

Inspire Viewfield Housing Support Service

Inspire Ltd
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Type of inspection:
Unannounced

Completed on:
24 May 2024

Service provided by:
Inspire (Partnership Through Life) Ltd

Service provider number:
SP2003000031

Service no:
CS2014323410

About the service

Inspire Viewfield is a service provided by Community Integrated Care. Up to eight adults with a learning disability can be supported in the service, being provided with housing support and care at home. The service is split between two houses, next door to one another, in a quiet residential area in the west end of Aberdeen. Each house has four bedrooms and communal areas which people share.

About the inspection

This was an unannounced inspection which took place between the 21 and 24 May 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 five people using the service and two of their family
- Spoke with staff and management
- Observed practice and daily life
- Reviewed documents
- Spoke with visiting professionals.

Key messages

- People we spoke to were mostly happy with their activities.
- Two people told us that there were some activities that they would like to do, for example going out for a coffee, that they weren't always able to do.
- People we spoke to said they liked the staff and got on with them.
- The manager oversees several services and said they had enough time to support everything.
- The houses were clean and tidy.

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?	5 - Very Good
How good is our leadership?	5 - Very Good
How good is our staff team?	5 - Very Good
How well is our care and support planned?	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?

5 - Very Good

People's wellbeing was supported at a very good level. There were major strengths and few small areas for improvement. The staff knew people well and put a lot of effort into supporting them with their wellbeing.

People were supported with numerous activities, tailored individually to help them achieve their wishes. They were supported at their own pace and staff regularly discussed how things were going and, if necessary, altered how support was given. People told us they enjoyed going out with staff.

The medication that people required to keep them healthy was safely stored, administered and recorded accurately. All medication came from the pharmacy in individual boxes as prescribed for each person. These individual boxes were stored in a larger box for each person and then in a large locked walk-in cupboard. An improvement that we discussed with the manager was to keep each person's own medication in their own bedroom, which would add further individualisation to people's care. This was already being actively considered.

People's cash was also stored individually in the walk-in cupboard. There was a good system and it was well used. As with people's medication, this system would be improved by the finances being held in people's own rooms, and the manager was actively considering how to do this safely.

As well as medication, people's health was supported by regular health checks for prevention and early detection, by a range of multi disciplinary colleagues. We had contact with two colleagues from social work and one from health services who said they were happy with the care and support in this service.

The kitchen had some food which people shared, for example tea bags and margarine. People also had their own food, which they budgeted and shopped for, and this gave them individual choice to select their own meals and snacks. Food was stored appropriately in the fridge or freezer, and was all within use by dates. We advised the manager that it would be good practice to put on dated labels when tubs or jars were opened, so staff could ensure use by instructions were followed, for example 'use within three months of opening.' The manager said they would ensure staff did this with immediate effect.

How good is our leadership?

5 - Very Good

The leadership in the service was very good. There were strong systems in place. The service recently merged with a new provider and was in the process of moving to their systems. During this time of transition the manager was being trained and using the new systems first of all, and the rest of the leadership team and staff were going to be trained and begin using them in the coming weeks.

There was a thorough system for reacting to complaints. This was being followed and it was easy to see the investigation and actions to avoid recurrence. When a complaint was upheld, an apology was written to the complainant which was a good way to show that the service really cared about the complainants views and the people they support.

Accidents and incidents were also recorded on an online system and they were well documented. It was easy to see the follow up to the incidence and they were being appropriately reported to the Care Inspectorate.

A comprehensive checklist was completed by service leaders each month, covering all areas in the service, for example support plans, safety systems, staff support and training, service user engagement. This showed that two of the signatures were missing relating to fire checks, and the manager immediately agreed to ensure all checks were completed. They sent proof of this to us for the next two weeks.

A very good part of the audit and quality assurance system was that both the registered manager and other senior managers completed them. This introduced an element of 'fresh eyes' and impartiality to the checking of quality. Almost every action that was noted for improvement had been completed. The improvement plan kept track of everything and had a simple red, green, amber code for easy identification of what had been achieved and what still needed to be done. One area which was outstanding was the reattachment of a doorbell, which seemed relatively simple to improve and the manager assured us they would do so immediately.

