

# Inspection report

## Sense Scotland - Fife Support Service

11 Edison House  
Fullerton Road  
Queensway Industrial Estate  
Glenrothes KY7 5QR

**Inspected by:** Beth Martin  
**(Care Commission Officer)**

**Type of inspection:**

**Inspection completed on:** 9 January 2009

**Service Number**

CS2004077395

**Service name**

Sense Scotland - Fife

**Service address**

11 Edison House  
Fullerton Road  
Queensway Industrial Estate  
Glenrothes KY7 5QR

**Provider Number**

SP2003000181

**Provider Name**

Sense Scotland

**Inspected By**

Beth Martin  
Care Commission Officer

**Inspection Type****Inspection Completed**

9 January 2009

**Period since last inspection**

20 Months

**Local Office Address**

South Suite  
Largo House  
Carnegie Avenue  
Dunfermline  
KY11 8PE

## **Introduction**

Sense Scotland Fife is a combined service of Housing Support and Care at Home available to adults who have care and support needs due to deafness, blindness, sensory impairment, learning and physical disabilities. The service operates from 8 different houses throughout Fife on a 24 hour basis and currently also delivers care to 3 Service Users on a part time basis in their own homes.

The aim of the service is to be supportive and enabling, which is clearly laid out in the working principles document. Staff have a commitment to; respect and protect dignity, afford as much privacy as possible, safeguard rights, safety and welfare, encourage choice personal fulfilment, learning and pleasure and enhance independence.

Service Users have either tenancy or occupancy agreements.

All staff are employed in accordance with Sense Scotland's recruitment and selection procedure which includes; an application form, two written references, an enhanced Disclosure Scotland check and an individual interview.

Gwyn Morrison is the Service Manager and is responsible for the day to day running of the service and the supervision of staff. Mrs Morrison was present on the day of the inspection.

Based on the findings of this inspection the service has been awarded the following grades:

Quality of Care and Support - 4 - Good

Quality of Staffing - 4 - Good

Quality of Management and Leadership - 4 - Good

This inspection report and grades represent the Care Commission's assessment of the quality of the areas of performance which were examined during this inspection.

Grades for this care service may change following other regulatory activity. Please refer to the care services register on the Care Commission's website ([www.carecommission.com](http://www.carecommission.com)) for the most up-to-date grades for this service.

## **Basis of Report**

This report was written following an announced inspection which took place between 10.00 and 16.00 on the 9th of January 2009 by Beth Martin Care Commission Officer.

The service submitted a completed Annual Return as requested by the Care Commission. The provider also submitted a completed self assessment form.

Ten Care Commission questionnaires were issued to service users, friends, relatives or carers of people who received a service from Sense Scotland Fife. Nine completed questionnaires were returned prior to the inspection. One Service User and eight Carers completed the questionnaires. The Service User was assisted by an independent advocate.

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 based upon the relevant Inspection Focus Area (IFA) and associated National Care Standards - Housing Support Services, recommendations and requirements from previous inspections and complaints or other regulatory activity. This included a sample/grade of a service user quality statement from each Quality Theme and a sample/grade of IFA and a Quality Statement chosen by the CCO in each Theme. The IFA for 2008/09 for this category of service is Notifications.

During the inspection, evidence was gathered from a number of sources including:

A review of a range of policies, procedures, records and other documentation including the following:

Supporting evidence from the up to date Self Assessment

Service User's personal plans

Training records

Health & Safety records

Accidents and Incident records

Complaints records

Questionnaires completed and returned to the care Commission from Service Users and relatives of Service Users

Questionnaires completed and returned to the service during the self assessment process

Speaking with the Service Manager

Speaking with Service Users.

Details of the inspection focus and associated Quality Themes to be used in inspecting each type of care service in 2008/09 and supporting inspection guidance, can be found at:

<http://www.carecommission.com/>

This service will receive a minimum of 1 inspection over the year 2008/09.

