

# Inspection report

## Dundee City Council - Supported Living Team Support Service

Social Work Department  
Balmerino Road  
Dundee DD4 8RW

**Inspected by:** Joyce Watkinson  
**(Care Commission Officer)**

**Type of inspection:** Announced

**Inspection completed on:** 12 March 2008

**Service Number**

CS2006120984

**Service name**

Dundee City Council - Supported Living Team

**Service address**

Social Work Department  
Balmerino Road  
Dundee DD4 8RW

**Provider Number**

SP2003004034

**Provider Name**

Dundee City Council

**Inspected By**

Joyce Watkinson  
Care Commission Officer

**Inspection Type**

Announced

**Inspection Completed**

12 March 2008

**Period since last inspection**

This was the first inspection of the service.

**Local Office Address**

Central East Region  
Compass House  
11 Riverside Drive  
Dundee  
DD1 4NY

## **Introduction**

Dundee City Council Supported Living service was registered with the Care Commission in June 2006. This is a combined Care at Home and Housing Support Service to adults with learning disabilities. The service operates over two locations. The supported living team also provides a housing support service to tenants who are older adults with learning disabilities and who receive a care at home service from a different provider. The service operates with two teams of staff, one based at each location, working to provide an individualised service based on person centred care planning. This is the first inspection for the service.

## **Basis of Report**

### Before the Inspection

#### The Annual Return

The service submitted a completed Annual Return as requested by the Care Commission.

#### The Self-Evaluation Form

The service submitted a self-evaluation form as requested by the Care Commission.

### Views of service users

Questionnaires were issued to all service users and their representatives and 11 were returned. Direct telephone contact was made by the Care Commission Officer with one relative who expressed a wish to discuss their experience of the service. Other service users were seen during the course of the inspection. Their comments and feedback are reflected in the report.

### Views of Staff

10 Staff questionnaires were issued and all were returned. The overall view of the service was, in the main, positive with the access and encouragement to be involved in training being seen as a direct benefit to staff in carrying out their role.

### Regulation Support Assessment

This service was inspected after a Regulation Support Assessment (RSA) was carried out to determine the intensity of inspection necessary. The RSA is an assessment undertaken by the Care Commission Officer (CCO) which considers: complaints activity, changes in the provision of the service, nature of notifications made to the Care Commission by the service (such as absence of a manager) and action taken upon requirements. The CCO will also have considered how the service responded to situations and issues as part of the RSA.

This assessment resulted in this service receiving a low RSA score and so a low intensity inspection was required as a result. The inspection was then based upon the relevant inspection focus areas.

### During the inspection process

#### Staff at inspection

The manager, two senior staff and three care staff were spoken with during the course of the inspection. A meeting was held with the manager prior to the inspection.

#### Evidence

During the course of the inspection a range of record were looked at including,

Staff training policy and records  
The recruitment and induction policy  
A selection of care plans at both locations.

Staff were observed interacting with service users throughout the course of the inspection and informal discussion took place with staff and service users. The Care Commission Officer took all of the above into account and reported on whether the service was meeting a range of relevant National Care Standards for Care at Home and Housing Support Services.

Inspection Focus Areas and associated National Care Standards for 2007/08  
National Care Standards looked at were  
Standard 3 Management and Staffing Arrangements.  
Standard 6 Choice and Communication.

#### Fire Safety Issues

The Fire (Scotland) Act 2005 introduced new regulatory arrangements in respect of fire safety, on 1 October 2006. In terms of those arrangements, responsibility for enforcing the statutory provisions in relation to fire safety now lies with the Fire and Rescue service for the area in which a care service is located. Accordingly, the Care Commission will no longer report on matters of fire safety as part of its regulatory function, but, where significant fire safety issues become apparent, will alert the relevant Fire and Rescue service to their existence in order that it may act as it considers appropriate. Further advice on your responsibilities is available at [www.infoscotland.com/firelaw](http://www.infoscotland.com/firelaw)

#### **Action taken on requirements in last Inspection Report**

This was the first inspection for this service.

