

Brothers of Charity Services (Scotland) - Together Borders - Area Three Housing Support Service

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Type of inspection: Announced (short notice)
Inspection completed on: 20 March 2017

Service provided by:
The Brothers of Charity Services
(Scotland)

Service provider number:
SP2008010095

Care service number:
CS2008192059

About the service

Brothers of Charity Services (Scotland) - Together Borders - Area Three is a combined housing support and care at home service for people with a learning disability, often with complex care needs, living in the Scottish Borders.

The service is provided across the Borders, including Gattonside and Galashiels. At the time of inspection there were 35 people receiving support.

The service is part of a range of support services, care home services, social enterprises and care at home/housing support services provided by the Brothers of Charity, for adults with a learning disability. The website describes this organisation as Christian in origin, but which supports people from all faith communities as well as those with no religious beliefs. The organisation's headquarters in Scotland is located in the central Borders town of Galashiels.

The organisation has as its vision, "a society where everyone belongs and is valued for who they are". Its mission is, "To support people to lead their own lives and achieve their dreams and goals". The aims of the service include, "to enable people to successfully live in their own homes and communities, achieving personal outcomes, and improving their quality of life."

The service was previously registered with the Care Commission and transferred its registration to the Care Inspectorate on 1 April 2011.

What people told us

We met seven supported individuals during home visits or at the head office. For some of them verbal communication was limited, but one person told us that she was very happy with the service and had no concerns. She was able to tell us how the service had made a positive difference to her life. We noticed that all of the supported individuals were relaxed and at ease with support workers and in their environment. They made choices and staff interactions were warm and friendly. Consequently, we gained the impression that the supported individuals were happy with staff support and the service they received.

Prior to the inspection we sent out 40 care standards questionnaires to supported individuals and their families. 17 questionnaires were completed and returned. We also spoke with four family carers by phone. We noted a number of positive comments, for instance,

"very happy with my care provider"

"She has a great bond with those who look after her. They are always very good to me when I visit...I am constantly amazed at the love and affection they show for her"

"My sister is very happy and well in her environment...the level of care and standard of living accommodation are exceptional"

"The service have ensured my brother has a stable staff group...staff use their initiative and imagination in order to provide him with as much stimulation as possible. They are also attentive to his health needs...able to work together without defensiveness on either side"

"I am happy with the quality of care and support my daughter received from the experienced core staff"

"Core staff are wonderful...staff very supportive"

"She has a very happy life, out and about every day for instance, to ArtBeat, swimming on Wednesdays...a good life, positive outcomes"

"Treat him with respect"

"Intensive intervention therapy empowered X, for instance, he expresses his feelings more"
 "Best care x has ever had"
 "He lives a fulfilled life".

However, we also received some criticisms of aspects of the service. We discussed these criticisms with the manager during our feedback and refer to them within this report.

Self assessment

The provider completed and submitted a self assessment. This was comprehensive and detailed, identifying many areas of strengths and areas for improvement which reflected many of our findings during the inspection. We were pleased to note that the self assessment was written in an outcome focused way, which meant that it provided a clear picture of how the service led to positive differences in the person's life.

From this inspection we graded this service as:

Quality of care and support	4 - Good
Quality of staffing	4 - Good
Quality of management and leadership	not assessed

What the service does well

Overall, we found that this service continued to provide a high standard of individualised and person centred care for supported individuals through well established, dedicated, knowledgeable and skilled staff teams.

There were many examples of positive outcomes as a result of staff interventions and the person's views being listened to and taken into consideration. For example, one person had lost weight which had boosted confidence and improved health and wellbeing. This person told us, "It has definitely changed my life, my moods and my breathing is a lot easier...I'm the happiest that I have been and I am still getting good guidance and help from my staff".

Where the supported person's health needs changed, we could see that the service worked closely with health professionals and care manager to ensure staff were appropriately supported in their role to provide the best outcome for the individual. Supported people continued to link in with the 'Healthier Me' a Scottish Borders wide initiative aimed at ensuring that adults with learning disabilities received consistent support and information with eating well and other lifestyle related activity.

Support plans were comprehensive, person centred and often supported by professional adviser input. The manager was able to show us evidence of work in hand to move towards a more outcome focused approach. The expectation was that this would be rolled out in the coming months.

We were impressed by the range of communication systems including assistive technology used to ensure that the person could express themselves and participate. In general, we found a service which embraced creativity and innovation in the pursuit of achieving positive outcomes for people who used the service.

