

EAST RENFREWSHIRE COUNCIL

CABINET

20 August 2015

Report by Director of Environment

CARE INSPECTORATE REPORT ON SHELTERED HOUSING WARDEN SERVICE

**PURPOSE OF REPORT**

1. To advise the Cabinet of the positive outcome of the Care Inspectorate Report following their inspection of the East Renfrewshire Council Sheltered Housing Warden Service.

**RECOMMENDATIONS**

2. The Cabinet is asked to note the positive findings of the Care Inspectorate Report.

**BACKGROUND**

3. East Renfrewshire Council Sheltered Housing Warden Service is registered to provide support to older people who live in sheltered housing provided by East Renfrewshire Council. The service is provided to over 200 people residing in eight complexes located throughout the authority.

4. The Care Inspectorate operates a system of six grades:

- |   |                |
|---|----------------|
| 6 | excellent      |
| 5 | very good      |
| 4 | good           |
| 3 | adequate       |
| 2 | weak           |
| 1 | unsatisfactory |

**REPORT**

5. The report, Appendix 1, was written following an unannounced inspection which was carried out on the 12<sup>th</sup> and 20<sup>th</sup> May 2015. The report was based upon:

- The services' most recent self assessment and annual return.
- Support plans of those who use the service.
- Service user and staff meetings.
- Staff training records.
- Care Inspectorate questionnaires from service users and staff.
- Discussions with management, staff and service users.

6. The service received the following grades for the following areas:

Quality of Care and Support

- Statement One – *we ensure that service users and carers participate in assessing and improving the quality of the care and support provided by the service.*

**Very Good**

- Statement Two – *we enable service users to make individual choices and ensure that every service user can be supported to achieve their potential*

**Very Good**

Quality of Staffing

- Statement Two – *we are confident that our staff have been recruited and inducted in a safe and robust manner to protect service users and staff*

**Good**

- Statement three – *we have a professional, trained and motivated workforce which operates to National care Standards, legislation and best practice.*

**Excellent**

Quality of Management and Leadership

- Statement three – *to encourage good quality care we promote leadership values throughout the workforce*

**Excellent**

- Statement four - *we ensure quality assurance systems and processes which involve service users, carers, staff and stakeholders to assess the quality of the service we provide.*

**Very good**

7. Care Inspectorate Reports are broken down into requirements and recommendations. As the language would suggest a service provider must act upon the requirements whereas the undertaking of the recommendations is optional.

8. The current report does not impose any requirements on the service and makes only one recommendation.

9. A draft action plan has been prepared to ensure the service improves continuously (Appendix 2)

## **FINANCE AND EFFICIENCY**

10. There are not any financial or efficiency implications for the service arising from this report. The provision of sheltered accommodation by East Renfrewshire Council continues to deliver good value and benchmark favourably in comparison with other local providers and also with providers throughout Scotland.

## **CONSULTATION AND PARTNERSHIP WORKING**

11. As this report is a summary of an inspection no consultation is required.

## **IMPLICATIONS OF THE PROPOSALS**

12. There are no implications in this report in terms of staffing, property, legal, IT, equalities and sustainability.

## **CONCLUSIONS**

13. There are numerous challenges in providing a housing support service to a client group of older people dispersed over eight locations. Bespoke support planning and staff commitment is required to ensure that all service users receive a positive outcome.

14. For this reason the report from the inspectorate is welcomed.

## **RECOMMENDATIONS**

15. The Cabinet is asked to note the positive findings of the Care Inspectorate Report.

Director of Environment

Further details can be obtained from Phil Daws, Head of Environment (Housing and Property Services), 0141 577 3186.

Convener contact details

Councillor Danny Devlin  
(Convener for Housing and Maintenance Services)

Home: 0141 580 0288  
Office: 0141 577 3107/8

August 2015

**KEY WORDS** A report detailing the outcome of the recent inspection into Sheltered Housing Support services undertaken by the Care Inspectorate. Housing, housing support, sheltered, older people, Care Inspectorate.

# Care service inspection report

## Sheltered Housing Warden Service

### Housing Support Service

East Renfrewshire Council, Housing Service  
211 Main Street  
Barrhead  
Glasgow  
G78 1SY

Type of inspection: Unannounced

Inspection completed on: 29 May 2015



HAPPY TO TRANSLATE

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### **Service provided by:**

East Renfrewshire Council

### **Service provider number:**

SP2003003372

### **Care service number:**

CS2009232347

If you wish to contact the Care Inspectorate about this inspection report, please call us on 0345 600 9527 or email us at [enquiries@careinspectorate.com](mailto:enquiries@careinspectorate.com)

## Summary

This report and grades represent our assessment of the quality of the areas of performance which were examined during this inspection.

