

Braeburn Court Housing Support Service

Braeburn Court
St. Margaret's Hope
Orkney
KW17 2RR

Telephone: 01856 831 501

Type of inspection:
Unannounced

Completed on:
18 July 2024

Service provided by:
Orkney Islands Council

Service provider number:
SP2003001951

Service no:
CS2011303830

About the service

Braeburn Court is a purpose-built facility designed to provide a housing support/care at home support service to older and vulnerable people in their own tenancies. The service is registered to support up to 14 tenants with a one bedroom flat used for respite care. The main building contains offices, staff sleep-in room, a communal social area with kitchen, toilets and some of the tenant accommodation.

The other tenancies are located in semi-detached bungalows facing the central building.

Eligibility is extended to individuals who experience a significant degree of challenge to living independently that requires on-site support services.

At the time of inspection 12 people were receiving support.

About the inspection

This was an unannounced inspection which took place from 15 July 2024 to 18 July 2024. It was carried out by two inspectors from the Care Inspectorate.

Feedback was provided to the management team on 18 July 2024.

To prepare for the inspection we reviewed information about this service. This included previous inspection findings, information submitted by the service and intelligence gathered since the last inspection.

In making our evaluations of the service during the inspection we spoke with:

- Four people using the service within their own homes.
- Three members of staff and the management team.
- One visiting professional.

We also received written feedback from seven people using the service, 13 members of staff and another visiting professional. We observed practice and daily life, reviewed documents including personal plans, quality assurance audits, team meeting minutes, staff supervision records and the service development/ action plan.

Key messages

People were supported by a committed staff team.

Support was flexible, person led and people's individual preferences were pursued.

A multi-disciplinary approach ensured support strategies were appropriate to the individual.

Implementation of an improved quality assurance process was underway to provide enhanced management oversight.

As part of this inspection, we assessed the service's self-evaluation of key areas. The service had begun to use self-evaluation. However, further work is required to develop this approach to support improvement.

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?	4 - Good
How good is our staff team?	4 - Good
How well is our care and support planned?	4 - 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 made an evaluation of good for this key question, as several important strengths, taken together, clearly outweighed areas for improvement. Whilst some improvements were needed, strengths had a positive impact on people's experiences.

Quality Indicator 1.3 People's health and wellbeing benefits from their care and support

The provider had worked hard to stabilise management arrangements following a period of management change. This had impacted positively on people accessing the service and their experiences. People who engaged with the inspection indicated a high level of satisfaction.

Comments included; "staff are very helpful and always treat us with respect" and "it's been great coming here, allowed us to stay together but with a safety net as we were struggling to manage in our own home".

Staff were skilled at understanding and responding to peoples' individual needs. People benefited from positive relationships with a staff team who knew them well. This meant that people felt included, listened to, valued and ensured that the support was based on the needs and wishes of the person.

Staff were clearly committed to supporting agreed outcomes for people. People were seen to be relaxed and comfortable in their own homes.

People were supported to get the most out of life with opportunities to maintain or develop interests and activities that mattered to them. This included attending places of worship, engaging with community resources and spending time with family.

The service offered opportunities to socialise by hosting regular events in the central Hub area. The activities coordinator ensured people also received 1:1 input if they preferred. Peoples' achievements were recognised. This promoted peoples' wellbeing and self-esteem.

It was evident that staff worked effectively with others for the benefit of people who use the service. The service had good links with external health and social work professionals involved in peoples' care, including community nursing, podiatry and occupational therapists/physiotherapists.

People were supported on how best to maximise their own health and wellbeing by accessing appropriate health and community services. Staff understood their role in promoting healthy lifestyle choices. There was evidence of people being supported with prompting/advice on eating and drinking and accessing equipment to maintain independence. Staff responded in a timely manner to concerns about mobility and weight loss and enlisted the support of external professionals such as community dietician and diabetic team. This helped people to keep well and involved in their community.

Medication support was managed well. The management team had worked closely with pharmacy colleagues, had identified where improvements were needed and had initiated appropriate changes in medication processes and recording.

Comments from associated professionals included "the service has worked hard to streamline all medication practices ... resulted in significant improvements and people being supported with medication well".

This helped to ensure people were taking the right medication at the right time.

Individual support arrangements had generally been reviewed and reflected current needs and wishes. However, not all assessments and support plans had been updated following audits. This meant health and wellbeing needs may not have been reviewed/reassessed for some people. To be confident people were receiving the right support for them, the service had committed to addressing this as a matter of priority through improved quality assurance and management oversight plans.

How good is our leadership?

4 - Good

We made an evaluation of good for this key question, as several important strengths, taken together, clearly outweighed areas for improvement. Whilst some improvements were needed, the strengths identified had a significant positive impact on people's experiences.

Quality Indicator 2.2 Quality assurance and improvement is led well

People can expect to use a service that is well led and managed. The service had benefited from a recent period of consistent management and the management team had established a visible presence and good oversight of key areas of service delivery. All people living at the home knew who the manager was, and staff confirmed they were accessible.

