

RCA Trust Housing Support Unit Housing Support Service

8 Incle Street
Paisley
PA1 1HP

Telephone: 01418 870 880

Type of inspection:
Unannounced

Completed on:
22 March 2024

Service provided by:
RCA Trust

Service provider number:
SP2004005989

Service no:
CS2004061386

About the service

RCA Trust Housing Support Unit is a voluntary organisation and registered charity providing support to people affected by alcohol and drug issues, gambling addiction, and mental ill-health. It works with people to help them gain and maintain their own homes, and assists people to achieve better outcomes by supporting them to manage addictions and improve their physical and mental health.

The RCA Trust is based in Paisley town centre close to transport links and local amenities. Support is provided from the RCA Trust base, in people's homes, and in the community.

Services are provided in Renfrewshire and East Renfrewshire.

The service was supporting 60 people at the time of inspection.

About the inspection

This was an unannounced follow up inspection which took place on 21 March 2024, between 11:00 and 17:00, and 22 March 2024, between 09:00 and 13:30. 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 three people using the service
- spoke with four staff and management
- observed practice and daily life
- reviewed documents.

Key messages

- All staff had completed refresher training to support them to work safely and effectively.
- New risk assessments were in place which demonstrated how the service supported people to manage risk.
- The service development plan more clearly identified improvement goals, timescales and responsibilities.
- Quality assurance processes had been reviewed but further work was required to ensure they were clear and meaningful.
- The service had implemented processes to ensure feedback from people contributed to service development.

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

Requirements

Requirement 1

By 26 February 2024, the provider must ensure that staff are adequately trained and supported to carry out their roles safely and effectively.

To do this the provider must:

- a) complete a training needs analysis for all staff to identify training needs;
- b) identify core training relevant to each role in the service;
- c) schedule relevant training for all staff in the service;
- d) implement an effective and accessible training plan which clearly records training completed and refresher dates; and
- e) ensure staff supervision is scheduled and completed in accordance with organisational policy.

This is to comply with Regulation 15(b) (Staffing) of The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/210).

This requirement was made on 3 November 2023.

Action taken on previous requirement

The manager of the service had initiated weekly team meetings following inspection to identify training needs and clarify core training required for each role. A training schedule had been created which tracked training for all team members.

All staff members had attended supervision and a schedule of future supervision dates had been created. Both staff training and supervision were overseen by the manager with support from the principle support worker for the service.

Additional face-to-face training had been identified for the team and future training dates had been scheduled.

The manager of the service had arranged a 'service development day' to provide further opportunities for staff to have involvement in service development. This helped staff to feel included and engaged in service improvement.

Met - within timescales

What the service has done to meet any areas for improvement we made at or since the last inspection

Areas for improvement

Previous area for improvement 1

The service should ensure risk assessment guidance and paperwork is used effectively.

To do this, the provider should ensure that:

- a) risk assessment guidance is issued to all staff and appropriate training is identified and provided;
- b) risk assessments are reviewed and signed off by an appropriate person in the organisation;
- c) risk assessments are reviewed and updated at a minimum of twice yearly or when changes occur that impact risk assessment; and
- d) risks and risk management are discussed regularly through supervision and team meetings.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that:

'I am protected from harm, neglect, abuse, bullying and exploitation by people who have a clear understanding of their responsibilities' (HSCS 3.20).

This area for improvement was made on 3 November 2023.

Action taken since then

The manager of the service had sought guidance from Health and Social Care (HSCP) partners and had implemented new risk assessment paperwork. The new paperwork was clearer and more easily updated than the previous risk assessment format.

All staff had completed training in risk assessment which was delivered by the manager of the service. All staff had been involved in reviewing people's risk assessments and implementing the new paperwork with support from the principle support worker. The manager of the service had oversight of risk assessments in line with organisational policy.

All staff had attended supervision and discussed service user needs and risks as part of supervision sessions. Regular team meetings had been implemented and staff told us they had opportunities to share their views about the new risk assessment process.