Grades for this care service may change after this inspection following other regulatory activity. For example, if we have to take enforcement action to make the service improve, or if we investigate and agree with a complaint someone makes about the service.

### We gave the service these grades

|                                      |   |           |
|--------------------------------------|---|-----------|
| Quality of Care and Support          | 5 | Very Good |
| Quality of Staffing                  | 5 | Very Good |
| Quality of Management and Leadership | 5 | Very Good |

### What the service does well

The service continued to be overall very good at involving tenants in assessing and improving the service as well as actioning the points highlighted.

We found that the service was very effective in enabling their tenants to make individual choices and ensure they were supported to achieve their potential.

The service provided a good level of protection in relation to the recruitment of staff.

We found that the service provided excellent support and training opportunities for staff as well as promoting leadership within the staff group.

The systems and processes used since the last inspection had provided a very good level of quality assurance.

### What the service could do better

Although tenants had been involved in the recruitment of staff, only five out of seven applicants attended the complex to meet with tenants and one of two applicants who was unable to attend the meeting was offered post.

The service should consider developing the involvement of tenants in the Care Inspectorate's self-assessment process, staff training, performance review and development.

It was not always clear when or if additional risk assessments were required for individual tenants. We found some instances where we would have expected to see a risk assessment in place for the support of the tenant and staff. We were told that some risk assessments had been carried out by other services, where this is the case a copy of the risk assessment should be kept in the support plan for staff guidance.

During our visits to the complexes, we found recorded accidents which should have been reported to the Care Inspectorate. We clarified our reporting guidance with the manager who developed a procedure for staff to follow in agreement with their health and safety department.

Where an applicant has a history of working in jobs where there is a regulatory body responsible for the registration of staff, it is good practice to check these registers to ensure there are no known issues in relation to the applicant's practice.

### **What the service has done since the last inspection**

Tenants had been involved in the recruitment of staff.

The service had carried out a pilot using the out of hours 'safety net' service to carry out 'morning welfare calls' on the days that a warden was not on duty. The overall outcomes were found to be positive and the continuation of the service was being considered.

'Get together' groups had started in three complexes. Activities and outings were organised by the Kirkton day service which offered community support for older people and gave tenants in the sheltered complexes the opportunity to meet up with those from residential homes.

IT installation was now complete in all complexes and training dates arranged for staff.

### **Conclusion**

Some improvements since the last inspection were evident and feedback from tenants remained very positive about the quality of support provided.

## 1 About the service we inspected

The Care Inspectorate regulates care services in Scotland. Information about all care services is available on our website at [www.careinspectorate.com](http://www.careinspectorate.com).

The service was previously registered with the Care Commission and transferred its registration to the Care Inspectorate on April 2011.

The Sheltered Housing Warden Service is registered to provide support to older people who live in sheltered housing provided by East Renfrewshire Council. The service currently provides support up to 250 people within 8 complexes.

The service aims to provide safe and secure homes with trained staff that value people's differences and respond to individual needs through partnership working with other agencies. This will improve the quality of life for all customers regardless of need and enable older people to live independently and be actively engaged in the wider community.



## **Recommendations**

A recommendation is a statement that sets out actions that a care service provider should take to improve or develop the quality of the service, but where failure to do so would not directly result in enforcement.

Recommendations are based on the National Care Standards, SSSC codes of practice and recognised good practice. These must also be outcomes-based and if the provider meets the recommendation this would improve outcomes for people receiving the service.

## **Requirements**

A requirement is a statement which sets out what a care service must do to improve outcomes for people who use services and must be linked to a breach in the Act, its regulations, or orders made under the Act, or a condition of registration.

Requirements are enforceable in law.

We make requirements where (a) there is evidence of poor outcomes for people using the service or (b) there is the potential for poor outcomes which would affect people's health, safety or welfare.

Based on the findings of this inspection this service has been awarded the following grades:

**Quality of Care and Support - Grade 5 - Very Good**

**Quality of Staffing - Grade 5 - Very Good**

**Quality of Management and Leadership - Grade 5 - Very Good**

This report and grades represent our assessment of the quality of the areas of performance which were examined during this inspection.

