

# South East Hub Services Housing Support Service

South East Locality South Neighbourhood Office 40 Captains Road Edinburgh EH17 8QF

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Type of inspection:

Unannounced

Completed on:

21 November 2024

Service provided by:

City of Edinburgh Council

Service provider number:

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#### About the service

South East Hub Services is a combined housing support and care at home service based at Captains Road and provides support to people living in the south east areas of Edinburgh.

The service had a focus on short term interventions aimed at supporting people being discharged from hospital to maximise their level of functioning and become more confident, independent and resilient.

Care Co-ordinators, Organisers, Social Care Workers and Assistants work alongside Physiotherapists, Occupational Therapists and Community Therapy Assistants to achieve appropriate goals and positive outcomes for people.

Progress is monitored and reviewed with people over a six week period prior to transferring their package of care from a rehabilitation service to a mainstream support service or other resource, if required.

## About the inspection

This was an unannounced inspection which took place on 15, 18, 19 and 20 November 2024. The inspection was carried out by two inspector's 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
- intelligence gathered since the last inspection.

In making our evaluations of the service we:

- received feedback from 10 people using the service and their family members
- · received feedback from 18 staff and management
- · observed practice and daily life
- · reviewed documents
- received feedback from visiting professionals.

## Key messages

- People experienced compassionate, dignified care and support.
- People's health and wellbeing benefitted from a trained, skilled, competent staff team who were sensitive to people's changing needs.
- People benefitted from staffing arrangements that were right for them and staff worked well together.
- The service worked within a culture of continuous improvement.
- Care plans were regularly reviewed but further detail was required to ensure consistently safe and effective approaches.
- The service was working towards improvements to goal setting and evidencing progress.

## 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

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 people's experiences.

People valued the care and support they received from the service. People told us their staff treated them with dignity, compassion and respect. Some comments included, "all the carers are so caring and are all really good" and "I didn't want to accept care as I felt it removed my dignity and self-worth, however they have been amazing, it's no bother to them, they're really friendly. The support I receive allows me to get on with the things that are important to me. I can't thank them enough". We observed staff supporting individuals and found their approach to be professional, kind, encouraging and respectful. This meant that people were encouraged to get the most out of life because the staff who supported them had an enabling attitude and believed in their potential.

People received care and support that was flexible and promoted their health and wellbeing. Staff were vigilant to any changes in people's health or wellbeing and sought appropriate professional healthcare support. We heard positive feedback from involved professionals who made comments including "the team works at an exceptional level to support well being" and "The social care workers are extremely person centred providing a service that listens to people's goals and enables them to try to achieve them". We sampled records that detailed contact with external professionals and found them to be complete and clear. People who received support with medication were well supported. We sampled medication records and observed staff practice and noted safe and effective support with medication in accordance with good practice guidance. This meant that any treatment or interventions a person experienced through the service was safe and effective.

People had care plans in place that had been reviewed within the last six months. The care plans were easy to follow and reference. There was varying quality between the care plans we sampled, some had more detail than others. We noted that there were a number of examples where there was insufficient detail around how a person needed their support to be carried out in accordance with their preferences, likes and dislikes. People mostly had stable and consistent staff teams, which meant that people were not routinely adversely affected by the lack of detail in care plans, however we did receive feedback that people could become frustrated at having to repeat their needs and preferences to newer staff. All staff should have access to robust and clear information in care plans to promote a consistent, safe approach. We discussed this evidence with the service, who agreed further detail was required and were keen to develop. We noted that these areas formed part of the outstanding area for improvement from the last inspection, therefore the area for improvement has been re-stated (see area for improvement one). This meant that staff did not always have access to the necessary information and resources required to ensure people experience high quality care and support.

The service was designed as a re-ablement model which focussed on supporting people to regain skills and independence. People received clear information at the start of the service, detailing the support to be provided, timescales and contact information. People told us of the achievements they had made in their lives and attributed them to the support they had received from South East Hub Services. There were sections within care plans that detailed goals and progress towards them, however we found many examples where the goals were vague and/or there was little information around progress made. There was information available elsewhere, evidencing that goals discussions were happening, however this

information needed to be collated into the care plan so it was readily accessible to people and staff. We were pleased with the progress the provider was making with the re-ablement training and procedures that were about to be rolled out, however this was not yet in place. Staff daily notes were also of varying quality. We discussed some examples with the service where there was insufficient detail regarding the person, their support and presentation. Making improvements in this area would also improve evidence of progress/achievement of goals. Goal setting and monitoring also formed part of the outstanding area for improvement from the last inspection, therefore the area for improvement has been re-stated (see area for improvement one).

There were a number of important strengths identified during the inspection that evidenced that people's health and wellbeing benefitted from their care and support, however inconsistent quality of detail in people's care plans, goals and staff notes meant that people's wishes, choices and achievements were not consistently highlighted.

#### Areas for improvement

1. The service should ensure that all support plans have clear achievable goals for people being supported and contain detailed guidelines for staff to follow which are reviewed and updated regularly and accurately.

The service should develop those staff reviewing support plans on the quality of detail required when undertaking a review.

Health and Social Care Standards - My Life, My Support.

- 1:19 My care and support meets my needs and is right for me.
- 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.
- 4.11 I experience high quality care and support based on relevant evidence, guidance and best practice.

## How good is our leadership?

## 5 - Very Good

We evaluated this key question as very good. The service demonstrated major strengths in supporting positive outcomes for people. There were very few areas for improvement and those that did exist had minimal adverse impact on people's experiences and outcomes.