From our observations of staff interactions with supported individuals we concluded that these support workers were inclusive, person centred and gave priority to promoting choice. The high regard family carers had for staff was also notable.

The service provided very good training and development opportunities for staff to keep their skills and knowledge base up to date. One staff member commented, "The training given at BoC is one of the best I have seen and I have worked in the care sector for 18 years".

What the service could do better

We sampled support plans and found that some paperwork was out of date and had not been audited for some time. Managers should ensure regular audits take place so that support plans provided an accurate account of changing needs and staff practice, (see recommendation 1).

While very regular reviews of individual support plans took place for many supported individuals, others were outwith the statutory six month timeframe, (see recommendation 2).

As noted at the last inspection, risk assessments should provide clear evidence to show how these were reviewed, who was involved in the review and what actions, if any, were taken, (see recommendation 3).

The manager acknowledged that participation methods had not been sustained to the previous high standard. The new participation policy should be used as basis to re-establish involvement processes.

Team building was being planned for with one of the teams. Feedback received from some staff interviews and questionnaire responses highlighted merit in rolling out teambuilding to other teams as well.

Some staff and family carers from across the service reported that aspects of management approaches had affected outcomes for supported individuals. For example, a family carer noted, "Information is not passed on or we do not get feedback" and a staff member commented: "Managers are not observing staff practices and not monitoring quality well, left to our own initiative". We discussed these and other comments with the manager with a view to reviewing and improving management communication systems and practices.

We discussed direct observation of staff practice with the manager as an area for improvement. Practice observation would help ensure that staff were working in line with the provider's aims and objectives, provide the opportunity to involve service users in the assessment of staff practice and be another form of staff support and quality assurance.

Not all staff were receiving regular supervision. In addition, sampled supervision records highlighted a focus on management processes and task completion. There was little or no time given to action planning and reflection/critical thinking about staff practice to provide a support mechanism that would help deliver better outcomes for people, (see recommendation 4).

Team meetings can be central in developing 'team spirit' or 'team ethic', but they were reported to be infrequent in some areas. The minutes of meetings continued to lack detail, focusing solely on discussing the supported individual rather than a fuller range of team business aimed at delivering better outcomes for people, (see recommendation 4).

Requirements

Number of requirements: 0

Recommendations

Number of recommendations: 4

1. Managers should ensure regular audits take place so that individual support plans provide an accurate account of changing needs and staff practice.

National Care Standards (NCS) 4 Housing Support Services - Housing Support Planning

2. Individual support plans should be reviewed at least six monthly.

NCS 4 Housing Support Services - Housing Support Planning

3. The provider should ensure that when risk assessments are reviewed there is clear evidence to show how these were reviewed, who was involved in the review and what actions, if any, were taken.

NCS 4, Housing support services - Housing support planning.

4. Staff supervision and team meetings should be held on a regular basis and structured in a way that leads to the continuous development of responsible, skilled, knowledgeable staff and agreed standards in the practice of social care.

NCS 3 Housing Support Services - Management and Staffing Arrangements

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								
3 Sep 2015	Announced (short notice)	<table> <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>5 - Very good</td> </tr> </table>	Care and support	5 - Very good	Environment	Not assessed	Staffing	5 - Very good	Management and leadership	5 - Very good
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Staffing	5 - Very good									
Management and leadership	5 - Very good									

Date	Type	Gradings
4 Nov 2014	Unannounced	Care and support 5 - Very good Environment Not assessed Staffing 5 - Very good Management and leadership 5 - Very good
15 Oct 2013	Announced (short notice)	Care and support 5 - Very good Environment Not assessed Staffing 5 - Very good Management and leadership 5 - Very good
20 Dec 2012	Unannounced	Care and support 4 - Good Environment Not assessed Staffing 4 - Good Management and leadership 4 - Good
31 May 2012	Unannounced	Care and support 2 - Weak Environment Not assessed Staffing 4 - Good Management and leadership 4 - Good
23 Jan 2012	Unannounced	Care and support 4 - Good Environment Not assessed Staffing 5 - Very good Management and leadership 5 - Very good
8 Oct 2010	Announced	Care and support 5 - Very good Environment Not assessed Staffing Not assessed Management and leadership 5 - Very good
11 Mar 2010	Announced	Care and support 5 - Very good Environment Not assessed Staffing 5 - Very good Management and leadership 4 - Good

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