Grades for this care service may change following other regulatory activity. You can find the most up-to-date grades for this service by visiting our website [www.careinspectorate.com](http://www.careinspectorate.com) or by calling us on 0345 600 9527 or visiting one of our offices.

## 2 How we inspected this service

### **The level of inspection we carried out**

In this service we carried out a low intensity inspection. We carry out these inspections when we are satisfied that services are working hard to provide consistently high standards of care.

### **What we did during the inspection**

This report was written following an unannounced inspection which was carried out by two inspectors and an inspection volunteer on the 12 and 20 May 2015 between 9.30am and 5pm. Feedback was provided to the management on 29 May 2015.

As requested by us, the care service submitted a self assessment and an annual return.

We sent 96 questionnaires to the manager to distribute to tenants within the eight complexes. Fifty-seven completed questionnaires were returned prior to the inspection visit.

We also sent 10 staff questionnaires for the manager to distribute. Eight completed questionnaires were returned.

In this inspection we gathered evidence from various sources, including the relevant sections of policies, procedures, records and other documents, including:

- Tenant support plans
- Tenant meetings
- Accident and incident records
- Staff training records and meetings
- Discussions with tenants, staff and management.

### **Grading the service against quality themes and statements**

We inspect and grade elements of care that we call 'quality themes'. For example, one of the quality themes we might look at is 'Quality of care and support'. Under each quality theme are 'quality statements' which describe what a service should be doing well for that theme. We grade how the service performs against the quality themes and statements.

Details of what we found are in Section 3: The inspection

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## **Inspection Focus Areas (IFAs)**

In any year we may decide on specific aspects of care to focus on during our inspections. These are extra checks we make on top of all the normal ones we make during inspection. We do this to gather information about the quality of these aspects of care on a national basis. Where we have examined an inspection focus area we will clearly identify it under the relevant quality statement.

## **Fire safety issues**

We do not regulate fire safety. Local fire and rescue services are responsible for checking services. However, where significant fire safety issues become apparent, we will alert the relevant fire and rescue services so they may consider what action to take. You can find out more about care services' responsibilities for fire safety at [www.firelawscotland.org](http://www.firelawscotland.org)

## **The annual return**

Every year all care services must complete an 'annual return' form to make sure the information we hold is up to date. We also use annual returns to decide how we will inspect the service.

**Annual Return Received:** Yes - Electronic

## **Comments on Self Assessment**

Every year all care services must complete a 'self assessment' form telling us how their service is performing. We check to make sure this assessment is accurate.

The Care Inspectorate received a fully completed self-assessment document from the manager. We were satisfied by the way it had been completed and with the relevant information included for each heading that we grade services under.

The manager identified what they thought the service did well, some areas for development and any changes that were planned. They told us how the people who used the care service had taken part in the self-assessment process.

## **Taking the views of people using the care service into account**

The inspection volunteer spoke with 23 tenants during visits to two complexes and responses have been reflected throughout the report.

Fifty-seven Care Inspectorate questionnaires were completed and returned from tenants prior to the inspection visit. They were all very happy with the quality of care received. Additional comments received were:

'I have no fault with anything, the wardens are good, there is nothing they wouldn't do for you'.

'The care I get is good and I just could not ask for better. I try to do things for myself but I know I can always ask for help at anytime and thank God for the service. I don't know what I'd do without them'.

'The warden staff are extremely and very professional, they go out of their way to meet everybody's needs. It's great they listen to you and are very respectful, very much having a best friend to talk to and made to feel much better afterwards. I would be lost without them, they save the Council and NHS thousands. They anticipate situations before they happen. Thank God they are there'.

'My warden has worked in the complex since I moved here two years ago. She is excellent, very helpful and caring. She organises activities in the complex so we can socialise together, I enjoy going along. The new warden is also a great help. I enjoy living at Fordyce Court, it is in a very nice setting and very handy for the shops. All the staff and other residents are very friendly. All in all, it is a nice place to live'.

'The wardens in Fordyce Court are first to all and second to none. Very pleasant and caring'.

'Staff are very caring, they call in on the morning and again at night. All are so kind and pleasant. Nice to see a smiling face morning and night'.

'I am very happy with the service I receive in Montgomerie Court. The intercom means I am safe and know that if I fall I can contact help immediately. My warden updates my plan regularly'.

'I get very good care, wardens check on me. They are very good and know me, I would not change them for anyone else'.

