

The National Autistic Society - Central Scotland Services Housing Support Service

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Type of inspection: Unannounced
Inspection completed on: 2 May 2017

Service provided by:
The National Autistic Society

Service provider number:
SP2004006215

Care service number:
CS2007162782

About the service

The National Autistic Society - Central Scotland Services is a combined housing support and care at home service. It comprises supported living and community outreach. The supported living service is located in Springburn where supported people live in a modern tenement block. There are flats for five people and, at the time of inspection, one of these was vacant. There are currently eight people receiving an outreach service in the community. The service's main office base is located in the centre of Glasgow.

At the time of the last inspection, a third element of the service was provided in a supported living facility called Pineview, located in the Bearsden area of the city. In December 2016, the National Autistic Society took the decision to withdraw from Pineview. This was due to a number of difficulties in service provision, as noted in the previous inspection report, dated 28 October 2016 (Available at, <http://www.careinspectorate.com/>).

The service aims "to create a positive caring environment that promotes development, independence and life skills". Supported individuals are "encouraged and supported to develop skills through a range of experiences where emphasis is given to social skills, the development of meaningful recreational and leisure activities, group living and a commitment to ensuring they learn for life".

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

What people told us

For this inspection, we received feedback from some of those who used the service, either verbally or non-verbally, and from family carers.

In general, we received positive feedback from people and noted that they felt valued, respected and satisfied with the quality of the service.

Comments included,

"Helping me to seek employment...giving me a voice"

"Feel listened to by staff and managers"

"I feel very positive about the service"

"The service is very good at getting suitable staff for XXX and this is helped by parents being on interview panel."

Self assessment

The service did not require to submit a self-assessment for this inspection.

From this inspection we graded this service as:

Quality of care and support

3 - Adequate

Quality of staffing

3 - Adequate

Quality of management and leadership

3 - Adequate

Quality of care and support

Findings from the inspection

We noted some signs of improvement in service delivery since the last inspection in October 2016 when we had raised a number of issues. Clear action plans were now in place to address the issues raised. We particularly noted the provider's concerted efforts to demonstrate the service's capacity to improve. However, progress was at an early stage and so sustainability was yet to be confirmed. This is reflected in our evaluation of the service and the adequate grades awarded.

Staff and family carers told us about the positive impact the service was having on people's lives. Community involvement was actively promoted. Risk assessments encouraged enablement, involvement in meaningful activity and harm reduction.

We observed staff interactions with supported individuals and noted the positive impact of staff interventions. We were impressed with staff's understanding of the supported individual's daily routines and preferences. Staff presented as professional, inclusive and person centred. This led to the person being protected from harm, doing things aligned to their interests and staff being responsive, respectful and reciprocal. Consequently, a supported individual commented,

"They have made me understand my condition better"

We found that staff worked closely with the provider's behaviour support team and speech and language therapist to benefit supported individuals. This meant that staff sought advice appropriately, had a good understanding of complex needs and received expert guidance on ensuring the person's physical health and mental wellbeing.

Staff described to us an open culture where they could freely raise any concerns with members of management or an external agency.

'Hospital passports' had been introduced since the last inspection, assisting supported individuals to communicate their needs and wishes to hospital staff. Behaviour support plans were also used to listen to the views of the person in a way that reduced his/her stress and distress. These methods meant that staff could understand behaviours better and help the supported individual cope with social situations.

Deficiencies in support plan recording were being addressed, but corrective action was still at an early stage of implementation. Overdue support plan reviews still remained in evidence, but were being better tracked and prioritised by managers. Planned action and follow up from auditing processes needed to be sustained to ensure support plans appropriately measured how well care and support delivered the outcomes that mattered most to people (See Recommendation 1).

To further improve outcomes, the management team could improve how they use incident records to systematically and consistently pick up on lessons learnt. For instance, this could include assessing the impact of staffing levels, any agency staff issues or environmental factors, changes needed to support plans and any specific staff training needs (See Recommendation 2).

Comments made under Quality Theme 3 are also relevant to this quality theme.

Requirements

Number of requirements: 0

Recommendations

Number of recommendations: 2

1. The manager should take forward planned action to ensure that support plans, (a.)follow regular review and update to inform supported individuals' day to day support, and (b.), provide clear measurement of how well care and support delivered the outcomes that mattered most to people.

National Care Standards (NCS) 3 Care at Home - Your Personal Plan

2. The provider should develop the use of its incident and accident records so that these reporting systems better inform service delivery and support planning in the interests of the health and welfare of supported individuals.

NCS 4 Care at Home - Management and Staffing

Grade: 3 - adequate

Quality of staffing

Findings from the inspection

An inclusive approach to staff recruitment and selection reassured family carers that the staff matching process was in the best interests of the supported individual. Involving family carers and supported individuals in the supervision and appraisal of staff remained an area for improvement. We would reiterate that managerial direct observation of staff practice would help provide a measure of quality assurance and supported individual/family carer involvement in assessing staff (See Recommendation 1).

