

# PLUS Support Service

Broadleys Road Springkerse Industrial Estate Stirling FK7 7SS

Telephone: 01786 450 086

Type of inspection:

Unannounced

Completed on:

24 September 2024

Service provided by:

PLUS (Forth Valley) Ltd

Service no:

CS2003035186

Service provider number:

SP2003003326



## Inspection report

#### About the service

PLUS (Forth Valley) Ltd is a registered charity originally established by a group of parents which aims to provide better quality of life for children and young people with disabilities and their families, through promotion of social inclusion.

The chief executive officer holds responsibility for strategic direction and promotion of the service, funding and links with governance while the operational manager has responsibility for overseeing the day-to-day operation of the projects and the work of the project managers and coordinators.

PLUS operates from a converted commercial premises in the Stirling area. The building layout is over one floor which has been adapted to ensure accessibility. It offers a spacious environment for activities, benefits from designated sensory spaces and offers ample outdoor space which is regularly utilised. Some activities take place in this building while others happen in the wider community and some support is also provided in people's homes.

## About the inspection

This was an unannounced inspection which took place on 16 September 2024 between 13:30 and 17:30; 17 September 2024 between 08:45 and 18:45 and 18 September 2024 between 09:30 and 15:30. 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 to and observed 10 people using the service and four of their family
- spoke with 12 staff and management
- observed practice in groups
- · reviewed documents
- · spoke with a board member.

## Key messages

- Support was delivered by energetic staff, who understood the importance of providing fun experiences for children and adults.
- Children and adults engaged in activities they enjoyed, which also gave them new experiences and supported them to develop new skills and develop peer relationships.
- The service was highly valued by parents and carers and supported positive outcomes for the wider family network.
- Enhanced training analysis and provision would support people to be fully involved in decisions about their care and support.
- Improvements to the assessment of staffing levels, skills and deployment should be made for all parts of the service.
- Strong leadership ensured a clear vision for the service and there was commitment to involving children, adults, parents and carers in service development.
- Improvements to risk assessment should be made to ensure an individualised and person-centred approach to care and support.

## 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, the strengths identified had a significant positive impact on children and young people's experiences.

Children and families benefitted from supportive care that was warm and encouraging. Most families of people using the service told us that they appreciated their workers because they had developed good relationships with their children and adults and knew them well. They said their children and adults engaged in activities they enjoyed, whilst also giving them new experiences which broadened their world and supported them to develop new skills.

Staff spoke warmly and fondly of the people they supported and were highly nurturing in their approach. Children and adults received compassionate care from a group of motivated and enthusiastic staff. We observed children and young people to be excited to come into the service and to appear relaxed throughout the day.

Staff and parents described people being given choice in most situations, with skilful use of planning to ensure they also enjoyed new experiences. Staff had good knowledge of local resources and events happening in the community which children and adults would enjoy.

The interests and talents of the people using the service were diverse, with staff responding flexibly, planning what they knew young people would both enjoy and also benefit from. There were very good examples of the team appreciating and promoting people's individuality.

Where people had specific health care needs, careful consideration was given to meeting these needs, without creating a barrier to new experiences.

The service helped to support positive outcomes for the families of those being supported. The scheme enabled some parents and carers to work, some to rest, and others to be able to spend time with their other children.

Staff demonstrated a clear understanding of their responsibilities of protecting people from harm, neglect and abuse. Appropriate procedures were in place, all had training, and a senior member of the team was always available, including out of hours.

The service helped to support positive outcomes for the families of those being supported. The scheme enabled some parents and carers to work, some to rest, and others to be able to spend time with their other children.

There were clear processes and agreements to ensure people knew what they could expect from the service, however, we found that some people using the service and families needed improved consistency of staffing and service delivery. The importance of consistency and routine was not always upheld. The time and staffing of support being provided lacked co-ordination and planning. This is reported on more in key question 3.

To support people to be fully involved in decisions about their care and support, staff would benefit from enhanced training provisions namely communication and autism given the high number of people using the service with such a diagnosis. The service should also review staff training expectations and completion to ensure that there are adequate numbers of trained staff to support people at all times. This will form an area for improvement (see area for improvement 1).

#### Areas for improvement

1. To keep people safe, promote wellbeing and support involvement in decisions about their care, the service should provide training to all staff to the level required to provide quality and consistency of care and support. This should include but is not limited to communication tools and autism. A detailed training needs analysis would be supportive of staff development in promoting improved outcomes for young people.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that: 'I have confidence in people because they are trained, competent and skilled, are able to reflect on their practice and follow their professional and organisational codes' (HSCS 3.14); and 'I experience high quality care and support based on relevant evidence, quidance and best practice' (HSCS 4.11).

#### 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 children and young people's experiences.

The senior leadership team has been subject to significant change over the last year. A stable leadership team is now in place. Leaders had a clear vision for the service which was helping to drive service development and high-quality care and support for people using the service. We were pleased to see the service making use of the Care Inspectorate self-evaluation tools and trust that these will inform future service improvements.

There were comprehensive quality assurance processes in place. Managers had been at the forefront of establishing quality assurance systems. Staff had been involved in reviews of policies and procedures and had been supported to share their feedback on service development. This supports greater ownership of the identified improvements.

Some young people were involved in the recruitment of staff which helped them to feel empowered, and this ensured they were a key part of service development.

Care and support were reviewed to ensure the best possible outcomes for people using the service. Involvement from families in wider service improvement could be further developed as families felt well informed about their child's care, but some felt there could be greater opportunity to shape future service improvement and delivery. The service was committed to using the views of service users and stakeholders to shape service development.

Managers work closely with the board of the service and a number of steering groups are influencing the development of the service.