'This complex has two wardens who share the duties. Both ladies have always been available to help me and listen to my concerns. They are cheerful and in my opinion go the extra mile. They put on entertainment for the residents and as far as I know they are not paid to work these nights so it is very much appreciated. The wardens are often asking residents if there is anything we would like to see take place so they can see if it can be organised. We have a couple of scrabble afternoons and a monthly coffee morning organised by the wardens. I am very satisfied with the service provided as are my relatives'.

'I would find it difficult to improve the service we receive an the privacy we enjoy'.

'Staff friendly, approachable and always willing to give advice and help should it be required'.

'Our staff carry out their duties well and still manage to give us some quality time'.

'I have wardens and safety net. I have no complaint with either service as on any occasion I have had cause to contact them they have been extremely helpful and reassuring'.

'Excellent care and compassion without being intrusive. Feel very safe here'.

'I am very happy in this sheltered accommodation and know that it's the best position to be in. My warden, Ann helps to make my life and I am sure others feel the same, safe and happy. My children feel this way as well. So thanks to all concerned'.

'My mother knows the wardens by name and also the people from the care association who phone at the weekends/public holidays to check that she and the other residents are fine. I have also had communication with the wardens and the out of hours services when the emergency cord was used, had a very fast response. Overall we are both pleased with the services'.

### **Taking carers' views into account**

A letter was received from a relative of one of the tenants:

'My relative, moved into Montgomery Court and in the two years they have been there, they have become very settled and comfortable within the complex. I feel the standard of care is very high. Both wardens are lovely caring people who have the care of the residents uppermost on the approach to their work. The opportunity to attend coffee mornings, resident meetings and extra planned events help my relative remain active and be less isolated. The complex has a nice warm feel to it and I feel my relative is safe there. I have no concerns and just wanted to say how much I value the service provided'.

## 3 The inspection

We looked at how the service performs against the following quality themes and statements. Here are the details of what we found.

### Quality Theme 1: Quality of Care and Support

Grade awarded for this theme: 5 - Very Good

#### Statement 1

We ensure that service users and carers participate in assessing and improving the quality of the care and support provided by the service.

#### Service strengths

The service had been very good at involving their tenants in assessing and improving the quality of the service since the last inspection. We focused on the information which was available to tenants and how the service had involved their tenants.

Six monthly meetings had continued to take place in each complex. Minutes viewed since the last inspection showed discussions about home fire safety visits, repairs, six monthly reviews of support plans, welfare calls, the out-of-hours 'safety net' service, social events, complaints, compliments and suggestions procedures.

Tenant representatives attended the Sheltered Housing in East Renfrewshire (SHER) group which had been set up in January 2009 to represent the eight complexes. The meetings rotated round each complex during the year and were attended by the tenant participation officer and East Renfrewshire Federation of Tenants and Residents Association (ERFTRA) representative. Tenant representatives were involved in formal consultation and management issues. Forms were available in complexes for tenants to raise any concerns or issues and the tenant participation officer was responsible for circulating minutes to all complexes.

A sample of meeting minutes viewed, showed open discussions between tenants and the input from the property services manager, councillors, Age Concern and the Kirkton day service.

We also saw that tenants who had attended the SHER meetings had given feedback to other tenants at some of the complex meetings.

An independent organisation had carried out interviews with forty-one sheltered housing tenants, across all complexes, for the 2014 satisfaction survey. The results showed that the great majority of tenants were very satisfied with the service they received from the provider and individual complexes.

We noted that all areas, apart from one, were well above average compared to other Scottish Councils and all areas had significantly improved since the last survey in 2012.

Whilst the majority of tenants were very satisfied, the survey outcomes did highlight some areas which could be improved further for some tenants and these were reflected in an action plan which showed the action to be taken and any progress made.

All the support plans we viewed had been reviewed six monthly and signed by the tenant. The daily 'tenant event files' showed good contact with the tenant and their next of kin.

The East Renfrewshire Council Housing newsletters contained information about all housing departments and included a section relating to the Sheltered Housing complexes. The newsletters viewed also showed feedback from tenants. We were told that a separate newsletter for the Sheltered Housing complexes was planned.

Two complexes were visited during this inspection. Notice boards were seen to be located centrally and to contain relevant information for tenants.

We also saw that the Housing Services section on the provider's website contained detailed information about each Sheltered Housing complex and the services offered as well as having links to give customer feedback and access the Care Inspectorate's website.

