

Streets Ahead (East) - Care at Home/Housing Support Housing Support Service

41 Bridge Street
Galashiels
TD1 1SW

Telephone: 01896 802 062

Type of inspection:

Announced (short notice)

Completed on:

4 February 2020

Service provided by:

Streets Ahead (Borders)

Service provider number:

SP2003001977

Service no:

CS2004076952

About the service

The service provides support to people in their own homes which is tailored to each individual need. This can be from a few hours a week to 24 hours. The support provided from the Streets Ahead - East Team is provided throughout the Scottish Borders in the areas of Duns, Jedburgh, Peebles, Galashiels and Earlston.

The service has signed up to the "Charter for Involvement" which identifies a philosophy of support they want to achieve for the people they support which includes:

1. We must be at the heart of any plans about our lives
2. We have the right to live our lives independently
3. We must be involved in our communities
4. We must be able to speak about how our support is working for us and what would be better.
5. We want to be involved in choosing the people who support us
6. We want to give information and training to staff at all levels
7. We want to be involved in writing policies that affect us and making them easier to understand
8. We want to be involved in decisions made by the organisation that plan and run our support
9. We want to be involved in events run by the organisations that plan and run our support
10. We want to be involved with 'Speaking-up' groups

"We are on the personal outcomes journey and aspire to be champions of helping people get to where they want to be in life. This means committing to a person-centred approach, recognising what's important to people"

What people told us

For this inspection, we received views from three people who used the service through our care service questionnaires. We spoke directly with a further 15 supported people and for those that had more complex needs we observed positive outcomes for them. We spoke directly to two relatives/friends/carers. People spoke highly about the staff that supported them. From the respondents comments we concluded that overall people and their families were happy with the quality of care and support the service provided.

Other comments included;

"Best thing that ever happened to me was coming to this place, I call them the A Team"

"I went to Kelso Races this year and Musselburgh. I am into my horse racing and its nice to be there. This experience made sure I made choices, built up relationships with the staff that supported me and I was treated like everyone else"

"The care you game my relative was second to none. No one could wish for better for their loved ones. You went above and beyond the call of duty"

"It has been great getting the opportunity to go away on holiday and feel reassured that my relative is fine. It means a lot to us"

Self assessment

We are not requesting self-assessments from providers for this inspection year. Issues relating to quality assurance, acting on feedback from people using the service and the quality of the service's improvement plan are considered throughout the inspection.

The 'Health and Social Care Standards' have replaced the National Care Standards. These seek to promote and improve outcomes for people who experience care. Services should now be providing support in accordance with the guidelines outlined therein.

These are:

- 1: I experience high quality care and support that is right for me.
- 2: I am fully involved in all decisions about my care and support.
- 3: I have confidence in the people who support and care for me.
- 4: I have confidence in the organisation providing my care and support.
- 5: I experience a high-quality environment if the organisation provides the premises.

<https://scotgov.publishingthefuture.info/publication/health-and-social-care-standards-my-support-my-life>

From this inspection we graded this service as:

Quality of care and support	4 – Good
Quality of staffing	4 – Good
Quality of management and leadership	4 – Good

Quality of care and support

Findings from the inspection

The quality of care and support was of a good standard. Staff were able to demonstrate the principles of the Health and Social Care Standards in their day to day work. This ensures that people experience care that is respectful and warm where positive relationships between staff and supported people can be formed.

The people that we spoke with told us that they felt respected and listened to. This information was used by staff to support people and shape their care which promoted independence dignity and choice.

We observed positive relationships being formed in and around the service with other supported people. There was a good emphasis on ensuring people maintained relationships with family and friends but also an emphasis on ensuring that people were encouraged to forge friendships out with the circle of Streets Ahead. The Keys to Life Choir was a good example of how people were able to meet up and enjoy a social activity.

Where people's rights were restricted, we saw that the service supported this in the least restrictive way maintaining people's choice and dignity.

For those that were able we could see that the service actively supported people to be involved in the decisions around how they spend their time. We could see that there were opportunities for people to get involved in different activities that enabled people to be active every day both indoors and out. Support plans identified

peoples likes, dislikes and aspirations, which helped guide staff to ensure that positive outcomes were achieved for the people they support.