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There had been a few complaints made to the service over the last year. Some of the families we spoke to voiced a lack of confidence that they could raise any concerns and a lack of trust that their views would be valued and listened to. The service would benefit from improved communication when complaints are made and at all levels which may mitigate against concerns escalating to a formal basis. This was different from our findings last year in which families were telling us that they felt able to approach the service. This may be due to the changes of senior management, however, it is worthy of further consideration.

During inspection there were a number of incidents and accidents which should of and had not been notified to the Care Inspectorate. We are confident that the service has taken on board the changes needed and we have seen evidence of this already taking place with some of the notifications submitted in recent days.

The service will need time for the new management structure to settle and the embedding of quality assurance systems in order to provide robust quality assurance and self-evaluation.

The service improvement plan could be enhanced. Following this inspection the service should use these findings and those from their own self-evaluation to create a comprehensive, SMART (specific, measurable, achievable, realistic and time-bound) development plan which will drive improvements, and which is aspirational for the service moving forward.

#### 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 children and young people's experiences.

The referral process ensured that leaders in the service had the right information to ensure young people were supported by people who could meet their needs.

Staff skills were considered when planning sessions and allocating staff to people. There was a consideration of skills and relationships which enhanced positive outcomes in the group setting. Staff planned their time well to ensure young people had a positive experience.

Care and support planning ensures the matching of identified need to staff member skills and is enhanced by risk assessments. These are used to maximise positive experiences as well as ensure safety and wellbeing of young people accessing support from the service.

Feedback from parents and people using the service highlighted some concerns about poor communication from coordinators about the staff providing the service. We were told that, at times, important information was not shared or passed on accurately, leading to a negative impact on people.

Poor communication means that information often gets lost or is not shared appropriately at the right time. Changes to staffing were, at times, relayed by text at very short notice, leading to upset and anxiety for both families and the person receiving the support.

A lack of consistency and stability in how care and support is provided, limits people's ability to build trusting relationships with staff.

We have discussed these issues with managers and have asked them to conduct a review of how the different aspects of the service are managed and how staffing allocations are arranged. This will form an area for improvement (see area for improvement 1).

#### Areas for improvement

1. To ensure that the safety and wellbeing of children and adults, care should be provided by the right number of staff who have the appropriate levels of knowledge and skill to meet their needs. This should include but is not limited to a review of how different parts of the service are managed and establishing a coherent system for assessing the staffing levels, skills and deployment that are required in all parts of the service.

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 is consistent and stable because people work together well' (HSCS 3.19).

### 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 children and young people's experiences.

People were benefiting from support plans which have been reviewed. The quality of information held within people's files about their health and support needs was good. Personal plans were informed by the key people involved in the young person's life. Desired outcomes are identified at an early stage through direct consultation with the young person and their parent/carer(s). This means that young people and those who know them best are meaningfully involved in shaping and directing planning for the provision of support.

We heard of the service's ambition to review plans every six months and management tracking of these will support this further.

The service would benefit from consideration of how plans could be further developed to allow these to be more user friendly and so that copies of the plans and be provided to families and how they can better capture the views of people using the service and how the recording of personal plans reflects these wishes.

Staff attended key meetings for people who use the service. These offered valuable opportunities to gather information from a range of involved professionals and agencies. This supported broader planning and outcomes focussed assessment for young people and families.

Staff were clear of the plan for children and adult's care and support, and many staff knew people's individual goals and ambitions. Detailed outcomes completed after each session helped to provide an overview of support and celebrate success and achievement for children and young people.

Outcomes for individual people were well written and positively framed, however, we asked the service to consider how they embedded an approach to ensure that staff are aware of incidents/accidents/allegations which could inform future care planning and support sessions.

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Staff had a strong understanding of risks to the children and adults being supported. Detailed health information contained within files helped to ensure evidence-based strategies were used to promote wellbeing and reduce risk. Some children and adults had an individualised risk assessment to help keep them safe. This approach was inconsistent. The service would benefit from having an individualised risk assessment for all young people using the service. This will form an area for improvement (see area for improvement 1).

#### Areas for improvement

1. To further support children and adults and ensure a consistent approach to risk management, the service should develop an individualised risk assessment for each child and young person.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS), which state that: 'I am supported and cared for sensitively by people who anticipate issues and are aware of and plan for any known vulnerability or frailty' (HSCS 3.18).

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

## Requirements

#### Requirement 1

By 22 September 2023 the provider must ensure the safety and wellbeing of people using the service. To do this the provider must, as a minimum.

- Ensure that the CEO, management team and delegated Child and Adult Protection Officer have a sound knowledge of child and adult protection processes, procedures and responsibilities. With particular attention to:
- The importance of taking immediate action following a child or adult protection concern.
- Liaising with lead professions (Police and Social Work).
- Understand the responsibilities of lead professionals in relation to interviewing and decision making.
- Ensuring that there is a process of debrief and support for staff in relation to child and adult protection matters.

This is to comply with Regulation 4(1)(a) (welfare of users) of 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 am protected from harm, neglect, abuse, bullying, and exploitation by people who have a clear understanding of their responsibilities.' HSCS 3.20

This requirement was made on 26 July 2023.

#### Action taken on previous requirement

The service met the Improvement Notice in April 2024. In meeting this, we are confident that the service have met this requirement. During inspection, we continued to be assured that the safety and wellbeing of people using the service was being ensured through the robust understanding and application of safeguarding responsibilities.

Met - outwith 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 improve young people's care and support experience following events of concern, the service should ensure that a process of debriefing is in place for young people and staff to promote opportunities to reflect on practice and contribute to up to date plans for young people.

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 26 July 2023.

#### Action taken since then

During inspection we reviewed debriefs for staff and were assured that these were taking place in line with the service's policy and procedure and were allowing the staff a space for reflection and learning.

## 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
1.2 People get the most out of life	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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