We were shown a recent article in a local newspaper about the service receiving over twenty compliments in one month from three of the complexes. These related mainly to the support provided by the warden staff.

Since the last inspection, the service had got agreement from the provider's human resources department to involve tenants in an informal part of the staff recruitment process. Applicants for a warden's post in one of the complexes met with twelve tenants from the complex. The manager stated that reactions from all the applicants and tenants involved were very positive with the overall process being extremely positive and would be repeated in any future staff recruitment.



## **As a person who has experience of using care services, the inspection volunteer noted that:**

The Care Inspectorate report was visible alongside other information. A suggestion box was accessible to all tenants.

Comments from tenants were:

"The newsletter is helpful"

"The warden would tell you if anything was on the noticeboard"

"I speak to the warden if any problems"

"We're encouraged to use the suggestion box. They keep asking us and we use it from time to time"

"There's loads on the noticeboard"

"We get newsletters"

"All complexes get together for the SHER meetings, more power. Potholes repairs were done and managers are at these meetings"

"They ask you if you are coming to meetings and always give you information"

"Any complaints are passed to the warden".

Tenants at both complexes said that they had filled in questionnaires although they could not remember if they had had any feedback on the results.

All tenants spoken with said they were aware of support plans.

Comments in relation to support given by the warden were:

"Non-stop help"

"Phone call every morning"

"If they don't get an answer to the call, they come right away"

"If you don't appear in the lounge they come to see if you are alright"

"There's taster nights, Halloween and Christmas parties", keep fit and coffee mornings, fish and chip nights, cheese and wine, Burns night, relaxation, darts, nails and bingo"

"They put notices up telling you what is going on"

"They wake you up every morning - good sense of security"

"Coffee mornings every day, fish supper evenings, go to the bowling club, Burns supper, Christmas, monthly booze-up"

"On a special day, they supply cakes"

"You can go to the warden for help - letters and phone calls".

In relation to the call system and out of hours service, 'safety net' service, tenants commented:

"The pilot scheme is in operation"

"It's good, you get a call and they're there in a few minutes if needed"

"Not sure if the pilot scheme will work - there's a call - not the warden on duty. If you don't answer they come to your door or contact family members"

"You can call them - if you're going out - so they know"

"The call system is checked by the warden"

"Wake up call"

"If you need them (safety net) you can press the buzzer"

"Can use safety net to summon assistance if required"

"I used it and they replied in seconds"

"Safety net days, you can contact them if an emergency".

Most people had used the safety system and thought it was good.

Tenants in one of the complexes said that they had met with prospective candidates for the new warden post last year.

Comments were:

"They brought them in, chatted to them, nice lassie".

### **Areas for improvement**

The service should review the following areas to improve the involvement of residents and relatives in assessing the quality the service:

Although tenants had been involved in the recruitment of staff, only five out of seven applicants attended the complex to meet with tenants and one of two applicants who was unable to attend the meeting was offered the post.

The service should consider developing the involvement of tenants in the Care Inspectorate's self-assessment process, staff training, performance review and development.

### **As a person who has experience of using care services, the inspection volunteer noted that:**

Tenants highlighted that the person given the job was not one of the prospective candidates that they had met.

**Grade awarded for this statement:** 5 - Very Good

**Number of requirements:** 0

**Number of recommendations:** 0

## Statement 2

We enable service users to make individual choices and ensure that every service user can be supported to achieve their potential.

### Service strengths

We found that the service was very effective in enabling their tenants to make individual choices and ensure they were supported to achieve their potential.

We looked at twelve support plans from across six of the complexes and found that the majority had the relevant details recorded in relation to:

- the tenants preferred name
- the 'core services' and any variations agreed with the tenant
- health professionals and other care services which provided support
- any medical conditions or allergies
- social interests, clubs and groups which the tenant attended.

At the two complexes visited we viewed:

- a 'communication book' which was used for staff communication about tenants or any issues
- a 'diary' which reflected the daily social events, appointments, maintenance checks and cleaning duties
- 'tenant event files' which reflected specific information relating to an individual tenant, such as phone calls to GPs, social work, house visits and support plan reviews
- 'morning welfare' checks which were recorded on a weekly basis. These noted if tenants were not at home or had any specific needs
- safety checks such as fire and call alarm checks which were carried out by the warden on a regular basis
- accident and incident records.