Risk assessments we sampled varied in quality and detail. We asked the manager to continue to sample risk assessments and provide ongoing guidance to staff to ensure all risk assessments were robust and meaningful.

This area of improvement has been met.

Previous area for improvement 2

In order to ensure quality assurance activities are effective and contributing to service development, the provider should:

- a) ensure satisfaction surveys are scheduled, targeted, and analysed to inform the service improvement plan;
- b) implement a system for staff involvement in quality assurance activities;
- c) ensure the standards expected from quality assurance activities are clear and communicated to all staff;
- d) ensure any improvements identified in quality assurance activities are based on 'SMART' principles – specific, measurable, achievable, realistic and time-based;
- e) ensure identified improvements are followed up and signed off when completed by an appropriate person in the organisation; and
- f) ensure the service improvement plan is meaningful and identified improvements can be tracked based on SMART principles.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that:

'I benefit from a culture of continuous improvement, with the organisation having robust and transparent quality assurance processes' (HSCS 4.19).

This area for improvement was made on 3 November 2023.

Action taken since then

The service had updated the format of satisfaction surveys to align with Care Inspectorate guidance. A schedule for twice yearly satisfaction surveys had been created with the first survey to take place in April 2024. Both staff and people using the service will be consulted.

Staff had been involved in discussions about quality assurance through frequent team planning meetings which were implemented following the previous inspection. A 'core competency' checklist had been created by the manager in consultation with HSCP partners and staff. This was due to be implemented in April 2024 as part of quality assurance activities.

The manager was in the process of making further adjustments to quality assurance activities and this work was ongoing at the time of inspection. Further changes were still required to ensure quality assurance standards and expectations were clear, and improvements were identified in line with 'SMART' principles.

The manager had updated the format of the service development plan to align with good practice guidance. The new service improvement plan was clear and meaningful, and used SMART principles to identify required improvements with timescales and clearly identified responsibilities.

The service had undertaken a significant amount of work to meet the area for improvement, and it was notable that the whole staff team had been consulted and included in the process. Given the short timescale since the previous inspection, further development is still required to fully meet this area for improvement.

This area for improvement has not been met, and remains in place.

Complaints

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

To find out more

This inspection report is published by the Care Inspectorate. You can download this report and others from our website.

Care services in Scotland cannot operate unless they are registered with the Care Inspectorate. We inspect, award grades and help services to improve. We also investigate complaints about care services and can take action when things aren't good enough.

Please get in touch with us if you would like more information or have any concerns about a care service.

You can also read more about our work online at www.careinspectorate.com

Contact us

Care Inspectorate
Compass House
11 Riverside Drive
Dundee
DD1 4NY

enquiries@careinspectorate.com

0345 600 9527

Find us on Facebook

Twitter: @careinspect

Other languages and formats

This report is available in other languages and formats on request.

Tha am foillseachadh seo ri fhaighinn ann an cruthannan is cànan eile ma nithear iartras.

অনুরোধসাপেক্ষে এই প্রকাশনাটি অন্য ফরম্যাট এবং অন্যান্য ভাষায় পাওয়া যায়।

یہ اشاعت درخواست کرنے پر دیگر شکلوں اور دیگر زبانوں میں فراہم کی جاسکتی ہے۔

ਬੇਨਤੀ 'ਤੇ ਇਹ ਪ੍ਰਕਾਸ਼ਨ ਹੋਰ ਰੂਪਾਂ ਅਤੇ ਹੋਰਨਾਂ ਭਾਸ਼ਾਵਾਂ ਵਿਚ ਉਪਲਬਧ ਹੈ।

هذه الوثيقة متوفرة بلغات ونماذج أخرى عند الطلب

本出版品有其他格式和其他語言備索。

Na życzenie niniejsza publikacja dostępna jest także w innych formatach oraz językach.