

Real Life Options Dunfermline Services Housing Support Service

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Type of inspection:
Announced (short notice)

Completed on:
5 December 2024

Service provided by:
Real Life Options

Service provider number:
SP2003001558

Service no:
CS2004073161

About the service

Real Life Options Dunfermline Services provides a housing support and care at home service for adults with learning disabilities, physical disabilities and/or mental health support needs in their own homes in West Fife.

People lived in their own homes with staff support or were supported in small houses of multiple occupancy.

At the time of the inspection the service was providing support to 18 people who received support for up to 24 hours per day.

About the inspection

This was a short notice announced inspection which took place on 26 and 27 November. The inspection was carried out by two inspectors 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 and six of their relatives
- spoke with nine staff and management
- observed practice and daily life
- reviewed documents
- spoke with visiting professionals

Key messages

People benefited from consistent support from small staff teams

Staff were well supported by managers

Staff had access to a good range of learning and development opportunities

Reviews and personal plans could better represent people's views

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
How good is our staff team?	5 - Very 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 evaluated this key question as 'good' where there were a number of important strengths which clearly outweighed areas for improvement.

People's health benefitted from access to community healthcare and treatment. People we spoke to told us 'they are quick to notice changes' and make prompt referrals to and seek relevant guidance from other professionals. This helped to ensure that people were receiving the right care and support at the right time to maintain and improve their health and wellbeing.

Positive Behavioural Support plans had been developed with some people. These were in varying formats and most provided very good personalised detail about behaviours, what it means for the person and how that then influences the support they require. Staff recordings demonstrated their knowledge of plans and how these were used to help improve outcomes for people on a daily basis.

People enjoyed a wide range of opportunities and activities. Whilst these were great fun, activities also had an impact on people's physical and emotional wellbeing. People enjoyed swimming, football, cinema, shopping and holidays. Staff knew people well and actively looked for activities and opportunities people would enjoy. People were supported to use community resources and public transport which helped to expand people's social experience and networks.

Staff recognised the importance of structure and predictability for some people and balanced activity with quieter times when people could relax. There was good detail within care plans that helped staff to interpret/understand when and what people wanted and what they needed.

People were supported to eat healthy meals and maintain good fluid intake. People's likes and dislikes were known and menus created around these. Menus were however just a plan and people could choose alternatives if they felt like it on the day. People's weight was monitored and staff were aware of any dietary requirements. People were supported to maintain a healthy, balanced diet which they enjoyed.

In addition, where people lived with others, they could choose to eat together or in a quieter space within the house.

Staff understood the importance of relationships for people's wellbeing and contact with families and friends was promoted. It was positive to hear about people being supported to re-establish relationships with family members where these had not been strong in the past and the benefit of doing so.

Whilst people told us they were involved and consulted about their care and support, we could not evidence how staff were doing this. There was a good range of person-centred approaches to support people to communicate. However, there was little evidence of people's voices in review minutes and key worker meetings. As a result, we made an area for improvement (**see key question 5, area for improvement 1**).

The service had safe and effective arrangements in place to support people with their finances. The service had adapted practices on an individual basis, recognising individual strengths and prompting independence where possible. We found clear audit processes in place. As a result, people could be confident their money was being safeguarded.

One support plan we looked at described practice around medication administration that was not reflective of best practice and presented a risk of medication errors occurring. We acknowledge the explanation provided and the action taken to address this. However, the providers own internal quality assurance should have recognised the risks presented and taken corrective action. The manager should review medication practice and guidance across the service to ensure that there is consistently safe practice adopted in relation to medication management and administration. As a result, we made an area for improvement (**see area for improvement 1**).

Areas for improvement

1. To support people's wellbeing, the provider should ensure staff follow safe medication practices at all times.

This is to ensure that care and support is consistent with the Health and Social Care Standards which state that: 'Any treatment or intervention that I experience is safe and effective' (HSCS 1.24) and 'My personal plan (sometimes referred to as a care plan) is right for me because it sets out how my needs will be met, as well as my wishes and choices.' (HSCS 1.15).

How good is our leadership?

5 - Very Good

We evaluated this key question as 'very good' where there were major strengths in supporting positive outcomes for people.

Managers were visible and people and their relatives knew who managers were. Manager visibility was being well supported with regular and planned visits to services. Feedback from external professionals was that managers were receptive to feedback and committed to ongoing improvement. One professional stated they 'feel very valued as a service by RLO and I find they are very approachable, open and easy to work with'.

There were clear systems in place to audit various key aspects of service delivery. Staff undertook audits, appropriate to their job role. These audits were further audited periodically by managers. Where audits identified actions were required, these were included in the service improvement plan. This was updated regularly and included when actions had been completed. As a result, people could be confident practice was being monitored.

There was a clear system in place to induct staff, as well as to support ongoing development. Staff were being encouraged to reflect upon practice and consider training and development needs. We found evidence of managers supporting staff during both personal and professional challenges. Staff told us they felt very well supported by the management team. As a result, people could be confident staff wellbeing was a priority.

Team meetings were taking place regularly. Meetings were planned and dates accessible to staff. Information about the organisation, as well as information relating to the specific service was shared. There was evidence of managers supporting group reflection and promoting consistency across the staff team.

Managers had effectively used forums including team meetings, individual meetings and observations of practice to identify and address areas for improvement. Managers have implemented new staff roles, to promote quality and provide leadership in identified areas of the service. Whilst this development is in the early stages, managers continue to promote best practice across the whole service and staff team. As a result people could be confident the service was striving for ongoing improvement.

There was a clear record of accidents and incidents. Individual records included consideration of how to reduce the risk of reoccurrence, or minimise the risk of any future harm where possible. We found a comprehensive trend analysis of these for the past year. People could be confident the service took steps to learn from accidents and incidents.