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 since last Inspection**

No requirements were made following the previous inspection. Recommendations were made regarding obtaining various best practice documents and raising staff awareness of them and devising a method of recording the administration of as required medication. These recommendations have been met.

### **Comments on Self Assessment**

A fully completed Self Assessment document was submitted by the service. This was completed to a satisfactory standard and gave relevant information for each of the quality

Themes and Statements. The service provider identified what they thought they did well, some areas for future development and how they planned to implement changes and further develop the service.

### **View of Service Users**

Comments from Service Users included:

"Happy in their home and relate well to staff"

"The staff work in an independent way and work with the Service Users as best suits them encouraging age appropriate activities and their particular interests"

"The Service Users continue to develop their skills"

"We're going shopping today I like shopping".

### **View of Carers**

Comments from Carers included:

"My son is in Sense House and as you can see I am very satisfied"

"I am very satisfied with the level of care given, also the thoughtfulness and consideration to myself and family"

"My son has never been so happy and contented. My thanks to everyone concerned with his wellbeing".

## **Quality Theme 1: Quality of Care and Support**

### **Overall CCO Theme Grading: 4 - Good**

**Statement 1: We ensure that service users and carers participate in assessing and improving the quality of the care and support provided by the service.**

#### **Service Strengths**

The service devised a Participation Strategy in October 2008. New policies are discussed at team meetings. All staff have access to a computer and the Sense Scotland website.

Satisfaction surveys were sent to all Carers/Advocates between July and December 2008. The Service Manager is currently collating the information and the Care Commission Officer was informed that on completion the Service Manager will attend each team meeting and share the results. The teams will then be requested to devise an action plan specific to their individual service and this will be monitored by the Service Manager. The outcomes will be recorded as part of the Target Action Plan and shared with Service Users, Carers and Advocates.

Due to the complex needs of the Service Users it was decided that they would not receive surveys, the service is currently investigating other methods of seeking Service User's views.

Sense Scotland has a Service User Consultation Group with members from all over Scotland. One of the Service Users in Sense Scotland Fife is part of the group. Although the minutes of each meeting are not shared with people out with the group any actions taken from decisions made are shared with Service Users, Carers and staff via the quarterly newsletters. The Consultation Group also holds annual conferences to discuss the work that has been undertaken over the year and to discuss nominated topics. The group enjoys a summer event each year when the members get together socially and have the option of an overnight stay away from home.

Invitations are requested from Service Users and Carers to contribute to the newsletters. Greame Thomson Communications Officer visits projects throughout Scotland gathering information for the publications which includes a Children & Family section, fundraising projects and social events.

The service used to have a Family Consultation Group which ceased with the agreement of the group members as the objectives of the group were not being met. Sense Scotland now has a Family Advisory Officer who deals with issues and/or concerns on behalf of families and Carers. Families and Carers are in communication with the service on a needs preferred basis this is agreed during the assessment/admission process and included in each review.

#### **Areas for Development**

It is suggested that staff members are requested to sign new policies and documents in an effort to evidence their understanding.

Consideration should be given to devising alternative methods of Service User and Carer participation in assessing and improving the quality of care and support provided by the service.

## CCO Grading

4 - Good

### Number of Requirements

0

### Number of Recommendations

0

**Statement 2: We enable service users to make individual choices and ensure that every service user can be supported to achieve their potential**

### Service Strengths

Every Service User has a 'Working with Me' folder which contains detailed information about the Service User, their likes, dislikes and abilities. It describes how the Service Users wish to be cared for, preferred daily routines and daily support needs in all aspects of wellbeing.

The folder contains a section on communication which includes:

The Service User's most used signs

Signs staff use most to communicate with the Service User

Signifiers for activities.

Service Users also have support plans which describe the events that have taken place since the last review e.g. social occasions, outings, developments and the next steps. The plan is supported by photographs and stories throughout.