'Morning welfare calls' were an integral part of the sheltered housing service and provided to all tenants. An out-of-hours call service, 'safety net' was also provided. Since the last inspection, the service had carried out a pilot using the 'safety net' service to carry out 'morning welfare calls' on the days that a warden was not on duty. The overall outcomes were found to be positive and the continuation of the service was being considered.

All complexes had a plan of weekly social events or outings. These were discussed and arranged by the warden in consultation with the tenants. It was evident that various events were provided in each complex.

We saw that exercise and relaxation classes had started in complexes where staff had the relevant training.

'Get together' groups had also started in three complexes. Activities and outings were organised by the Kirkton day service which offered community support for older people and gave tenants in the sheltered complexes the opportunity to meet up with those from residential homes.

Feedback collated, showed very positive feedback with the majority reflecting that they had good fun, thought the activities and staff were good, felt happier, more positive, less isolated and looked forward to the group.

### **Areas for improvement**

We found that some areas could be improved to provide consistent support for tenants.

Although the majority of support plans viewed had the relevant details recorded. We found one which did not have any GP contact details and another which had no tenant or representative signature for the six monthly review.

As reported in the previous inspection report, it was also not always clear when or if additional risk assessments were required for individual tenants. We found some instances where we would have expected to see a risk assessment in place for the support of the tenant and staff. We were told that some risk assessments had been carried out by other services, where this is the case a copy of the risk assessment should be kept in the support plan for staff guidance.

During our visits to the complexes, we found recorded accidents which should have been reported to the Care Inspectorate. We clarified our reporting guidance with the manager who developed a procedure for staff to follow in agreement with their health and safety department. There was no indication that there had been an impact on the outcomes for tenants.

**Grade awarded for this statement:** 5 - Very Good

**Number of requirements:** 0

**Number of recommendations:** 0

## Quality Theme 3: Quality of Staffing

Grade awarded for this theme: 5 - Very Good

### Statement 2

We are confident that our staff have been recruited, and inducted, in a safe and robust manner to protect service users and staff.

#### Service strengths

We found that the service provided a good level of protection in relation to the recruitment of staff.

There had been one new warden recruited since the last inspection and we viewed their recruitment file.

We found that recruitment practice was at a good level in relation to the processes undertaken and documentation obtained.

#### Areas for improvement

The following areas were highlighted to improve the recruitment of staff.

As reported in the previous inspection report, the checking of the Scottish Social Services Council (SSSC) register as part of staff recruitment is seen to be good practice as the SSSC is responsible for the registration and regulation of staff working within social care settings.

Where an applicant has a history of working in jobs where there is a regulatory body responsible for the registration of staff, it is good practice to check these registers to ensure there are no known issues in relation to the applicant's practice. (See Recommendation 1).

**Grade awarded for this statement:** 4 - Good

**Number of requirements:** 0

**Number of recommendations:** 1

#### Recommendations

1. The manager should ensure that checks are carried out against the registers of relevant professional bodies.

National Care Standards for Housing Support services: Standard 3 - Management and staffing arrangements.

## Statement 3

We have a professional, trained and motivated workforce which operates to National Care Standards, legislation and best practice.

### Service strengths

We found that the service provided excellent support and training opportunities for staff. We looked at the training staff had received.

Training records viewed showed that staff had received training in first aid, moving and assisting, control of substances hazard to health (COSHH), fire safety, fire warden, customer excellence and the national care standards since the last inspection.

All but the new warden staff had completed first aid training.

The new warden had completed corporate and departmental induction as well as mandatory and some specific training which had been identified.

Some staff had received specific training which had been identified as needed or requested by the staff member. This included disability awareness, improving health through prevention, alcohol and drug awareness, data protection, understanding behaviour, conflict handling, religious diversity and anti-discrimination, armchair exercises, mental first aid, equality and diversity, communication, emotional wellbeing and older people.

Staff had previously received training in accident and incident reporting, infection control, dealing with aggression, fire extinguishers, dementia, adults at risk, conflict management and safety net.

IT installation was now complete in all complexes and training dates arranged for staff throughout May.

### Areas for improvement

The service should maintain this level of quality.

**Grade awarded for this statement:** 6 - Excellent

**Number of requirements:** 0

**Number of recommendations:** 0



## Quality Theme 4: Quality of Management and Leadership

Grade awarded for this theme: 5 - Very Good

### Statement 3

To encourage good quality care, we promote leadership values throughout the workforce.