How good is our staff team?**5 - Very Good**

We evaluated this key question as 'very good' where there were major strengths in supporting positive outcomes for people.

People could be confident staff were recruited safely and did not start work until appropriate checks were in place.

We found evidence of a clear system to induct staff into the service and build knowledge and relationships with the people they were supporting. Staff told us they felt they worked well as part of teams and were well trained and inducted. Staff compliance with training was good. During conversations with staff, they demonstrated a recognition of the importance of training and keeping up to date with best practice guidance. People could be confident staff were well trained.

The service had introduced additional person specific training since the last inspection. Training was provided to staff dependant on the specific support needs of the people they were working with. Managers and staff recognised the importance of reviewing training, its content and delivery to ensure best practice, which is driving by the care and support needs of the people using the service. The service have recently introduced a new online learning platform. Managers were able to share the training staff were being asked to undertake to support ongoing learning and development. Furthermore, the service had been awarded their autism accreditation award, recognising them as specialists in supporting people who experience autism. People could feel confident staff and managers recognised the importance of ongoing learning and development to ensure consistent best practice.

Staff were of the view most people benefited from small staff teams and experienced consistent care and support. Whilst we recognised some people using the service benefitted from an exceptionally small and consistent staff team, this was not everyone's experience. The service had taken steps to address staff turnover in areas of the service which had been affected. The service demonstrated a proactive approach to supporting staff morale and providing opportunities for development.

All staff demonstrated positive values and spoke about the people they supported with warmth and compassion. We observed people being supported with patience and kindness. During our observations some staff demonstrated they were particularly knowledgeable about the people they were supporting and highly skilled in responding sensitively. It was clear some staff and people shared experiences and genuinely enjoyed spending time in each other's company. Staff used comments including 'a pleasure to work with' and 'like family'. People benefitted from close bonds with staff who cared for them.

How well is our care and support planned?

4 - Good

We evaluated this key question as 'good' where there were a number of important strengths which clearly outweighed areas for improvement.

People were supported by a staff team who knew them well. Comprehensive support plans included detailed information that helped staff to provide the care and support that people needed and wanted. Plans were strength led and there was a focus on supporting people to remain independent as far as they were able to be.

Some people were not able to fully express their views and preferences and needed support to make decisions. We saw that legal documentation such as guardianship orders and welfare checklists were available for reference. We spoke to guardians who told us they had confidence in the staff and management team who kept them well informed. This helped to ensure that peoples rights were being respected and protected.

Reviews took place regularly however it was not always clear how the review discussions linked to the care plan. Personal plans must be reviewed at least every 6 months. Review minutes did not reflect that the person and/or their legal representatives had been involved or how their views and experiences had influenced decisions. When we spoke to guardians they told us they were fully involved and regularly consulted however minutes of review meetings did not reflect this involvement or their views. This presents a risk that peoples views are not fully taken into consideration when shaping peoples care and support. As a result, we made an area for improvement (**see area for improvement 1**).

Areas for improvement

1. In order to ensure that peoples views influence their care and support, the manager should ensure that minutes of review meetings reflect how the person and their legal representatives have been consulted and involved in discussions.

This is to ensure care and support is consistent with the Health and Social Care Standards (HSCS) which state; 'My views will always be sought and my choices respected, including when I have reduced capacity to fully make my own decisions.' (HSCS 2.11) and **'If I am unable to make my own decisions at any time, the views of those who know my wishes, such as my carer, independent advocate, formal or informal representative, are sought and taken into account.'** (HSCS 2.12)

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

In order to ensure the health, safety, and wellbeing of people using the service, the provider should develop, implement and regularly review person-centred support plans that accurately reflect people's current care and support needs. This should prioritise autism and epilepsy.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which states that: '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 21 November 2022.

Action taken since then

The provider had developed person centred support plans since the last inspection. We found a good level of detail about people's current care and support needs in the plans we sampled. The service had focused on support plans associated with autism since the last inspection and had gained their autism accreditation award, recognising them as experts in supporting people experiencing autism.

The service should continue to regularly review and update personal plans to reflect the current care and support needs of individuals. This area for improvement was met.

Previous area for improvement 2

In order to ensure people can make choices, decisions, and exercise their human rights, the provider should develop systems and processes to support people to take positive, life-enhancing risks.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which states that: 'I make informed choices and decisions about the risks I take in my daily life and am encouraged to take positive risks which enhance the quality of my life.' (HSCS 2.24).

This area for improvement was made on 21 November 2022.

Action taken since then

Support plans and risk assessments described a range of opportunities and activities that people had expressed an interest in. Daily logs described a wide range of access to local communities, clubs and events. Restrictive practices were considered and minimised and people were encouraged to maintain and improve their independence within their home as well as the local community.

As a result this area for improvement was met.

Previous area for improvement 3

In order to protect the health, safety and wellbeing of people using the service, the provider should develop and implement systems and processes to evaluate staffs' understanding and ability to transfer their learning into practice. Training undertaken by staff should enable staff to meet people's care and support needs in

person-centred ways.

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

This area for improvement was made on 21 November 2022.

Action taken since then

The provider had developed a clear process for induction of new staff which included shadow shifts and a mixture of online and in person training. Staff were supported via regular supervision sessions, and observations of practice. We found good examples of staff being supported to reflect upon practice in various ways. Information was regularly shared at team meetings to support development across the staff team.

The service recently implemented new staff supervisory roles to support oversight of staff practice and development. People could be confident the provider was working towards supporting staff development and monitoring and improving practice.

As a result this area for improvement was 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?	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?	4 - Good
5.1 Assessment and personal planning reflects people's outcomes and wishes	4 - Good

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