Where supervision and team meetings had taken place, this had led to better communication within teams, improved morale and a better understanding of staff roles and responsibilities. However, some staff had not yet benefited from regular supervision of their work performance. This remained a work in progress.

We were pleased to note that the provider was investing in a learning and development programme which emphasised reflective practice at an individual staff and team level. We would also want to see more team discussion on such matters as the Scottish Government's 'Keys to Life' Strategy for people with a learning disability so that staff were better informed about human rights.

We observed warm and positive relationships between staff and supported individuals. This reassured us that staff knew and valued the person and could respond to each person as a unique individual.

Short staffing did not feature as an issue during this inspection, but the ongoing issue of staff retention remained (See Recommendation 2). Developments, including the introduction of the Scottish Living wage and better management stability were expected to have a positive impact on staff retention in the future.

Levels of agency staff usage at the Springburn Service fluctuated. This led to an adverse impact on outcomes for supported individuals. We were concerned that the custom and practice was for agency staff to self-book shifts where cover was needed. Managers should prioritise regular staff personnel for shift cover and only use agency staff as a last resort. We noted that managers were actively seeking to rectify this matter and we will review progress in due course.

The service provider had previously agreed to provide agency staff with training in key areas. This was not yet happening on a sustained basis. We noted that managers needed to follow up on those agency staff whose personnel information indicated that they were under qualified to work with people who have autism and/or a learning disability (See Recommendation 3).

Staff training records were not up to date. This meant that managers had an unclear picture about individual staff's learning and development needs. Inconsistency in training delivery and limited take up of some training opportunities had meant that developing staff skills, including those in mid-management positions, needed sustained attention (See Recommendation 3).

Requirements

Number of requirements: 0

Recommendations

Number of recommendations: 3

1. Managers should ensure that supported individuals or their representatives are given the opportunity to become involved in the appraisal of staff, including the process of direct observation of staff practice.

NCS 11 Care at Home - Expressing Your Views

2. The service should continue to review its staffing resources and strategy for staff retention to ensure continuity of support.

NCS 4 Care at Home - Management and Staffing

3. A training needs analysis should be undertaken for all staff, including agency staff, to ensure they have or are provided with relevant knowledge, competencies and skills to meet the needs of service users.

NCS 4 Care at Home - Management and Staffing

Grade: 3 - adequate

Quality of management and leadership

Findings from the inspection

People we spoke with told us that they had trust and confidence in the way this service was managed and led. They told us that concerns or complaints were acted on and two way channels of communication with staff and managers was promoted.

The removal of the third service site, known as Pineview and the return of a team leader from long term sickness absence had resulted in a more stable management team. This development was commented on positively by people we spoke with. For instance, staff at Springburn Service noted how increased management presence there had positively impacted on team morale and re-established service direction. Consequently, they felt valued in their work.

We were pleased to note various developments which had been initiated to focus on continuous improvement. This included formulating a service improvement plan, introducing operational meetings, management meetings and senior management restructuring to help re-balance resources to services. Consequently, we could see that management and staff had reflected on and were actively reviewing practice, policies and procedures to improve outcomes for the people who used the service.

Weekly update meetings indicated appropriate attention was being given to following through on action plans arising from the last inspection. In general, a range of quality assurance processes, including external quality monitoring visits by senior management, helped managers and staff focus on continuous improvement.

The service had come through a difficult period with the closure of Pineview, coupled with movement within the management team. Consequently, as noted under the other quality themes within this report, action to improve aspects of service delivery, including staff development and support planning had commenced, but were at an early stage of implementation. Managers recognised that the service now needed time to consolidate and stabilise. This has had a bearing on our current evaluation of this quality theme.

Requirements

Number of requirements: 0

Recommendations

Number of recommendations: 0

Grade: 3 - adequate

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

Previous requirements

Requirement 1

The provider must demonstrate proper provision for the safety and welfare of services. In order to achieve this the provider must:

- ensure that at all times suitably qualified, skilled and experienced staff are working in the care service in such numbers as are appropriate for the health and welfare of service users.

This is in order to comply with: The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations, Scottish Statutory Instruments 2011 No 210: Welfare of users 4. - (1) A provider must - (a) make proper provision for the health, welfare and safety of residents. And regulation 15(a) - requirement about staffing.

Timescale: Within 24 hours of the publication of this report.

This requirement was made on 24 November 2016.

Action taken on previous requirement

The withdrawal of the Pineview service and ongoing recruitment drives had improved staffing arrangements within the existing service. However, the use of agency staff and lingering training issues continued to feature. We have made further comment and recommendations regarding these areas within this report.

Met - outwith timescales

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

Previous recommendations

Recommendation 1

People who use the service or their representatives should be given the opportunity to sign their support plan paperwork including risk assessments, to show agreement with what was written, unless there is a clear stated preference or reason not to.

