

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

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Type of inspection:

Unannounced

Completed on:

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Service provided by:

Brothers of Charity Services (Scotland)

Service provider number:

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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 part of a range of support services, care home services, social enterprises and care at home/housing support services provided by Brothers of Charity Services (Scotland), for adults with a learning disability.

The organisation's headquarters is in the central Borders town of Galashiels.

The services vision is "A society where everyone belongs and is valued for who they are"

The services mission is "To support people to lead their own life and achieve their dreams and goals"

Their aims include.

"Living life to the full - we support people in their everyday life, at all stages of life. We respect people's skills, interest, choices and personal beliefs. We will check with the person that support is making a positive difference"

"Getting it right - we spend time getting to know each person and how they would like to be supported. We respect and work in partnership with family carers. We check with the person that they are getting a high-quality service. We support people when things are changing. We are open about our work"

"Valuing community - we help people be part of their community and to be actively involved. We support, where needed, communities to involve the person fully. We make a positive contribution in local communities"

What people told us

Feedback about the service varied.

We sent out 16 questionnaires and had 12 returned from people who used the service. We also spoke with a further 12 supported people while out on visits.

The information in the questionnaires from two people identified that they did not know about having a personal plan or support plan which contained information about them. We will look at this further in the report.

However, there were also complimentary comments as detailed below and this was also reflective in the questionnaires where seven out of the 12 questionnaires returned identified they were very happy with the service and answered all questions as agreed or strongly agreed.

The positive comments included -

"My relative is very happy and they have a varied life and are out and about almost every day. Staff are very aware of signs from them indicating that they may be feeling unwell"

"Management communicate with me more regularly which is very helpful"

"The service has always met my relative's needs, even when they are short staffed. Their team of support workers will go the extra mile not to disturb their routines, which we appreciate"

Self assessment

We are not requesting self-assessments from providers for this inspection year. Issues relating to quality assurance, acting on feedback from people using the service and the quality of the service's improvement plan are considered throughout the inspection.

The 'Health and Social Care Standards' have replaced the National Care Standards. These seek to promote and improve outcomes for people who experience care. Services should now be providing support in accordance with the guidelines outlined therein.

These are:

- 1: I experience high quality care and support that is right for me.
- 2: I am fully involved in all decisions about my care and support.
- 3: I have confidence in the people who support and care for me.
- 4: I have confidence in the organisation providing my care and support.
- 5: I experience a high-quality environment if the organisation provides the premises.

<https://scotgov.publishingthefuture.info/publication/health-and-social-care-standards-my-support-my-life>

From this inspection we graded this service as:

Quality of care and support	4 - Good
Quality of staffing	5 - Very Good
Quality of management and leadership	not assessed

Quality of care and support

Findings from the inspection

The quality of care and support was of a good standard. We observed a staff team who knew about the Health and Social Care Standards and could demonstrate the principles of these in their practice.

The people we spoke with and visited told us that they felt listened to and that their views were taken into consideration. There was a consistent staff team to support people, however in discussion with the team leaders and the manager they identified that there had been some issues around staff sickness especially in the senior team. This had resulted in some of the quality assurance areas falling behind. This included some supervision for staff, team meetings and paperwork having the oversight of the management team.

Brothers of Charity Services (Scotland) - Together Borders was respectful in ensuring that people's rights were upheld. People were treated fairly, and staff were able to actively challenge any forms of discrimination. Where people's independence, choice and control were restricted the appropriate legal arrangements were put in place

in the least restrictive way. This was to ensure people maintained opportunities to achieve their wishes and goals. Advocacy services were available and staff knew how to contact these services should the people they support need this.

During our inspection we met with 12 people within the service. We were able to identify that the staff were active in ensuring that each person they supported were engaged in their local community. People were engaged in lots of different activities which included going out for lunches, coffee, and other local activities that were organised in the community. Some of the people we spoke with also attended the newly resurrected Keys to Life Choir, which gave people the opportunity to meet people from other services and catch up with people they knew previously. Some of the people we met had their own vehicles, which enabled them to go a little further afield.

The staff team that we spoke with were good in monitoring people's health and wellbeing. They knew who to contact should a person's health deteriorate or change. There were good links with the GPs, nurses and social work teams.