Every Service User receives a Care and Housing Support Service Agreement which includes information such as service provision, standards, advocacy services and complaints procedures. The agreements should be signed by the Provider and the Service User/advocate, the Service Manager was unsure on the day of the inspection whether in fact this is carried out. They also receive a 21 page Housing and Support Service handbook. All documents are open and transparent in an effort to offer as much information and choice as possible.

Social Work reviews are held on an annual basis and Carers/Advocates are encouraged to attend. The service reviews Service Users and care delivery on an as required basis. It was noted on the day of the inspection that some documents had been reviewed but not dated. This makes it extremely difficult to track progress. Link Teams are staff members who are involved in the care delivery of individual Service Users and they meet on a monthly basis.

Service Users met on a weekly basis to discuss which activities they wish to partake in the following week. Activities are obviously timetabled around GP appointments and family visits.

Service Users are asked every year if they wish to go on holiday. Destinations to date have included chalets in Aviemore, pampering breaks at Stobo Castle, a weekend in Edinburgh inclusive of a trip to the theatre and log cabins near St Andrews. One Service User went to Ireland and visited her extended family.

The staff in each home does the cooking and the Service Users are encouraged to

participate in the menu planning, shopping, preparation and cooking. They are also encouraged to assist with the laundry when possible.

**Areas for Development**

It is advised that all service agreements are signed by the Provider and the Service User/advocate to evidence that the care delivery is in fact a joint agreement.

Consideration should be given to dating documents following reviews in an effort to track progress.

**CCO Grading**

5 - Very Good

**Number of Requirements**

0

**Number of Recommendations**

0



**Quality Theme 2: Quality of Environment**

**Overall CCO Theme Grading:**

## **Quality Theme 3: Quality of Staffing**

**Overall CCO Theme Grading: 4 - Good**

**Statement 1: We ensure that service users and carers participate in assessing and improving the quality of staffing in the service.**

### **Service Strengths**

The questionnaires sent out to all Carers ask for views on the skills and knowledge of the staff within the service. Other views sought in the questionnaires are regarding to complaint handling, respect and dignity, treating concerns seriously and timely and general satisfaction with the service. Once collated an action plan will be devised to deal with any uncertainties.

The Service Manager stated on the day of the inspection that Carers have been invited to sit on interview panels but no records of this have been kept.

The families of some Service Users who receive care in their own home are involved in the recruitment process and the Service User then meets and greets the new employee. All parties then have the right to change a member of staff if incompatible. Again there is no written evidence of this.

### **Areas for Development**

Consideration should be given to keeping records of Service User and Carer participation in the recruitment process.

Consideration should be given to devising alternative methods of Service User and Carer participation in assessing and improving the quality of staffing within the service.

### **CCO Grading**

4 - Good

### **Number of Requirements**

0

### **Number of Recommendations**

0

**Statement 3: We have a professional, trained and motivated workforce which operates to National Care Standards, legislation and best practice.**

### **Service Strengths**

All staff receive a 2 day organisational induction which includes:

Values & Principles

Communication

Understanding & Responding to People's Needs

Professional Development Planning  
Continuous Professional Development.

Every employee then has either a 2 or 3 week timetable of training which consists of mandatory training such as:

Moving and Assisting  
Protecting People Using Services  
Administration of Medication  
Fire Safety Awareness  
Petty Cash  
Handwashing.

This timetable also includes training which is required on an individual service needs basis for example:

Epilepsy Awareness  
Crisis, Aggression, Limitation and Management (CALM).

Each employee receives a copy of the Scottish Social Services Council's Code of Practice and sign to say that they have read, understood and agree to abide by the code.

Sense Scotland has Training and Development Centre which is responsible for training delivery and all staff have a Continuing Professional Development Portfolio. The centre is also accredited to delivering SVQ training.

There is an annual training plan for core training and other training is delivered on a supply and demand basis. Staff can also access external training on specific topics should they be relevant to Service User's needs.

On the day of the inspection 2 employees had attained an SVQ level II certificate, 17 employees had attained an SVQ level III certificate and 9 were undertaking the training. 2 members of staff had attained an SVQ level IV certificate and the Service Manager had attained the Registered Manager's Award. Other qualifications held by certain members of staff on the day of the inspection were:

Speech and Language Therapy  
Degree in Social Science  
Nursing Qualifications - RMNH and RGN.