People should benefit from a culture of continuous improvement. The management had oversight of key areas of service delivery. This included personal plan audits, accidents/incidents, staff training and supervisions as well as health & safety functions and infection prevention and control (IPC) practices.

This offered assurance that the quality of the service was monitored. The management team planned to implement action plans with timescales to ensure that quality assurance led to meaningful improvements. Some gaps were found in people's personal plans and in reporting procedures. The manager agreed to review and improve the depth of information being evaluated.

A service improvement plan was in place and evidenced progress made across all areas of the service.

The service collated feedback from people using the service, staff and stakeholders. However, it was not clear how this directly informed the service improvement plan and outcomes for individuals who used the service.

The service should demonstrate how feedback informs the service improvement plan and improved outcomes for people.

The service had recently recruited an additional senior member of staff to strengthen the management team and support additional quality assurance and service development work.

How good is our staff team?

4 - Good

We made an evaluation of good for this key question, as several important strengths, taken together, clearly outweighed areas for improvement. Whilst some improvements were needed, the strengths identified had a significant positive impact on people's experiences.

Quality Indicator 3.3 Staffing arrangements are right and staff work well together

Staffing arrangements were determined by regular review of people's support needs with the person themselves and other relevant professionals. Consistent support arrangements were in place. People confirmed that support was rarely affected by staffing issues with most confirming they knew who would be delivering their support.

A contingency plan was in place to address staff absences and senior staff delivered front line support routinely. This offered opportunities to meet with people directly, and to observe and review working practices

The service had recently deployed agency staff. Feedback was positive, and their input benefited people.

Staff confirmed a robust and relevant induction programme ensured they felt equipped and confident in their new role. Team meetings and support and development sessions were prioritised to allow staff opportunities to reflect on practice, share ideas and strategies and discuss their own development. Observations of practice and meaningful feedback was provided by a visible and approachable management team. This ensured staff felt valued, listened to and able to develop skills and knowledge appropriate to their role.

Staffing levels and support arrangements were adjusted according to people's preferences and needs. Increased support visits and additional short-term plans were implemented in response to changing needs such as recovering from a fall and evidenced a person-led approach. This offered people assurance that they could remain in their own home and be supported according to their wishes.

How well is our care and support planned?

4 - Good

We made an evaluation of good for this key question, as several important strengths, taken together, clearly outweighed areas for improvement. Whilst some improvements were needed, the strengths identified had a significant positive impact on people's experiences.

Quality Indicator 5.1 Assessment and personal planning reflects people's outcomes and wishes

People should expect their personal plan to reflect their current needs, wishes and choice.

Detailed information about people's past life, experiences and current preferences guided staff in how to deliver support according to the individual's needs.

Personal plans in general evidenced up to date health assessments, individual support strategies and associated risk assessments. This included short term support plans to respond to changes in people's health needs such as increased support visits following a fall. Families and health professionals were involved as appropriate. This gave assurance that support arrangements were appropriate.

Senior staff had developed an easy read/accessible document for new or agency staff which detailed important information to ensure support was delivered according to what was important to people's health and wellbeing.

Robust handovers and communication tools were in place to further enhance communication and support schedules were being followed.

This helped to ensure people were supported according to current needs and best practice and helped to keep them well.

The service was reviewing how best to audit support planning to ensure consistency across the service as not all plans were being updated following being audited.

The provider planned to implement new procedures with a view to improving and streamlining how support needs were recorded and actioned.

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 ensure that people can engage in meaningful activity the provider should:

- Review the activity provision to ensure tenants have access to activity in line with their preferences and choices.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that: 'I can choose to have an active life and participate in a range of recreational, social, creative, physical and learning activities every day, both indoors and outdoors' (HSCS 1.25).

This area for improvement was made on 3 August 2023.

Action taken since then

The service had recruited an activity coordinator to work with tenants in gathering and evaluating views and preferences of how people would enjoy spending their time.

An improved programme of social events was on offer and people who attended confirmed they enjoyed and benefitted from the experience. This included a garden theme afternoon with home baking, a plants awareness quiz, Orkney traditional music and Cuppa and Cake fundraiser. People from other services attended also which helped people connect with the wider community. 1:1 activities were also on offer depending on people's preferences.

Participation was reviewed monthly, and outcomes were evaluated, with goals being set for the next period accordingly. This ensured opportunities were reflective of people's current preferences and what they enjoyed or benefitted from.

This area for improvement has been met.

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?	4 - Good
1.3 People's health and wellbeing benefits from their care and support	4 - Good
How good is our leadership?	4 - Good
2.2 Quality assurance and improvement is led well	4 - Good
How good is our staff team?	4 - Good
3.3 Staffing arrangements are right and staff work well together	4 - Good
How well is our care and support planned?	4 - Good
5.1 Assessment and personal planning reflects people's outcomes and wishes	4 - Good

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Care Inspectorate
Compass House
11 Riverside Drive
Dundee
DD1 4NY

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