Anticipatory care and making certain that people are helped to live well right to the end of their life is important. We discussed this with the management team to see how this could be developed over the next year. This ensures that people are supported in a planned and safe way, which is in line with that individuals wishes should their health deteriorate in an emergency or unexpected event.

For those that were supported with their medication, staff were trained appropriately to dispense this to the people they support. This was documented via a weekly Medication Administration Record (MAR). Our audit of these identified issues around best practice.

There was a significant number of handwritten notes which were not being signed or dated. This had the potential to cause confusion when medications had been started for a short period, for example an antibiotic. There was also concerns around medications that were only used occasionally and these protocols were hard to find or no longer relevant to that individual. This was also applicable to assessments of people's ability to manage their own medication and how staff supported them with this.
(Recommendation 1)

People benefited from good care planning that identified needs and wishes with information and guidance to identify how staff support each person. Support plans were reviewed however this was not consistent in all the plans we looked at. This ensures that people are involved in their support plan and help shape this to identify how they spend their day and get support to do the things that make them happy and confident.

Despite this there was very little consistency in these plans, and they varied from person to person. Some were very lengthy and others not so which was reflective of the differing needs of everyone. The plans were not consistently reflecting the care and support experienced by people who live in the service with clear guidelines for staff to enable them to support supported people in their day to day lives.

Reviews were being completed but we were unable to see evidence to identify what the outcomes were of these meetings. Having regular reviews ensures that supported people get involved in the shaping of their support. People can then be supported to give regular feedback on how they experience care which can be used to shape and improve the service.
(Recommendation 2)

Systems in place to audit the quality of care and support for each person were not routinely being used. The service has identified that they need to consider a more manageable process. Quality assurance could be further improved to not only monitor the frequency, but the quality of areas such as induction/review process, supervision, team meetings and care reviews. This will ensure that these are effectively and appropriately being carried out and outcomes and actions followed up.

(Recommendation 3)

Following our inspection, we could conclude that people were supported at a good level to meet their needs, wishes and choices in a supportive and safe way. This facilitates people to lead safe, healthy, happy and active lives.

Requirements

Number of requirements: 0

Recommendations

Number of recommendations: 3

1. To ensure people experience a medication system that is safe, up to date, complete and accurate the service should develop systems that:

- Staff have adequate information to support them to monitor supported people's medication and the specific condition the medication is prescribed for.
- Staff understand their role in, and accountability for monitoring medication.
- Staff administer medicines in a way that recognises and respects people's dignity and privacy taking into consideration the daily routine of the resident and the possible need for medication to be available for administration out with set times. (PRN medication)
- Staff are supported with procedures detailing the home's medicines management systems, covert medication and the principles of consent and confidentiality.
- Staff understand their responsibility to keep accurate and current records of medicines.
- There is a system in place for regular reviews of MAR charts to remove items no longer prescribed, used or needed
- When regular medication is not given or taken that staff record the reason why along with any further action that was taken including the outcomes of the action that is signed and dated.

This is to ensure care and support is consistent with the Health and Social Care Standards which state: 'Any treatment or intervention that I experience is safe and effective.' (HSCS 1.24)

2. To ensure people experience care that is right for them, a robust system should be developed to ensure the most current and up to date needs of that individual is documented and is regularly assessed and monitored. To do this the service should:

- Ensure that documentation and records are accurate, sufficiently detailed and reflect the care planned or provided
- Demonstrate that staff follow policy and best practice about record-keeping and documentation.
- Ensure that staff know policy and best practice.
- Demonstrate that managers are involved in monitoring and the audit of records.

This is to ensure care and support is consistent with the Health and Social Care Standards which state: 'My personal plan (sometimes referred to as a care plan) is right for me because it sets out how my needs will be met, as well as my wishes and choices.' (HSCS 1.15)

3. To ensure people experience safe care and support where the management team have good monitoring and quality assurance systems in place to identify concerns. The service provider should develop methods to make certain.