People were confident that the management team were responsive and had a good overview of the service. We heard from people, families and staff that management were approachable, listened and took ideas/concerns forward. Comments from involved professionals included, "I find the leadership very easy to chat to and feel they understand the concerns raised and always strive to support when required" and "Approachable leaders, who respond fairly and quickly". This meant that people and their families were able to raise any concerns or complaints with the management team and be confident that their views would be acted on without negative consequences.

The service had made significant improvements to their quality assurance systems to continuously monitor the quality of the service provided to people. Auditing was a key feature throughout the management team, with the registered manager also checking the quality of audits. Where discrepancies or inconsistent recording had been identified, this was addressed during team meetings and supervision. We saw a number of examples where this had happened. We noted, however, that audits of care plans, daily notes and goals needed some attention. The audits showed that the quality of care plans, daily notes and goals were good,

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however there was evidence that there was inconsistent quality and lack of detail within some of them. We asked the service to review the relevant audits to ensure these inconsistencies are highlighted and addressed. The service was receptive to the areas requiring attention. This meant that people experienced care and support from a service that was dedicated to continuous improvement.

The service had a clear, robust development plan in place, which had been regularly updated. The service had begun to undertake a self-evaluation based on Care Inspectorate guidance. Once complete, this will inform a new development plan with a focus on all aspects of the quality framework. The service had sought the views of people receiving a service, their family members and staff to inform this work. The service were using this feedback to inform improvements required. This meant that people benefitted from an organisation that was well led and managed.

People benefitted from a management and leadership team who promoted an open culture and were committed to supporting and developing their staff team. Staff were empowered in their roles and were encouraged to develop their own areas of expertise. This meant that people could be confident that staff were encouraged to learn, develop expertise and receive the right support to provide high quality services.

### How good is our staff team?

5 - Very Good

We evaluated this key question as very good. The service demonstrated major strengths in supporting positive outcomes for people. There were very few areas for improvement and those that did exist had minimal adverse impact on people's experiences and outcomes.

Staff received regular opportunities to develop their practice. Staff had regular supervision sessions, team meetings, appraisals and observations of practice. Staff felt well supported in their role and felt there was an open, welcoming culture with the management and office teams. This meant that people experienced care and support from a staff team who were encouraged and developed to continuously improve.

People's care and support was regularly provided by a stable, consistent staff team. People appreciated having regular staff as it gave them the opportunity to get to know them better and feel more relaxed. The service had access to reports that showed how many staff had visited each person and how often. This allowed the service to audit their rotas to ensure consistency of support. This meant that people could build trusting relationships with their staff in a way they both felt comfortable with.

The service promoted effective communication and networking within staff teams. There were a variety of methods staff were able to use to seek support and guidance from the management team or peers. The service had worked hard to ensure all staff had been supported to use technology efficiently, which improved lines of communication. We received feedback from involved professionals that communication between staff, management and external professionals was very good. This meant that people experienced a warm atmosphere because staff have good working relationships.

The service had a clear overview of staff professional registration and any conditions they may have to achieve relevant qualifications. There was a high percentage of qualified staff working in the service and there were clear plans in place to ensure staff requiring qualifications would be offered timeous opportunities to achieve this. This meant that people had confidence in their staff because they are trained, competent and skilled, able to reflect on their practice and follow their professional and organisational codes.

# 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

Staff training uptake should be developed. placing a greater focus on learning directly associated with the needs of people experiencing care.

Health and Social Care Standards - My Life, My Support.

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 30 January 2020.

#### Action taken since then

The service had made significant improvements with this area for improvement.

We sampled staff training records and found that all staff had completed training in core areas, including moving and handling, medication, infection prevention and control, adult support and protection and lone working.

The service was committed to non-mandatory training opportunities for staff, to enhance and develop their knowledge base, based on the needs of individuals receiving a service. The service actively sought and applied for funding for their staff to undertake additional training or qualifications.

Staff told us they appreciated the training they received and found it valuable. Staff appreciated the development opportunities and enjoyed gaining expertise. Involved professionals commented positively on the staff team skill-set, responsiveness and professionalism.

Please see "How good is our staff team?" section of this report for further details.

This area for improvement has been met.

#### Previous area for improvement 2

The service should ensure that all support plans have clear achievable goals for people being supported and contain detailed guidelines for staff to follow which are reviewed and updated regularly and accurately.

The service should develop those staff reviewing support plans on the quality of detail required when undertaking a review.

Health and Social Care Standards - My Life, My Support.

1:19 - My care and support meets my needs and is right for me.

3.14 - I have confidence in people because they are trained, competent and skilled, are able to reflect

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on their practice and follow their professional and organisational codes.
4.11 - I experience high quality care and support based on relevant evidence, quidance and best practice.

This area for improvement was made on 30 January 2020.

#### Action taken since then

The service and the wider organisation had been working on new systems to develop staff practice in goal setting across the city. Some training had already been developed, which we sampled. We found the training to be clear and detailed to support staff understanding of goal setting, however we asked the service to place additional focus on developing staff understanding of how their daily support provision supports people to achieve goals and the importance of effective record keeping.

We sampled a number of care plans. Whilst all care plans had been reviewed within the last six months, there was a lack of detail for staff to follow to ensure a consistent approach. People had a consistent staff team and their staff knew them well, including their likes and dislikes, however we heard feedback that people could find it frustrating to have to repeat to new staff how they liked their support to be carried out. We also noted that in some cases, people's independence had increased and were now able to do more for themselves, however this was not reflected in the care plan. We also sampled staff daily notes, describing what support they had provided. We found that there were a number of examples where record keeping was insufficient. We discussed this with the service and asked that this area be addressed.

Whilst some progress had been made with this area for improvement, further development was needed, therefore this area for improvement has been re-stated. Please see "How well do we support people's wellbeing?" section of this report for further detail.

This area for improvement has not 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?	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

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