caring. Family are always made to feel very welcome"

"The supported living team are excellent, I cannot praise them enough"

"My sister who has a learning disability, uses the service, the care that she receives is excellent"

Self assessment

The Care Inspectorate received a fully completed self-assessment from the provider. The provider identified what it thought the service did well and gave examples of improvements in a number of 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. The provider told us how the people who used the care service had taken part in the self-assessment process and how their feedback directed the development of their plans for improving the service.

From this inspection we graded this service as:

Quality of care and support	5 - Very Good
Quality of staffing	5 - Very Good
Quality of management and leadership	not assessed

What the service does well

At the last inspection we asked the service to examine ways to streamline the care and support plans used across all locations served by the team. We were pleased to note that work has been undertaken and completed in this regard.

Care and support plans are now much more standardised across the service, allowing for person centred differences across the various locations. We saw very good evidence of all service users having regular access to essential and wide ranging medical expertise. We noted one particular instance in the service where variations in a persons mood/weight and appearance caused concern enough for support staff to ensure that swift and appropriate action was taken to ensure that the health and wellbeing of the individual was the main priority.

The staff work very well with a range of agencies to ensure that the investigations into the service users health concerns were explained to the satisfaction of all involved in the care package.

Hospital passports have been used well within the service and were found to be inclusive of the thoughts/opinions of each individual service user.

Where necessary, a range of support strategies and routines (personal to each individual) are presented within care plans. This helps to ensure that all staff are working from the same page and are being consistent in the support delivered. Six monthly reviews are taking place with the correct regularity. All meeting minutes we have seen show a multi-disciplinary approach to the continued care and support of all those being supported.

We seen effective quality assurance procedures evidenced throughout the care plans, showing senior support workers auditing on a regular basis to ensure the information presented within remains appropriate to the care and support required for each person.

Managers are completing a range of observational monitoring sessions with the staff. These sessions are conducted across a range of support tasks to ensure that the service can be sure of the quality supports delivered by its team.

Our observations of the support provided is of a very high standard. Staff we spoke with tell us they like and value their job. This ethos shines through in the work done and relationships built with all service users.

What the service could do better

At the feedback session we discussed a number of ways in which the service can improve on its already very good service delivery.

We suggested that the service consider the personal outcomes approach found within Joint Improvement Teams document of the same name. At present the service uses the SHANARRI (Safe, Healthy, Achieving, Nurtured, Active, Respected, Responsible and Included) indicators. These are however aimed primarily at the care and support of children and younger people, therefore we have suggested that more effective ways to gauge the outcomes achieved by adults be used.

We also spoke about the use of language by some support staff when completing daily and monthly recordings within the care plans. Use of terms such as 'no issues' should be avoided when attempting to describe the requirements or movements of service users. Terms such as this are vague and do not tell the reader anything. More creative thinking should be used to ensure that the support being delivered to service users is appropriately documented.

The continued development of the staff team through training should be an area to focus on for the coming year within the service. We noted that the training offered to the team could be more robust in its content. We noted a number of occasions where e-learning training has been undertaken by staff and has lasted for between 15 and 45 minutes. We understand that time away from direct support of service users is scarce and therefore must be used wisely and productively. During feedback we discussed how much a member of the team can actually learn from spending such a short space of time in front of a computer answering multiple choice questions. We have suggested that the team as a whole look at ways of developing more worthwhile training opportunities for itself. The value of these courses should then be captured by completing reflective practice forms to allow staff the chance to communicate what they have learned in a training session and how they can use these new skills/knowledge to create better outcomes for service users.

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.

Inspection and grading history

Date	Type	Gradings
13 Jan 2016	Unannounced	Care and support 5 - Very good Environment Not assessed Staffing 5 - Very good Management and leadership 5 - Very good
26 Jan 2015	Unannounced	Care and support 4 - Good Environment Not assessed Staffing 4 - Good Management and leadership 4 - Good
31 Jan 2014	Announced (short notice)	Care and support 4 - Good Environment Not assessed Staffing 4 - Good Management and leadership 4 - Good
4 Feb 2013	Announced (short notice)	Care and support 5 - Very good Environment Not assessed Staffing 5 - Very good Management and leadership 5 - Very good
28 Sep 2011	Unannounced	Care and support 5 - Very good Environment Not assessed Staffing 5 - Very good Management and leadership Not assessed
27 Jan 2011	Announced	Care and support 5 - Very good Environment Not assessed Staffing Not assessed Management and leadership 5 - Very good
26 Jan 2010	Announced	Care and support 5 - Very good Environment Not assessed Staffing 5 - Very good Management and leadership Not assessed
19 Feb 2009	Announced	Care and support 5 - Very good Environment Not assessed Staffing 5 - Very good

Date	Type	Gradings	
		Management and leadership	5 - Very good

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