- The system effectively enables areas for improvement to be promptly and accurately identified.
- That the outcomes because of any audit are clearly recorded.
- Where areas for improvement are identified that an action plan is developed detailing timescales and the person responsible.
- Systems to monitor whether documentation provides accurate accounts of service provision, quality assurance and is fit-for-purpose are developed and implemented.
- All current quality assurance arrangements are reviewed and developed to ensure that these are systematic, effective, and integral to service provision.

This is to ensure care and support is consistent with the Health and Social Care Standards which state: 'I benefit from a culture of continuous improvement, with the organisation having robust and transparent quality assurance processes.. (HSCS 4.1)

Grade: 4 - good

Quality of staffing

Findings from the inspection

Staff were recruited in line with best practice and we could evidence that people had been recruited well with all the appropriate checks being completed. However, the organisation of these files was very unsystematic, and we found it difficult to locate all the information to ensure safe recruitment was being followed. This was discussed with the manager and they reassured us that this would be looked at to see how this could be improved in the future.

Induction processes were good, and staff could tell us about their experiences when they started with the organisation. They were able to tell us about having an appropriate length of time to learn the job and get to know the people they were working with. Senior managers were happy to support staff if they needed more time to get to know a person and were very supportive should they need to change areas of work.

Mandatory training and refreshers were identified in a training matrix which had regular monitoring of what staff have completed and when they were due to update that piece of mandatory training. Training areas were specific to people's needs and included subjects such as dementia, autism and epilepsy. The training team were very good at breaking this down area by area to ensure all managers understood where their staff team were regarding what training they had to do or refresh.

Relatives we spoke with were very complimentary towards the staff team that were supporting their relative. They told us how they had been encouraged to be involved in providing information and support to the new staff team to help them deliver the care their relative needed.

Ensuring that people received the care they were contracted to, was easier to identify in different parts of the service. This was due to the differing shifts and support people received. For those that received visiting support there was a reliance on the service user or a relative identifying that they had not received a visit for that day. As we move to a more technical era, we would support the service to look at how they could develop digital monitoring over the coming year.

Supervision and appraisal were monitored through a matrix which identified when people were due supervision. There was clear documentation to identify if supervision had not taken place, this was typically due to sickness or annual leave. There was good audits of this and most people we spoke to could tell us that they had had supervision within the last three months.

Team meetings were identified on a spreadsheet. Some team meetings had fallen behind due to there not being a team leader in place, however we could see this was improving and we will monitor this and relook at this at the next inspection.

People benefited from a warm atmosphere as there were good working relationships. Communication between staff at times could be improved but overall, there was opportunities for staff to discuss work and how best to improve outcomes for the people they support.

Requirements

Number of requirements: 0

Recommendations

Number of recommendations: 0

Grade: 5 - very good

Quality of management and leadership

This quality theme was not assessed.

What the service has done to meet any requirements we made at or since the last inspection

Previous requirements

There are no outstanding requirements.

What the service has done to meet any recommendations we made at or since the last inspection

Previous recommendations

Recommendation 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, Care at home - Standard 3 Your support plan.

This recommendation was made on 3 May 2017.

Action taken on previous recommendation

A new format has been developed at the front of each individual support plan (ISP) which evidences regular review and update of specific sections, or the whole ISP. Support plans are also audited as part of each manager's audit process.

We consider this recommendation met but the service should consider developing a specific audit tool in line with the format of the new ISP layout, which would further evaluate the quality of information contained.

Complaints

There have been no complaints upheld since the last inspection. Details of any older upheld complaints are published at www.careinspectorate.com.

Enforcement

No enforcement action has been taken against this care service since the last inspection.

Inspection and grading history

Date	Type	Gradings
21 Jan 2019	Unannounced	Care and support Environment Staffing Management and leadership
		5 - Very good Not assessed Not assessed 5 - Very good

Date	Type	Gradings
1 Feb 2018	Unannounced	Care and support 5 - Very good Environment Not assessed Staffing 5 - Very good Management and leadership Not assessed
20 Mar 2017	Announced (short notice)	Care and support 4 - Good Environment Not assessed Staffing 4 - Good Management and leadership Not assessed
3 Sep 2015	Announced (short notice)	Care and support 5 - Very good Environment Not assessed Staffing 5 - Very good Management and leadership 5 - Very good
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

Date	Type	Gradings	
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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