

Affinity Trust - Aberdeen Housing Support Service

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Type of inspection:
Announced (short notice)

Completed on:
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Service provided by:
Affinity Trust

Service provider number:
SP2011011384

Service no:
CS2020380013

About the service

Affinity Trust - Aberdeen work in Aberdeen city and Aberdeenshire. They support adults with housing support, care at home and support services in their own homes. At the time of the inspection, Affinity supported 36 people.

About the inspection

This was a short notice announced inspection which took place on 4 October, 6 October, 7 October and 11 October 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 11 people using the service and four of their family and friends
- spoke with 12 staff and management
- spoke with six professionals
- had contact with 62 staff members through the Care Inspectorate survey
- observed practice and daily life
- reviewed documents.

Key messages

Quality assurance processes and systems improved outcomes for people.

People were included in planning and arranging their care, which put them at the centre of their support.

People were being treated with dignity and respect, which increased their self-worth.

The service needed to improve communication with some people, to reduce any potential anxiety.

The service needed to continue auditing and monitoring medication errors, so everyone can receive their medication as prescribed.

The service needed to improve communication with some staff and professionals, to support further improvements in people's support.

The service needed to improve the quality of some people's personal plans, to support further improvements in people's outcomes.

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?	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.

Relationships between staff and people were mainly positive. Staff were observed talking and interacting well with people. We heard friendly exchanges and people were relaxed around staff. Someone told us, "People haven't always been kind to me in my life, so it really means something that they're so nice. They've never made me feel anything other than welcome". This meant most people felt respected, which resulted in increased self-worth. However, in one part of the service, some staff discussed people's support with them in a way which could cause them worry. Staff should be mindful their conversations with people are respectful and that communication is supportive of people's needs and well-being. **(See Area for improvement 1)**

People were supported to manage any potential distress. Staff helped people make plans around managing stress and anxiety. Someone told us, "If I feel like I'm getting annoyed, I know to pick up the phone and call a staff member. Before I would just let it take over, but I can call them, and they will talk me through how I am feeling. I feel better after that". This meant people were better equipped to manage any potential stress. Furthermore, personal plans evidenced links with other professionals such as, psychiatrists, nurses, social workers and GPs. This contributed to a collaborative approach to support, which reduced the likelihood of people becoming distressed.

People were getting the most out of their days. Staff supported some people to set goals and make plans towards them. Someone told us, "They helped me to apply for my volunteering job. I didn't think I could do it before" whilst someone else said, "They've helped me to get back into the church, and that's a really important part of my life now". Some people's support was reduced over time. For example, someone said, "I go to college now on my own. For a while they had to help me on the bus and go in with me but I manage to do it all on my own now. They helped me to feel confident enough to do it". This showed the service was supporting people to be independent. As a result, people had increased confidence and felt good about themselves. (See 'What the service has done to meet any areas for improvement made at or since the last inspection')

People were supported to look their best. People who could remain independent, were encouraged to do so. Someone told us, "They talk about washing with me sometimes, and it helps me to remember to shower". This evidenced an enabling approach. People who required help to wash and dress were provided with this. People were positive about this support and said staff were gentle in their approach. As a result, people felt good, which could result in increased self-esteem.

People were supported to move and walk safely. Staff were trained in moving and handling and had good knowledge of best practice. People felt secure being assisted to move. Someone told us, "They do it so well that it does not bother me", when describing being helped to move with a hoist. This showed that people felt comfortable and secure. Furthermore, falls were being tracked, recorded and analysed by management. As a result, falls had reduced, which made people safer.

People were supported to take their medication. Staff were trained to assist and most were aware of recording processes. However, medication errors occasionally occurred. Some staff discussed feeling nervous about medication, whilst others felt more training in the workplace was needed. The provider was working on improving errors and had developed an action plan. This included, spot-checking staff and discussing medication protocols at team meetings. The service should continue their improvement work around this. This will support people to take their medication as prescribed, which will improve health and wellbeing. **(See Area for improvement 2)**

Areas for improvement

1. To support people's mental health and wellbeing and improve the quality of people's support, the provider should improve how they communicate with all people to reduce the likelihood of any potential stress or anxiety.

This should include but not be limited to, making sure that communication is person-centred, supportive and mindful of people's individual needs.

