

Capability Scotland - Fife Services Housing Support Service

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Announced (short notice)

Completed on:
8 December 2022

Service provided by:
Capability Scotland

Service provider number:
SP2003000203

Service no:
CS2003055021

About the service

Capability Scotland - Fife Service is registered as a combined care at home service and housing support service. The service has been registered since August 2004.

The service is provided by Capability Scotland, a voluntary sector organisation that provides services to people with disabilities across Scotland. The service provides support people with physical and/or learning disabilities in shared accommodation in Rosyth and Dunfermline.

People have support over 24 hours, with either waking or sleepover support depending upon the needs of individuals in the shared accommodation.

The service is provided by a service manager, team leaders and support workers.

About the inspection

This was a short notice inspection which took place between 29 November and 8 December 2022. The inspection was carried out by one inspector from the Care Inspectorate.

To prepare for the inspection we reviewed information about this service.

This included previous inspection findings, registration information, information submitted by the service and intelligence gathered since the last inspection.

In making our evaluations of the service we:

- spoke with six people using the service and four of their relatives
- spoke with 10 staff and management
- observed practice and daily life
- reviewed documents

Key messages

- People were supported with kindness and dignity.
- People were supported to keep in touch with people important to them.
- People were enjoying social and leisure opportunities.
- The service had experienced high levels of vacancies. They were constantly recruiting to fill posts. The service aimed to use regular agency staff to ensure continuity of support for people.

From this inspection we evaluated this service as:

In evaluating quality, we use a six point scale where 1 is unsatisfactory and 6 is excellent

How well do we support people's wellbeing?	4 - Good
How good is our leadership?	4 - Good
How good is our staff team?	5 - Very Good
How well is our care and support planned?	4 - Good

Further details on the particular areas inspected are provided at the end of this report.

How well do we support people's wellbeing?

4 - Good

We evaluated this key question as good. There were significant strengths which impacted positively on outcomes for people

We met with customers and staff at two houses. Staff engaged well with people during care delivery. Staff demonstrated kindness, dignity and were warm in their interactions with customers.

It was clear, from our observations and from the feedback we received from families that staff work to the key principles of compassion, respect and dignity.

Their comments included:

"My loved one is very happy here and gets on well with staff".

"I have no concerns, never experienced anything but dignity and respect, my relative appears comfortable with staff".

These factors contributed to positive well-being outcomes arising from support and helped us establish that people get a service that is right for them.

We noted that people were being supported to enjoy more social and leisure opportunities as covid restrictions had eased. Staff were keen to research and plan new opportunities for people to broaden their experiences.

Staff supported people to keep their home clean and tidy. This promoted people's sense of ownership of their home and independence.

People's health had benefited from their care and support. Some people required complex support and staff were trained and skilled in supporting people. Regular contact was maintained with other health professionals involved in their wellbeing

We heard from customers and relatives that care staff used PPE during the pandemic. Staff had received training on infection prevention and control. A member of staff spoken with demonstrated a good awareness of the latest guidance. During the inspection process the service increased safety measures to protect people when a person contracted Covid. This demonstrated that the service was responding to changing needs.

How good is our leadership?

4 - Good

We evaluated this key question as good. There were significant strengths which impacted positively on outcomes for people

Staff spoke well of the management team and confirmed they had a positive impact in the service. The management team were approachable and visible within the service and available to support staff when required.

There was a training plan and managers had good oversight of training undertaken. Staff had the skills to support people using the service .

Due to staffing levels there had been limited opportunities for regular team meetings or individual supervision for staff. The service was committed to re-starting these as staffing levels improved. This is important to ensure that all staff have opportunities to be supported individually or in teams.

Families commented positively on the leadership of the service, they felt supported and informed about their relatives wellbeing. This helped to reassure them that their relative was well cared for.

Communication was good in the service This allowed customers and staff share their views on the service and helped people feel valued. Families were regularly consulted about how their relative was supported. Comments included: 'I've no complaints". "They keep in touch" and "It's a good service but a high turnover of staff - but new staff don't always introduce themselves". The manager agreed to ensure this happened.

The leadership team were aware that audits had not been carried out as regularly as planned. There had been senior manager audits, however, at service level audits systems needed to be reviewed and utilised fully. This is important to ensure that high standards are maintained.

How good is our staff team?

5 - Very Good

We considered safe recruitment practice, looking at whether the Provider recruited new staff in line with best practice guidance outlined in the Scottish Government's "Safer Recruitment Through Better Recruitment (2016)".

Staff commenced in post when all pre-employment checks had been concluded. This included interview, two satisfactory references and protection of vulnerable adult checks. Staff also were required to register with the Scottish Social Services Council within 6 months of employment. These steps all contributed to ensuring a safe staff team supporting people.

The provider had a wide range of training opportunities available to staff. These were both online and face to face. Staff were required to be fully trained in areas of care they were to support people with prior to working with them. Some training areas also included observations of practice, staff had to demonstrate competence.

Staff worked supernumerary until they were assessed as competent in the role.

We discussed with the leadership team the benefits of a training plan detailed mandatory training for each part of the service. This was to ensure that staff were competent do meet people's individual needs wherever they were required to work.

The service had experienced shortages of staff over that last two years. The leadership team had worked hard to minimise the impact of this on customers. The service had used agency staff when needed and requested consistent agency staff when needed. Recruitment continued to be a focus area and vacancies were now being filled.

How well is our care and support planned?

4 - Good

We evaluated this key question as good. There were significant strengths which impacted positively on outcomes for people

Personal plans had clear information about important areas of people's lives and they guided staff to provide a consistent, personalised approach. People's preferences were clear throughout the plans.

Examples of these included how best to communicate with an individual, and how best to support someone when they were stressed or distressed. Plans also contained good information about people's wishes and preferences.

However, these needed to be reviewed and developed further to support people to plan and achieve their goals. There was a lack of clear guidance for one person to support them with a specific health need. The manager took steps to address this.

People where they wished had been involved in the development of their plans. Families were encouraged to provide information to inform their relatives plan of care.

Whilst the plans mostly contained good information the service should be mindful to ensure that these are dated and signed to show that they are up to date and current. This is to help ensure that care and support is consistent and appropriate for people.

Complaints

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

Detailed evaluations

How well do we support people's wellbeing?	4 - Good
1.1 People experience compassion, dignity and respect	5 - Very Good
1.2 People get the most out of life	4 - Good
1.3 People's health and wellbeing benefits from their care and support	4 - Good
1.5 People's health and wellbeing benefits from safe infection prevention and control practice and procedure	4 - Good
How good is our leadership?	4 - Good
2.2 Quality assurance and improvement is led well	4 - Good
How good is our staff team?	5 - Very Good
3.1 Staff have been recruited well	5 - Very Good
How well is our care and support planned?	4 - Good
5.1 Assessment and personal planning reflects people's outcomes and wishes	4 - Good

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