

# Perth & Kinross Council - Adults with Learning Disabilities Housing Support Service

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**Type of inspection:**  
Unannounced

**Completed on:**  
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**Service provided by:**  
Perth & Kinross Council

**Service provider number:**  
SP2003003370

**Service no:**  
CS2004074774

## About the service

This care at home and housing support combined service is provided by the Supported Living Team, which is part of the Health and Social Care Partnership and Perth and Kinross Council. The stated aims of the service are:

"We believe that people with a learning disability have the right to live as ordinary a life as possible through;

- using the same facilities and services used but other people;
- making informed choices;
- developing independent living skills.

Through a person-centred approach we aim to offer effective housing support that allows each individual to pursue their personal goals in relation to independent living".

The service provided care and support for up to 17 people, who lived in the City of Perth and the Perthshire town of Blairgowrie.

## About the inspection

This was a full inspection which took place on 11, 12 and 13 March 2024. 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
- spoke with eight staff and management
- observed practice and daily life
- reviewed documents
- spoke with visiting professionals.

## Key messages

- Most of the people we spoke to told us that they received very good support from the service.
- People told us that they felt fully involved in their support planning and were encouraged to give their views about their support.
- The service had staff vacancies, which had affected some aspects of the service it provided.
- Staff demonstrated strong person-centred values and had worked hard to limit the impact that staff shortages had on the service.
- The staff said that they were part of a mutually supportive team.
- The management team were very experienced and most of the staff we spoke to said that their managers were supportive.
- The service had a wide range of well written policies and procedures, which supported good practice.

## 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?	5 - Very 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 found that the service had a number of important strengths which taken together clearly outweighed areas for improvement. These strengths had a significant positive impact on people's experiences and outcomes. However, some improvements were required to maximise wellbeing and ensure people consistently had experiences and outcomes which were as positive as possible.

Most of the people we spoke to were very positive about the quality of the support they received. We saw that staff knew the people they supported well. They knew how to use humour and banter appropriately, which contributed to the warm, spontaneous and friendly interaction between staff and the people they supported. We heard from people that they had built trusting relationships with the staff who supported them. We found that the service was grounded in positive person-centred values. Its aim was to provide people with the opportunity to live as independently as possible. This supported them to have greater opportunities for employment and unpaid work. The staff we spoke to exuded these values and were passionate about supporting people to get the most out of life and to help them reach their potential.

People should be able to have an active life and participate in a range of recreational, social, creative, physical and learning activities every day. People told us that the service helped to support them to be independent and to participate in activities in the community. Some people said that they would like more things to do. When we explored this further, we found that this was primarily due to activities and support groups either being cancelled or not re-opening after the Covid-19 pandemic. The people we spoke to told us that for most of the time they had enough meaningful things to do. We heard from leaders and staff that the service had been operating with staff shortages. Staff were dedicated and were prepared to work additional hours in order to ensure that the people they supported continued to receive the best possible support. We heard that the service had been innovative and has sometimes taken two people to the same event or activity, which ensured their continued participation in the community.

People should receive information and advice in a format that is right for them. We saw that information such as support plans, which people wanted to understand, were in an easy read format. The service held service user forums where supported people could share their views about the service and how they would like it to be developed. People had the chance to talk about past events organised by the service, and they could help to decide what activities should take place in the future. We found that some of these forums were not as well attended as hoped. We concluded that the service could explore the reasons for this with a view to promoting inclusion further.

Any treatment or intervention that people experience should be safe and effective. Some people were supported to take their medication. We looked at a sample of medication records. We discovered a few clerical errors, but we established that people were being given the right medication at the right time. We therefore concluded that people were being supported to take their medication safely.

The service kept detailed records of accidents and incidents and had notified the local authority of these. However, the service had not notified the Care Inspectorate of all notifiable events. We discussed this with the manager, who gave an undertaking that the service's practice would change to be in accordance with established procedures for services reporting notifiable events. We are making this an area for improvement (**see area for improvement 1**).

Notwithstanding we found that in all other areas the service worked well to promote people's health and wellbeing. We saw that people were supported to attend medical and other appointments. We heard from one person that she had mobility difficulties. The service supported her to attend an assessment appointment. Following this assessment she was prescribed a walking aid. We heard that with her walking aid she was able to get out more and had greater mobility. Accessing the community was very important to this person, and it was apparent that her health and well-being had benefited significantly. This person was very enthusiastic about the support she received, in general and specifically because she had been supported to maximise her independence.

### Areas for improvement

1. To support people's safety and wellbeing the provider should ensure that they report to the Care Inspectorate all notifiable events.

This is in order to reflect the requirements of the Public Services Reform (Scotland) Act 2010, and The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 and The Social Care and Social Work Improvement Scotland (Applications and Registration) Regulations 2011.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that: 'I benefit from different organisations working together and sharing information about me promptly, where appropriate, and I understand how and why my privacy and confidentiality are respected' (HSCS 4.18).

### How good is our leadership?

### 5 - Very Good

We concluded that the performance of the service in this area demonstrated major strengths in supporting positive outcomes for people and there were very few areas for improvement. Those that did exist had a minimal adverse affect on people's experiences and wellbeing.

We found that the service's leadership team provided strong quality assurance of the service. Staff told us that they were part of a mutually supportive team. We heard that the management team were supportive and in general were approachable. Leaders listened to staff members concerns and where possible sought to address these concerns.

People should have confidence in the staff who support them because they are trained, competent and skilled. We saw that staff receive regular supervision and detailed minutes of these sessions were kept. Supervision looked at staff members casework as well as training and development needs. We saw that staff attended a range of training and there were good completion rates across the team. Staff told us that training was relevant, informative and helped them to improve their practice. Some staff told us that, now that Covid-19 restrictions had been lifted, they would prefer more training to be in person, rather than online. The manager agreed and were seeking ways to address this concern. We found staff and management worked well together and were mutually supportive.

The service was covered by policies and procedures that were held in common with the Health and Social Care Partnership and Perth and Kinross Council. For example, the service followed the Council's social work service adult support and protection policy and its infection prevention and control policy. In addition, there were some policies and procedures which were specific to this service. For example, the service's lone working procedures covered working practices for staff providing support at night. This policy was clear and detailed. It stated where staff could get support and what actions should be taken in the event of an emergency. This helped to keep staff and the people they supported safe.

We looked at the service's complaints procedure. It provided a clear explanation about when a complaint could be made, who could make a complaint, and to whom. We looked at the process of one complaint. We saw that this was investigated thoroughly, by the social work service and a detailed response was given to the complainant.

We found that the service had robust auditing processes. These helped the service's leaders to monitor the quality of the service provided and ensured that people were protected. For example, the service had a clear system in place to support people to manage their money. The system was checked daily and we saw that any errors were discovered swiftly.

There was a detailed service development action plan. This plan identified where improvements to the service were required; what actions were needed to achieve these improvements and who was responsible for driving these actions forward. Progress was mapped and the desired timescale for completion set out.

We concluded that the service had an experienced leadership team. They supported staff well and person-centred values were promoted within the staff group. People supported by the service participated in developing it and robust policies and procedures backed up the support the service provided.

## Complaints

There have been no complaints upheld since the last inspection. Details of any older upheld complaints are published at [www.careinspectorate.com](http://www.careinspectorate.com).

## Detailed evaluations

How well do we support people's wellbeing?	4 - Good
1.1 People experience compassion, dignity and respect	4 - 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

How good is our leadership?	5 - Very Good
2.2 Quality assurance and improvement is led well	5 - Very Good

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