

Venture Support and Care Housing Support Service

Unit 4, Community Resource Centre
Old Mart Site
Market Street
Maud
Peterhead
AB42 4NQ

Telephone: 01771 619050

Type of inspection: Announced (short notice)
Inspection completed on: 11 October 2017

Service provided by:
Venture Support & Care Ltd.

Service provider number:
SP2009010286

Care service number:
CS2009195697

About the service

Venture Support and Care is a privately owned and operated 'Care at Home' and 'Housing Support' service. One of the partners in the company is also the manager. We refer throughout the inspection to this person as the provider. The office base is in Maud and the service provides support to people in their own homes in and around this area.

The service can be provided to any age group, as long as they require support by reason of their vulnerability (other than a vulnerability or need arising from that person being of a young age). The service had a written document that stated "The Venture Support and Care aim is to provide a flexible and comprehensive service for adults with a learning disability which will adapt, change and develop according to their individual needs".

At the time of the inspection, there were 10 people using this service. The service registered with the Care Inspectorate on 1 April 2011, having been previously registered with the Care Commission.

What people told us

We issued eight Care Standards Questionnaires for completion by service users, with five being returned. All either strongly agreed or agreed with the statement "Overall, I am happy with the quality of care and support this service gives me." Comments received included the following.

- As advocate I would like to formally record that my relative is very receptive to his carers and looks forward to seeing them.
- He is supported one day per week which is the only day we don't need to prompt him to start his morning routines, it makes Friday mornings easier. Would appreciate this comment being shared with service.
- X's staff have been with him for years now, and know if there is a change in his needs and they let me know what's going on.
- The family are all delighted with the care Venture is providing to X.
- All the ladies are lovely and I am happy to be with them.

In addition we spoke with two people receiving support and two family members. Again they were satisfied with the quality of care being provided, although in one instance retaining continuity of staff members was an issue.

Self assessment

We had not asked the service to complete a self-assessment in advance of the inspection. We looked at their own improvement plan and quality assurance paperwork. These demonstrated their priorities for development and how they were monitoring of the quality of the provision within the service.

From this inspection we graded this service as:

Quality of care and support	4 - Good
Quality of staffing	4 - Good
Quality of management and leadership	4 - Good

Quality of care and support

Findings from the inspection

The service was very personalised and provided support to people to attend day services or on a full time basis. Support plans detailed the support that was provided to a good standard. It was noted that the support plans regarding communication was very good. There was some duplication and examples where additional detail could be provided to ensure that the person's routine was followed accurately (**see recommendation 1**). Some of the duplicated plans were not consistent and where a plan was described as providing a high level of personal care it did not fully explain the level of support. It was thought that this was possibly a poor use of wording to describe that personal care was provided. In some instances photographs could be used to demonstrate, for example, positioning or layout.

The people being supported were, where necessary, assisted to make and attend healthcare appointments. In some instances they were supported by staff to ensure that they had an appropriate understanding of the issue and this could be accurately reported to family members and other staff members, so that that changes to support were implemented appropriately.

The service had good relationships with the family members. This varied as appropriate and in one instance a parent took over the support duties to enable the staff members to attend team meetings, training and other events which would benefit their relative.

Review meetings were taking place as planned and in conjunction with the local authority. It was good to note that the staff at Venture took notes at the meetings so that any actions stated could be implemented prior to receiving the written minute of the review.

Requirements

Number of requirements: 0

Recommendations

Number of recommendations: 1

1. The service provider should ensure that the support plans include clear and accurate information about the support being provided to ensure that there is a consistent approach which meets the needs of the person.

National Care Standards, Care at Home, Standard 3, Your Personal Plan;
National Care Standards, Housing Support Services, Standard 4, Housing Support Planning.

Grade: 4 - good

Quality of staffing

Findings from the inspection

All staff members were recruited in a safe manner. All appropriate checks had taken place and information was available on computer. New staff completed an induction programme which included completion of a workbook. This considered training and instruction that they had received, and they provided a reflection of their understanding and how they would implement this. We discussed additional induction formats and the manager was going to consider elements to improve the services induction process.

All staff members completed the mandatory training programme. The training record confirmed that these had been completed by all in the past two years. Additional service user specific training was provided, although from the training record it was apparent that not all staff members working with the service user had completed this training (**see recommendation 1**). One member of staff requested Makaton training (a language programme providing a means of communication to individuals who cannot communicate effectively by speaking) as the service user who they supported used this communication method whilst at the day service. This should be sourced.

Records showed that staff supervision and team meetings were taking place as planned.

Requirements

Number of requirements: 0

Recommendations

Number of recommendations: 1

1. The service provider should ensure that all staff members working regularly with a service user receive training which is specific to that person.

National Care Standards, Care at Home, Standard 4, Management and Staffing ;
National Care Standards, Housing Support Services, Standard 3, Management and Staffing Arrangements.

Grade: 4 - good

Quality of management and leadership

Findings from the inspection

This is a small organisation providing support to people in the local area. They had recently reviewed their skills and experience and had returned to supporting the core service user group. This ensured that the staff members had the appropriate skills, knowledge and experience to support this group of people.

The service provider and manager was focussing on these roles and reducing her involvement in providing direct care. She was also more able to provide training to the staff team and to develop her skills to provide a wider range of training to staff. We discussed some training opportunities which they actively followed up.

The service provided regular reports to the local authority contracts department and also provided monthly updates to the Care Inspectorate with regards to reviews, supervisions and team meetings, and this was planned

to continue. The manager was to provide access to the Care Inspectorate's e-forms system to ensure that notifications were reported within the appropriate timescales.