For those that had specific communication or cognitive impairment they were also supported to achieve as much as they could and be involved in decisions around what support they needed.

Staff demonstrated a clear understanding of their responsibilities to protect the people they support. This ensures people are protected from harm, neglect, abuse, bullying and exploitation by people who have a clear understanding of their responsibilities. Advocacy services were available, and the staff team were able to tell me about this and guide people in the right direction should this be needed.

There was a comprehensive and holistic health assessment completed for each person's support plan we saw which was based on best practice and evidence-based guidance. Medication systems were overall good with on-going assessment to ensure medication met the most current needs of the person they supported. However, there was some best practice issues we identified of which we discussed with the manager around handwritten notes on medication administration charts which were not signed and dated. Medication that was not given on a regular basis was not always identified and this could cause confusion resulting in errors around compliance and non-compliance. We will follow this up at the next inspection.

For those that had more complex needs there was good multi-disciplinary working. There was consistency in the staff teams which enabled them to have a good understanding of people's needs. This ensured that staff knew people well and could identify quickly if the person they supported health changed or deteriorated and could involve the appropriate people to make sure any treatment or intervention was safe and effective.

We could identify from the previous inspection that some people's health had deteriorated. Anticipatory care and making certain that people are helped to live well right to the end of their life is important. We discussed this with the management team to see how this could be developed over the coming year. This ensures that people are supported in a planned and safe way, which is in line with that individuals wishes should their health deteriorate in an emergency or unexpected event.

The service supports people with very varied levels of need. The information provided in support plans identified individual needs and wishes and how to support these. This made certain that people benefit from dynamic care planning which consistently informed staff on how to support people in their daily life. The information contained in the folders was well organised which ensured that staff could quickly go to specific areas to find the information they needed. We spoke with staff during our visits and they were able to tell us lots of information about the people they supported. They could also tell us about the time they were given to shadow other staff members and time to read and absorb the information contained in the support plans.

Support plans overall were being audited and reviewed on a regular basis however this was not consistent throughout the service. For most people reviews were being completed within good timescales. However, there was some issues around locating some of the monthly and six-monthly reviews and how these were stored. We discussed this with the service, and they agreed that this could be better.

(Recommendation 1)

We concluded that people were supported at a good level to meet their needs, wishes and choices in a supportive and safe way. This enables people to lead safe, healthy, happy and active lives

Requirements

Number of requirements: 0

Recommendations

Number of recommendations: 1

1. To ensure people experience support that is well documented and regularly reviewed the service should develop better quality assurance to identify when information contained in the support plans are out of date and there is a clear audit trail of what changes are needing to be made.

This is in order to comply with Health and Social Care Standards:

1.19 'My care and support meets my needs and is right for me'.

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

Grade: 4 - good

Quality of staffing

Findings from the inspection

Staff were recruited in a way which was informed in all aspects of safer recruitment guidance. The process was well organised and documented to ensure core elements of the procedure were followed consistently. We spoke with a supported person who told us about being involved in the recruitment process in a meaningful way. Staff did not start work until all pre-employment checks were made. This made certain that people felt confident that the people who supported them had been safely recruited.

It was identified at the last inspection there needed to be a clearer plan for induction for new staff. We were able to see that there were now clearer pathways in place and workbooks for new staff to work through. Speaking to staff they were able to tell us that they had enough time to complete these to ensure they could understand all the information that was expected of them. However, this was not consistent throughout the service. We were unable to see enough evidence to meet this recommendation from the previous inspection and we will repeat this area for improvement.

(Recommendation 1)

Staff supervision was being assessed to ensure that learning and development supported good outcomes for the people in the service. However, this was not consistent and opportunity for staff to reflect on their practice and identify their learning needs was limited. For those that had the opportunity to reflect on their learning needs we were unable to see clear outcomes and goals.

Training was identified for staff depending on the people they supported and their needs along with mandatory training. This ensured that people experienced care from a staff team that were trained, competent and skilled and could reflect on their practice and follow their professional and organisational codes.