National Care Standards (NCS) 11 Care at Home - Expressing Your Views

This recommendation was made on 24 November 2016.

Action taken on previous recommendation

Managers were actively taking steps to address this recommendation, which was a work in progress at the time of this inspection. We make further comment about support plans paperwork under quality theme 1, within this report.

Recommendation 2

The manager should ensure support plans follow regular review and update to inform the day to day support of people using the service, and provide measurement of how well care and support delivered the outcomes that mattered most to people. The support plans should be read and understood by all staff.

NCS 3 Care at Home - Your Personal Plan

This recommendation was made on 24 November 2016.

Action taken on previous recommendation

Managers were actively taking steps to address this recommendation, which was a work in progress at the time of this inspection. We make further comment about support plans paperwork under quality theme 1, within this report.

Recommendation 3

Staff needed further training to be assessed as competent to avoid medication errors and maintain complete and auditable records, and managers need to ensure there is a higher level of competence in medicines management for both their staff and contracted staff.

NCS 4 Care at Home - Management and Staffing and NCS 8 Care at Home - Keeping Well - Medication

This recommendation was made on 24 November 2016.

Action taken on previous recommendation

Medication training was ongoing within the service. Regular audits of medication systems were also undertaken. Since the last inspection there had been only one medication error, which was a significant reduction than previously, but indicated that staff and managers should continue to be vigilant with regards to medication management.

Recommendation 4

The provider should further develop the use of its incident and accident records so that these reporting systems better inform service delivery and support planning in the interests of the health and welfare of supported individuals.

NCS 4 Care at Home - Management and Staffing

This recommendation was made on 24 November 2016.

Action taken on previous recommendation

This recommendation was not yet fully met. We make further comment about this under Quality Theme 1 within this report.

Recommendation 5

Managers should ensure that supported individuals or their representatives are given the opportunity to become involved in individual staff appraisals and regular direct observation of staff practice should take place, with the views of service users influencing the assessment process.

NCS 11 Care at Home – Expressing Your Views

This recommendation was made on 24 November 2016.

Action taken on previous recommendation

This recommendation was not yet fully met. We make further comment about this under Quality Theme 3 within this report.

Recommendation 6

The service should review its staffing resources and strategy for staff retention to ensure continuity of support.

NCS 4 Care at Home – Management and Staffing

This recommendation was made on 24 November 2016.

Action taken on previous recommendation

The expectation was that staff retention would improve with the introduction of the Scottish living wage and increased management presence with the service. We will review progress in due course.

Recommendation 7

All staff should receive regular supervision and performance appraisal and have the opportunity to be involved in regular team meetings.

NCS 4 Care at Home – Management and Staffing

This recommendation was made on 24 November 2016.

Action taken on previous recommendation

Managers were actively taking steps to address this recommendation, which was a work in progress at the time of this inspection. We make further comment about support plans paperwork under quality theme 3, within this report.

Recommendation 8

Managers needed to develop and implement a better care plan audit tool which included timescales for remedial action and follow up.

NCS 4 Care at Home – Management and Staffing

This recommendation was made on 24 November 2016.

Action taken on previous recommendation

This recommendation was now met. We discussed with the person centred plan coordinator how her audits would benefit from clearly showing the identified person responsible for taking remedial action forward, timescales for action and follow up on action taken.

Recommendation 9

The manager should review the guidance on notifications that the service are required to make to the Care Inspectorate and all notifications should then be made as appropriate.

NCS 4 - Care at Home - Management and Staffing

This recommendation was made on 24 November 2016.

Action taken on previous recommendation

This recommendation was now met.

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	
28 Oct 2016	Unannounced	Care and support	2 - Weak
		Environment	Not assessed
		Staffing	2 - Weak
		Management and leadership	2 - Weak
14 Dec 2015	Unannounced	Care and support	4 - Good
		Environment	Not assessed
		Staffing	4 - Good
		Management and leadership	4 - Good
15 Dec 2014	Unannounced	Care and support	3 - Adequate
		Environment	Not assessed
		Staffing	3 - Adequate
		Management and leadership	3 - Adequate

Date	Type	Gradings	
6 Jan 2014	Announced (short notice)	Care and support	4 - Good
		Environment	Not assessed
		Staffing	4 - Good
		Management and leadership	4 - Good
25 Jan 2013	Unannounced	Care and support	4 - Good
		Environment	Not assessed
		Staffing	4 - Good
		Management and leadership	4 - Good
26 Apr 2010	Announced	Care and support	4 - Good
		Environment	Not assessed
		Staffing	Not assessed
		Management and leadership	5 - Very good
19 May 2009	Announced	Care and support	4 - Good
		Environment	Not assessed
		Staffing	4 - Good
		Management and leadership	4 - Good

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