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

'I experience people speaking and listening to me in a way that is courteous and respectful, with my care and support being the main focus of people's attention' (HSCS 3.1).

2. To support people's health and wellbeing and improve the quality of their care, the provider should improve how they support people to take their medication to reduce medication errors.

This should include but not be limited to, continuing auditing and action planning to support further reduction in medication errors and supporting all people to take their medication as prescribed.

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

'I benefit from a culture of continuous improvement, with the organisation having robust and transparent quality assurance processes' (HSCS 4.19).

How good is our leadership?

5 - Very Good

We found significant strengths in aspects of the service provided and how these supported positive outcomes for people. We therefore evaluated this key question as very good.

An established management team was in place. A staff member told us, "They have made things so much better here. I get help whenever I need it now and things run much more smoothly since they were here" whilst a professional said, "everything they've said they will do they have done, and that's because their management structure now works. They check that things are being done properly". This showed faith in the management team to improve the service for people.

Detailed service improvement plans were in place. Actions had been developed and any outcomes were noted. This showed plans were being used to evaluate improvements. The views of people and staff were gathered to support positive changes. People felt included because of this. Furthermore, people were positive about recent changes. A visiting professional told us, "They worked hard to improve the service and ensure it meets the residents' needs. They have enhanced both the outcomes and the operation of the service" whilst a family member said, "There have been some changes made recently, they've come from high up and all have been to the benefit of my relatives". This showed the provider had worked hard to improve people's support.

Quality assurance processes supported improved practice and support. Senior management and management were involved in audits. This provided good oversight and supported a culture of continuous improvement. Monitoring systems were in place for various things, including support plans and medication. Management used audits to develop the service improvement plan and any actions were either in hand or completed. We concluded the provider efficiently monitored and lead the service, resulting in improved support for people.

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.

Staffing levels met people's needs. Where improvements were needed, management had worked hard to sustain a stable team. People knew staff and had formed good relationships with them. Due to this, people were satisfied with their care and support. (See 'What the service has done to meet any areas for improvement made at or since the last inspection') To ensure continued stability and consistency, we will follow this up again at future inspections.

Staff were mainly viewed positively. Someone told us, "The staff are all the best; I like all of them" whilst a visiting professional told us, "Staff are personable and friendly when you meet them. Clients within the building have high opinions of all the staff on site". This showed staff had formed good relationships with people. People's satisfaction with their support was therefore improved.

Staff generally communicated well with each other. Daily handovers took place, staff talked to each other during their shifts and updates were added to the electronic system. This meant staff had up-to-date information. Support was therefore consistent with people's current needs, which improved the quality of care. However, communication between management and some staff and professionals could be improved. Some professionals found the communication process easy, whilst others discussed getting no response. We also found management were more responsive to some staff than others. This could mean some staff and professionals are unsure of things, which could negatively impact upon people's outcomes. The provider should effectively communicate with all staff and professionals. This will help to improve the quality of all people's support, through care being further co-ordinated. **(See Area for improvement 1)**

Staff were mainly positive about working for Affinity. Most staff felt supported by their managers. Staff were positive about their induction and felt it equipped them for their roles. Most staff spoke about regular supervision with their managers. This provided time to reflect. However, some staff said one-to-one time with their manager was limited. The provider should supervise all staff regularly. We discussed this with management who was responsive and then arranged supportive one-to-one time for the team. We will follow this up at future inspections. Team meetings took place regularly and provided an opportunity for shared learning. This showed the service was keen to develop through shared experiences and knowledge. This could further improve outcomes for people.

Staff were trained to support people. Management oversaw training and were committed to ensuring staff were equipped to support people. This meant people were safer and that care was improved. (See 'What the service has done to meet any areas for improvement made at or since the last inspection')

Areas for improvement

1. To support people's health and wellbeing and improve the quality of their support, the provider should improve how they communicate with all staff and any relevant professionals.

This should include but not be limited to, making sure any staff questions or queries relating to people are answered in a timely manner and making sure any professional questions or queries relating to people are answered in a timely manner.

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.