There was an Area for Improvement from the last report (see the section in this report entitled Outstanding Areas for Improvement). This was to ensure all care systems were followed and records were accurate. This improvement had been made in many areas. Because the service was moving to new systems at the time of inspection, we encouraged the manager to be particularly careful with the accuracy as the new systems embedded.

How good is our staff team?

5 - Very Good

The staff arrangements and the way the team worked together were very good. There was a warm atmosphere in the houses, and we heard respectful and friendly conversations between all people.

The training from the new provider was not completed by all staff. However the training was not out of date from the previous provider, so staff were still using their skills and knowledge previously gained. As well as general training in many aspects, the manager had recognised that some specialist development was required, such as for working with people who hoard, and additional Makaton skills. This was being arranged to take place as soon as possible.

The recruitment system was thorough and was being fully utilised, for example, checks were done in relation to criminal convictions, right to work in the UK, length of residency. Comprehensive interviews were undertaken with notes of conversations and decisions.

The right number of staff were available to meet the needs of people and they had time to engage with people and chat with them. This helped everyone to know one another, and to build relationships with them. The rota was altered as required to suit the needs of people, for example if someone needed 1:1 support it would always be available to them. Some people received support from another provider and staff made sure to communicate with them so that the people were able to do all the things they wanted to.

The staff told us that they felt supported by the leadership team, and were confident in their skills and knowledge for their role. Also, the manager told us that they trusted the staff. This was apparent in the easy conversations we heard, and the calm atmosphere in the houses.

How well is our care and support planned?

5 - Very Good

Care and support planning was very good, with people benefitting from dynamic and aspirational planning.

The plans were written from each individual person's perspective. There were clear descriptions about what people could do for themselves and what they needed support with, and this was further described as what was the staff responsibility and what was the person's responsibility. This made it more likely that independence would be promoted as well as care given appropriately.

Risk assessments were used to enable rather than restrict people, and staff were directed how to spend time trying to improve life for people. One example of this was using incremental steps such as practising in a wheelchair up and down the corridor then progressing to go outside in it. There were several illustrations of this in the personal plans.

Multi disciplinary guidance was clearly documented, for example from a speech and language therapist and a psychologist. This made it easier for people to receive the best, individualised care for them.

The part of the plans that dealt with end of life care were particularly personal, and reflected the personality and choices that were evident elsewhere in the plan.

Some of people's goals had been met and it would be good to see new ones being set. We discussed this with the manager who told us that this would be done at the next six monthly review. The six monthly reviews were being held timeously and it was clear to see people's input to the decision making.

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

Requirements

Requirement 1

By 24 February 2023, the provider must ensure they keep people safe, and continuously monitor, record and improve the support.

This is to comply with Regulation 4 (1) A (Welfare of Users) of the The Social care and Social Work Improvement Scotland (requirements for care Services) Regulations 2011 (SSI 2011/210).

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

'I use a service and organisation that are well led and managed' (HSCS 4.23).

This requirement was made on 10 October 2022.

Action taken on previous requirement

See throughout this report for further evidence relating to this requirement.

The care plans and daily notes were up to date. The daily notes were comprehensive and detailed people's emotions as well as tasks and activities.

Accidents, incidents and complaints were appropriately recorded and followed up.

Six month reviews and an active improvement plan support longer term improvements to the support.

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

To support people's health and wellbeing the provider should ensure that all care systems are followed, and records are accurate. These should include; personal plans, finance, medication.

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

'My care and support meets my needs and is right for me' (HSCS 1.19),and

'My needs, as agreed in my personal plan, are fully met, and my wishes and choices are respected' (HSCS 1.23).

This area for improvement was made on 10 October 2022.

Action taken since then

The records we saw were individualised and accurate. Further details about this area for improvement can be read in other parts of this report.

Complaints

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

Detailed evaluations

How well do we support people's wellbeing?	5 - Very Good
1.3 People's health and wellbeing benefits from their care and support	5 - Very Good
How good is our leadership?	5 - Very Good
2.2 Quality assurance and improvement is led well	5 - Very Good
How good is our staff team?	5 - Very Good
3.3 Staffing arrangements are right and staff work well together	5 - Very Good
How well is our care and support planned?	5 - Very Good
5.1 Assessment and personal planning reflects people's outcomes and wishes	5 - Very Good

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