The manager and assistant were available to be contacted by the service users and staff team and operated an open-door policy.

One issue that was raised by a parent was that the service was not always in a position to provide an appropriate staff member to support their son. Although the service notified the parent and day service, it was not always possible for the parent to have their son remain at home. It was suggested that the service and day service should discuss this to ensure that the service user was supported by someone that they knew.

Requirements

Number of requirements: 0

Recommendations

Number of recommendations: 0

Grade: 4 - good

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

Previous requirements

Requirement 1

The provider must ensure that they review the personal plan (including risk assessments, night-time support and profiles) of every person they support at least once every six months, when requested to do so by a supported person, or any representative, or when there is a significant change in a supported person's health, welfare or safety needs.

In order to achieve this, the provider must ensure:

- a) reviews are undertaken involving all relevant persons as appropriate to the person
- b) staff produce a written record of the review and share this with the person being supported and their representative where applicable
- c) staff update personal plans as appropriate to reflect the decisions/recommendations made at the review and to ensure all the information they contain is current.

This is in order to comply with:

The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/210) Regulation 5 - A requirement for providers to complete a personal plan that details the health and welfare needs of the service users.

This requirement is also informed by:

National Care Standards for Care at Home - Standard 3: Your Personal Plan.

Timescale: Within 16 weeks of receipt of this report.

This requirement was made on 8 March 2017.

Action taken on previous requirement

This appears to have been completed. The service has developed a programme for the reviews. From viewing files it appears that these reviews have since taken place according to the plan.

Met - within timescales

Requirement 2

The provider must ensure that people receive a quality service from suitably skilled, competent and confident staff.

In order to achieve this, the provider must:

- a) demonstrate that all staff receive an induction that provides them with the knowledge and skills to undertake their work
- b) ensure all staff receive appropriate support and supervision from a line manager to fulfil their roles and responsibilities
- c) ensure all staff participate in meetings with colleagues to support their development and to improve the service provided to people.
- d) assess the training needs of their staff
- e) provide a variety of training and development opportunities to staff in keeping with the training needs analysis.

This is in order to comply with:

The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/210) Regulation 15 - a requirement for ensuring the competency of staff. The Scottish Social Services Council (SSSC) Code of Practice for Employers has been taken into account in making this requirement.

Timescale: Plans developed within, and events started by 4 weeks on receipt of this report.

This requirement was made on 8 March 2017.

Action taken on previous requirement

Improvement has been made in this area. Again a programme is in place to manage supervisions. Staff members report that supervisions have taken place. Training records show that staff members have received appropriate training to meet the needs of the people that they support. Staff team meetings take place by area. This has helped direct discussion to the people being supported by that team.

Met - within timescales**Requirement 3**

People can be confident their service addresses areas for concern and makes improvements to their quality of support. In order to do this, the provider must report to the Care Inspectorate on their progress in addressing the areas for improvement identified during the inspection. These areas are detailed below:

- a) the names of staff and dates when they have had one-to-one meetings with their line manager
- b) the dates and attendees of staff team meetings
- c.) the dates and attendees of senior staff meetings
- d) staff training needs analysis compiled from their one-to-ones and service's training policy (that training will be provided to suit individual needs of supported people and staff's different roles)
- e) training plan developed from the analysis and ongoing dates when the training has been delivered
- f) the dates of reviews of the service provided to each supported person
- g) the provider investigates the elements of complaints made to them that had not been addressed, and reports their findings to the Care Inspectorate.

This is in order to comply with:

The Public Services Reform (Scotland) Act 2010, section 59 - a requirement for ensuring providers of social services supply Social Care and Social Work Scotland (known as the Care Inspectorate) with any information relating to the service which it considers necessary or expedient.

Timescale: To begin on the last Thursday of each month following receipt of the draft report. The requirement will be fully met when all aspects have been met and when returns show elements a-c have become regular practice.

This requirement was made on 8 March 2017.

Action taken on previous requirement

The service provides the Care Inspectorate with monthly updates regarding review meetings, staff supervision and team meetings and plan to continue to do this.

Met - within timescales

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

Previous recommendations

There are no outstanding recommendations.

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
27 Jan 2017	Unannounced	Care and support 3 - Adequate Environment Not assessed Staffing 3 - Adequate Management and leadership 3 - Adequate
3 Feb 2016	Announced (short notice)	Care and support 4 - Good Environment Not assessed Staffing 4 - Good Management and leadership 3 - Adequate
4 Feb 2015	Announced (short notice)	Care and support 5 - Very good Environment Not assessed Staffing 4 - Good Management and leadership 4 - Good

Date	Type	Gradings	
17 Feb 2014	Announced (short notice)	Care and support Environment Staffing Management and leadership	4 - Good Not assessed 4 - Good 3 - Adequate
20 Aug 2013	Re-grade	Care and support Environment Staffing Management and leadership	Not assessed Not assessed Not assessed 3 - Adequate
9 Aug 2013	Re-grade	Care and support Environment Staffing Management and leadership	Not assessed Not assessed Not assessed 1 - Unsatisfactory
31 May 2013	Unannounced	Care and support Environment Staffing Management and leadership	4 - Good Not assessed 4 - Good 3 - Adequate
6 Jun 2012	Announced (short notice)	Care and support Environment Staffing Management and leadership	5 - Very good Not assessed 4 - Good 4 - Good
30 Apr 2010	Announced	Care and support Environment Staffing Management and leadership	4 - Good Not assessed 4 - Good 4 - Good

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