Personal plans were in place for each person using the service. Plans included details of best ways to support in relevant things including, medication, eating and drinking, socialising and personal hygiene. Plans indicated preferred methods of support and how people liked to spend their time. For example, someone's plan said they liked people looking directly at them when they were talking to them, whilst another said they liked to be supported to play bingo. This evidenced personal touches to the planning process. However, across the whole service, some plans were better quality than others. The management team had a plan in place to develop people's personal plans. They assured us they would improve the overall quality of support planning for the service. This will help people to receive the best possible care and support. **(See Area for improvement 1)**

Daily notes evidenced the support people had each day. Some notes were detailed and clearly evidenced support. However, other notes were not of the same high quality and could be improved upon. The provider should develop this area of practice with all staff. This could improve people's outcomes and support. **(See Area for improvement 1)**

People and their families were involved in planning and reviewing their support. Someone told us, "They have meetings about my care all the time and I'm always there to say what I need to say". Those with legal powers were also being included. A legal guardian told us, "Yes, I am always involved in the planning and reviews". Plans were therefore based around people and their representatives' current thoughts and wishes. This supported people to receive person-centred support that felt right for them.

Areas for improvement

1. To support people's health and wellbeing and improve the quality of their support, the provider should improve the quality of all documentation and care planning so that it is all completed to the same high standard.

This should include but not be limited to, consistently good quality of daily recordings, personal plans and any other recordings related to people's care and support.

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

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

'I am fully involved in developing and reviewing my personal plan, which is always available to me' (HSCS 2.17).

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 service user 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, the service should; ensure where applicable, detailed support plans are developed to ensure structured activities are communicated to support workers and consistently promoted.

This is in order to comply with: Health and Social Care Standard 1.15: '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'.

This area for improvement was made on 8 August 2023.

Action taken since then

People had purpose and meaning in their days. (See 'How well do we support people's wellbeing?') Furthermore, where improvements were needed, we saw evidence people's lives were more fulfilling. For example, people were observed being supported to play indoor bowling. People were laughing and having fun, and everyone joined in. People's mental health and well-being was improved because of this. People who needed it had activity planners in place. Personal plans evidenced things people like to do and things that were meaningful to them. Staff were aware of what people enjoyed and actively supported them to participate. A visiting professional told us, "We've seen much better activity planning for the residents in recent months. It really is so much better now". This evidenced improvements, which had contributed positively to people's lives.

This area for improvement has been met.

Previous area for improvement 2

In order to ensure the service user experiences a consistent and stable staff team who are familiar with their needs the service should; continue to establish a stable and consistent team of appropriately suitable and experienced support workers.

This is in order to comply with: Health and Social Care Standard 3.19: 'My care and support is consistent and stable because people work together well'.

This area for improvement was made on 8 August 2024.

Action taken since then

Staffing levels met people's needs. Management regularly assessed people's support, to ensure arrangements were sufficient. New staff were always on shift with more experienced colleagues. Staff were visible and did not appear rushed. Someone told us, "They are always here for me when I need them". This showed that staff had time for people. People had faith in the staff team because of this.

Staffing arrangements had improved. Staff turnover had decreased. Where improvements were needed, people, their families and visiting professionals told us the staff team was now more consistent. This showed improved stability, resulting in more stable support. This was benefitting people who had gotten to know staff, resulting in improved relationships and outcomes.

This area for improvement has been met.

Previous area for improvement 3

In order to ensure the service user and his Welfare Guardians have confidence in staff because they are trained, competent and skilled, are able to reflect on their practice and follow their professional and organisational codes, the service should; make improvements to the provision of training appropriate to the service user's specific care and support needs. The service should also ensure that staff have received training prior to providing direct care and support to the service user and ensure all training is evaluated.

This is in order to comply with: Health and Social Care Standard 3.14: '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'.

This area for improvement was made on 8 August 2023.

Action taken since then

Staff were trained to support people. Training was a mixture of online and face-to-face. Management kept track of people's training needs to ensure they were up-to-date. Staff were positive about training, with the majority saying it was informative and helpful. Staff were knowledgeable in various things including, adult support and protection and moving and handling procedures. This contributed to the good quality of care being provided. Furthermore, management regularly checked staff practice to ensure staff had the right skills. Management had spent extra time with staff where improvements had previously been identified. People were safer and their care had improved because of this.

This area for improvement has been met.

Complaints

Please see Care Inspectorate website (www.careinspectorate.com) for details of complaints about the service which have been upheld.

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?	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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