We discussed this with the management team and the importance of recognising this and how this can be progressed. This ensures that the staff team are developing new skills that they can use to support better outcomes for the people they support.

We observed a range of approaches to support different peoples learning styles. Staff were encouraged to participate in a range of training which was both online and face to face. The service was keen to engage in the

Scottish Social Service Council (SSSC) open badge scheme which is an online training resource endorsed by the SSSC to support peoples learning at their own pace.

People benefited from a warm atmosphere because there were good working relationships. Communication between staff could be improved but overall there was opportunities for staff to discuss work and how best to improve outcomes for the people they support.

Requirements

Number of requirements: 0

Recommendations

Number of recommendations: 1

1. To ensure people experience care and support by a staff team that has participated in a robust and clear process of induction which is monitored, and quality assured to enable staff to feel fully supported in their new role.

This service should;

- Identify clear training needs, which are recorded and planned for.
- Demonstrate that progress/support meetings have taken place and recorded.
- Observed practice is completed and signed off.
- Review each staff members induction until signed off as complete.

This is in order to comply with The Health and Social Care Standard:

3.14 'I have confidence in people because they are trained competent and skilled, can reflect on their practice and follow their professional and organisational codes'.

Grade: 4 - good

Quality of management and leadership

Findings from the inspection

The organisation had a clear vision that inspired equality and inclusion. The manager and depute managers had a clear vision alongside the providers and supported people to ensure everyone experienced the best outcomes they could. However, the management structure was going through a stage of change which has the potential to cause a period of instability around the service.

The culture of the service encouraged creative contributions from staff and supported people to be innovative in providing person led care with principles of positive risk taking. The information that was gathered about people identified strongly people's choices, preferences and wishes to help staff achieve positive outcomes for the people they support.

Leadership should be supported at all levels and we could see the potential for this to be developed. Where improvements were needed there was little innovative thinking on how to manage or develop this which could be detrimental to the needs of the people in the service. We discussed this at length with the senior

management team and there were clear plans in place to ensure that leaders and managers were more visible role models and be known to staff and supported people.

Overall quality assurance was well led however due to lack of management cover some of this had lapsed. Systems and processes around quality assurance was a little muddled, but despite this there was clear plans that we could see to rectify this, and we will follow this up at the next inspection.

Staff were registered with the Scottish Social Services Council (SSSC) and monitoring of this was in line with best practice. Staff were encouraged to ensure that they were aware when their registration was due for renewal and support was given if there were any issues.

Leaders empower others to become involved in comprehensive quality assurance systems and activities including self-evaluation. This promotes responsibility and accountability and leads to development of on-going improvement plans that details the future direction of the service. This was identified at the last inspection and we were unable to identify enough evidence to meet this recommendation. This will be repeated.
(Recommendation 1)

Despite the service being in a period of change the current management team were committed to ensuring that people achieved positive outcomes. There was a team working culture that were committed to overcoming barriers to ensure that supported people maintained a control of their care and support. This culture of joint decision making ensures a positive culture enabling people in a holistic way, and takes account of peoples emotional, cultural and spiritual needs.

Requirements

Number of requirements: 0

Recommendations

Number of recommendations: 1

1. The service should consider, the Health and Social Care Standards, to identify how findings from all activities can inform one overall development plan, highlighting what they do well and where they can improve. Improvements should be incorporated into an improvement action plan and regularly monitored and reviewed.

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

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

Grade: 4 - good

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

Previous requirements

There are no outstanding requirements.

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

Previous recommendations

Recommendation 1

To ensure people experience care and support by a staff team that has participated in a robust and clear process of induction which is monitored, and quality assured to enable staff to feel fully supported in their new role.

This service should;

- Identify clear training needs, which are recorded and planned for.
- Demonstrate that progress/support meetings have taken place and recorded.
- Observed practice is completed and signed off.
- Review each staff members induction until signed off as complete.

This is in order to comply with The Health and Social Care Standard:

3.14 'I have confidence in people because they are trained competent and skilled, can reflect on their practice and follow their professional and organisational codes'.