### **Areas for Development**

#### **CCO Grading**

5 - Very Good

#### **Number of Requirements**

0

#### **Number of Recommendations**



## **Quality Theme 4: Quality of Management and Leadership**

**Overall CCO Theme Grading: 4 - Good**

**Statement 1: We ensure that service users and carers participate in assessing and improving the quality of the management and leadership of the service.**

### **Service Strengths**

As previously mentioned questionnaires given to Carers do seek the views on the skills and knowledge of the staff within the service. Views are also sought on the management structure from staff in the staff questionnaires. Again, once the information has been collated an action plan will be devised to address any issues.

An annual operational plan is devised by the Senior Management Team and passed to all services for comment before being finalised. The Service Manager stated on the day of the inspection that staff comments and views are taken into account prior to publication.

Families are aware that the service has an open door policy and every endeavour is made to deal with any concerns or issues as they arise.

The Service Manager informed the Care Commission Officer on the day of the inspection that she receives supervision every 6-8 weeks and feels well supported by the Senior Management. Manager meetings are also held every 6 weeks and views are taken into account regarding service delivery. New Support Workers receive supervision every 4-6 weeks and established Support Workers receive supervision every 8-12 weeks. Staff are encouraged to utilise the Coaching and Mentoring System. This is a support mechanism whereupon Senior Support Workers level 3 and above can support/coach an employee in a specific topic which has been highlighted by either party in a positive constructive manner. Recording tools are used to document the aims, objectives and outcomes. Every employee receives an annual appraisal to discuss their Annual Development Plan.

The service has not received any complaints since the last inspection.

### **Areas for Development**

Consideration should be given to devising alternative methods of Service User and Carer participation in assessing and improving the quality of leadership and management within the service.

### **CCO Grading**

4 - Good

### **Number of Requirements**

0

### **Number of Recommendations**

0

**Statement 4: We use quality assurance systems and processes which involve service users, carers, staff and stakeholders to assess the quality of service we provide.**

### **Service Strengths**

Team Leaders for each service are responsible for carrying out the following audits:

Petty Cash and Service User's Finance

Care Standards

Health & Safety

Medication

Record Keeping

Rota Management

Recruitment

Professional Development

Management Checklist

Personal Plans and Record Keeping.

The Service Manager stated on the day of the inspection that although the Team Leaders are responsible for the audits there are no time constraints on the audits. The Service Manager also stated that no quality assurance systems are in place to ensure that the audits delegated to Team Leaders are being carried out.

The Service Manager is responsible for audits such as:

Accidents/Incidents/Challenging Behaviour

As required Medication Recording

Absence/Sickness

Complaints

On Call Audit

Risk Assessments

Training Audits

Communication Books.

Each home carries out Health & Safety checks and maintains records.

Sense Scotland as a charitable organisation also has regular Trustee meetings. Audit tools, audit reports and Care Commission reports are analysed and any required action is requested. Trustees may also audit any service at any time independently.

The Service Manager was aware of the SSSC Codes of Practice and her responsibility to report to the SSSC and the Care Commission any dismissal on the grounds of misconduct including theft. There had been instances of staff dismissal on the grounds of misconduct since the previous inspection; the appropriate bodies were notified of any action taken. A copy of the notification guidance was available in the home.

### **Areas for Development**

It is advised that audits have time constraints applied in an effort to give assurance that protocols are being adhered to.

Consideration should be given to putting quality assurance systems in place to ensure that organisational procedures regarding audits are being followed.

**CCO Grading**

4 - Good

**Number of Requirements**

0

**Number of Recommendations**

0

**Regulations / Principles**

**National Care Standards**



**Enforcement**

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

**Other Information****Requirements**

None.

**Recommendations**

None.

**Beth Martin**

**Care Commission Officer**