#### **Comments on Self-Evaluation**

The self evaluation document was completed and returned to the Care Commission. This identified both the key strengths of the service and areas for further development.

#### **View of Service Users**

The views of service users both at inspection and in questionnaires returned prior to the inspection were positive about the service.

#### **View of Carers**

One carer expressed concern that the level of choice which had been seen one of the major benefits of the move to this unit was not always available. Further concern was expressed over difficulties with the landlord. These concerns were discussed with the manager.

## **Regulations / Principles**

### **National Care Standards**

#### **National Care Standard Number 3: Housing Support Services - Management and Staffing Arrangements**

##### **Strengths**

The provider has a range of policies and procedures in place to support and guide staff and to protect service users. All staff responding to the questionnaire issued reported that they had access to all policies and procedures. The manager reports that a wide range of training opportunities are available to staff and that these are taken up with enthusiasm. Core training such as basic food hygiene and moving and handling are offered as well as a range of other training. Those reported through questionnaires included, lone working, sexual health for young people with learning disability, adult support and protection and enhancing your people skills. Staff meetings are in place and staff reported these and 4-6 weekly supervision as being of value. All staff spoken with were aware of the inspection process and National Care Standards. Over 90% of the staff team have SVQ training at level 2 or above.

##### **Areas for Development**

The manager and staff spoken with at inspection, some of whom had moved with service users from a larger care home setting, recognise that much adapting has to be done in this new setting. Staff who had previously always worked in teams are undertaking lone working and taking on new areas of responsibility. Service users have more autonomy, a wider range of choice and individual space and need to be fully supported to make full use of these options. This work is clearly already in progress and the manager and staff have lively ideas about how it can continue. This can be reviewed through the inspection process.

#### **National Care Standard Number 6: Housing Support Services - Choice and Communication**

##### **Strengths**

This service is based on two sites and both offer a good range of choice and independence for service users. Service users spoken with and observed in their home were seen to be involved in a range of activities, which were individualised and suited to their needs.

Care planning documentation sampled support these observations. Service users are observed at both locations to enjoy their space and display a pride and ownership of the environment. Bedrooms, which service users access with their own keys, are highly personalised and service users have participated in the choice of decor in public areas. Staff based in the service work with service users, their carers and workers in other services in which service users take part in order to ensure good communication is in place. Staff displayed good communication skills with service users and warm supportive relationships were observed. Staff were observed to respond to service users needs and wishes appropriately and with sensitivity. A range of training in different kinds of communication skills is available and taken up by staff. Advocacy services have been used where appropriate.

## **Areas for Development**

At one site the front door is accessed by a key pad system. The manager reports that the service took ownership of the building with this system in place. This system is difficult for most service users to operate and the use of an alternative lock which makes it easier for service users to access and depart from their home but keep out intruders should be considered. The small garden area at this site is not well maintained by the landlord so that sitting out and the drying of laundry outside are not currently available options for service users. A carers questionnaire indicated that service users are paying towards garden maintenance. The service provider should take this up with the landlord as a matter of urgency so that this matter can be resolved before summer 2008. (See Recommendation 1 )

**Enforcement**

There has been no enforcement action against this service since the last inspection.

**Other Information**

The Care Commission Officer informed the manager of the 'Regulating for Improvement' project - a development which will significantly change how the Care Commission will regulate services from April 2008. It will mean better information, more involvement with people who use care services and their carers, and the introduction of clear gradings which will help people make more informed choices about the care services they want to use.

The manager was advised by the Care Commission Officer to familiarise themselves with the information and briefings that have been made available at [www.carecommission.com/Care Services/Regulating for Improvement/Information for Service Providers](http://www.carecommission.com/Care%20Services/Regulating%20for%20Improvement/Information%20for%20Service%20Providers).

**Requirements****Recommendations**

The landlord should be asked to improve the garden area promptly in order to ensure that service users are getting value for money and have access to an outdoor sitting and drying area. National Care Standards Housing Support Services Standard 6. (3)

**Joyce Watkinson**

**Care Commission Officer**