This recommendation was made on 25 October 2018.

Action taken on previous recommendation

There was not enough evidence for us to identify this recommendation has been met therefore we will now repeat this recommendation.

Recommendation 2

The service should consider, the Health and Social Care Standards, to identify how findings from all activities can inform one overall development plan, highlighting what they do well and where they can improve. Improvements should be incorporated into an improvement action plan and regularly monitored and reviewed.

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

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

This recommendation was made on 25 October 2018.

Action taken on previous recommendation

There was not enough evidence for us to identify this recommendation has been met therefore we will now repeat this recommendation.

Complaints

There have been no complaints upheld since the last inspection. Details of any older upheld complaints are published at www.careinspectorate.com.

Enforcement

No enforcement action has been taken against this care service since the last inspection.

Inspection and grading history

Date	Type	Gradings
27 Sep 2018	Unannounced	Care and support 5 - Very good Environment Not assessed Staffing 4 - Good Management and leadership 4 - Good
12 Jan 2018	Unannounced	Care and support 4 - Good Environment Not assessed Staffing 4 - Good Management and leadership 3 - Adequate
23 Aug 2017	Unannounced	Care and support Not assessed Environment Not assessed Staffing Not assessed Management and leadership Not assessed
9 Mar 2017	Unannounced	Care and support 2 - Weak Environment Not assessed Staffing 2 - Weak Management and leadership 2 - Weak

Date	Type	Gradings	
10 Mar 2016	Unannounced	Care and support Environment Staffing Management and leadership	5 - Very good Not assessed 5 - Very good 4 - Good
26 Feb 2015	Announced (short notice)	Care and support Environment Staffing Management and leadership	5 - Very good Not assessed 5 - Very good 4 - Good
17 Mar 2014	Announced (short notice)	Care and support Environment Staffing Management and leadership	4 - Good Not assessed 5 - Very good 5 - Very good
4 Feb 2013	Announced (short notice)	Care and support Environment Staffing Management and leadership	4 - Good Not assessed 5 - Very good 5 - Very good
18 Jan 2011	Announced	Care and support Environment Staffing Management and leadership	4 - Good Not assessed Not assessed Not assessed
9 Feb 2010	Announced	Care and support Environment Staffing Management and leadership	4 - Good Not assessed 4 - Good Not assessed
19 Jan 2009	Announced	Care and support Environment Staffing Management and leadership	4 - Good Not assessed 4 - Good 4 - Good

To find out more

This inspection report is published by the Care Inspectorate. You can download this report and others from our website.

Care services in Scotland cannot operate unless they are registered with the Care Inspectorate. We inspect, award grades and help services to improve. We also investigate complaints about care services and can take action when things aren't good enough.

Please get in touch with us if you would like more information or have any concerns about a care service.

You can also read more about our work online at www.careinspectorate.com

Contact us

Care Inspectorate
Compass House
11 Riverside Drive
Dundee
DD1 4NY

enquiries@careinspectorate.com

0345 600 9527

Find us on Facebook

Twitter: @careinspect

Other languages and formats

This report is available in other languages and formats on request.

Tha am foillseachadh seo ri fhaighinn ann an cruthannan is cànanan eile ma nithear iartras.

অনুরোধসাপেক্ষে এই প্রকাশনাটি অন্য ফরম্যাট এবং অন্যান্য ভাষায় পাওয়া যায়।

یہ اشاعت درخواست کرنے پر دیگر شکلوں اور دیگر زبانوں میں فراہم کی جاسکتی ہے۔

ਬੇਨਤੀ 'ਤੇ ਇਹ ਪ੍ਰਕਾਸ਼ਨ ਹੋਰ ਰੂਪਾਂ ਅਤੇ ਹੋਰਨਾਂ ਭਾਸ਼ਾਵਾਂ ਵਿੱਚ ਉਪਲਬਧ ਹੈ।

هذه الوثيقة متوفرة بلغات ونماذج أخرى عند الطلب

本出版品有其他格式和其他語言備索。

Na życzenie niniejsza publikacja dostępna jest także w innych formatach oraz językach.