#### Service strengths

We found that the service was excellent in promoting leadership within their staff group. We looked at staff meeting records as well as speaking with staff and finding out how staff had been supported to develop.

Monthly staff meetings continued to be evident. Minutes viewed from January 2015 included discussions about staff training, compliments received from tenants, the tenant survey results, the 'safety net' service pilot, IT installations and support plan reviews.

We saw that a member of the warden staff had been selected to be involved in a service review, 'how good is our service', a review which looked across the service identifying strengths and actions for improvement.

The management team had held a Sheltered Service Review Day in May 2014 which warden staff attended. The day included information sharing and discussions about the introduction of IT systems in the complexes and related training; the review of documentation; accident recording; the 'safety net' service pilot; ongoing SVQ training for staff; updated policies.

Since the last inspection, the manager had completed the relevant management qualification to meet their SSSC registration requirements. It was evident that some warden staff had completed SVQ level 2 training and one had recently commenced the training. Plans were in place to support all warden staff to achieve SVQ level 2 for registration with the SSSC by 2017.

Due to the nature of their work, warden staff were supported to have autonomy. From the returned staff questionnaires and staff spoken with, it was evident that they felt well supported and had very regular contact with their manager either by phone or in person.

Staff spoken with confirmed that their Performance, Review and Development (PRD) assessments had taken place and that they got the training that they needed to support tenants.

### **Areas for improvement**

The service should maintain this level of quality.

**Grade awarded for this statement:** 6 - Excellent

**Number of requirements:** 0

**Number of recommendations:** 0

## Statement 4

We use quality assurance systems and processes which involve service users, carers, staff and stakeholders to assess the quality of service we provide

### Service strengths

We found that the systems and processes used since the last inspection had provided a very good level of quality assurance. We looked at how both staff and tenants influenced the quality of the service.

As reported in Statement 1.1, tenants were regularly involved in complex and SHER meetings as well as consulted through six monthly care reviews and surveys. It was evident that management had attended some of the meetings and there was a commitment from management to attend at least one meeting in each complex per year.

The manager had carried out regular visits to each complex. Records of visits viewed since January 2015 showed:

- the manager checking that required warden checks were up to date
- discussions about any specific tenant or complex issues
- discussions the implementation of IT in complexes and related staff training
- discussions about the out of hours 'safety net' service pilot.

We saw numerous compliment slips returned from tenants. These extremely positive particularly in relation to the service received and the warden staff.

The service's complaints record showed that they had received three complaints since the last inspection. Records for the date of receipt, issues raised, investigations, outcomes and response letters were kept. Response timescales were seen to be very quick. The complaints procedure information was seen on the notice board in the complexes visited during this inspection. We could also see that wardens had discussed the complaint process with tenants at complex meetings.

### **As a person who has experience of using care services, the inspection volunteer noted that:**

When we asked tenants if they were happy with the support they received, staff and management, they commented:

"very lucky"

"first class"

"very happy"

"excellent"

"managers come in occasionally to sit and speak to you"

"you have numbers to phone - they always do you a good turn"

"thought we'd dropped into a wee bit of heaven"

"more than adequate"

"find staff helpful"

"check out you're okay"

"managers have been in"

"manager came in to discuss a possible homeless room in the service"

"nothing to complain about"

"the fire service were in and spoke to tenants"

"you can go to anybody for help"

"happy with everything"

"feel safe quite happy here"

"haven't found anything to complain about".

## **Areas for improvement**

The management needed to maintain the progress made since the last inspection and address the specific areas of improvement highlighted in previous statements.

**Grade awarded for this statement:** 5 - Very Good

**Number of requirements:** 0

**Number of recommendations:** 0

## 4 Other information

### Complaints

No complaints have been upheld, or partially upheld, since the last inspection.

### Enforcements

We have taken no enforcement action against this care service since the last inspection.

### Additional Information

None.

### Action Plan

Failure to submit an appropriate action plan within the required timescale, including any agreed extension, where requirements and recommendations have been made, will result in the Care Inspectorate re-grading a Quality Statement within the Quality of Management and Leadership Theme (or for childminders, Quality of Staffing Theme) as unsatisfactory (1). This will result in the Quality Theme being re-graded as unsatisfactory (1).

## 5 Summary of grades

|   |               |
|---|---------------|
| <b>Quality of Care and Support - 5 - Very Good</b>          |               |
| Statement 1   | 5 - Very Good |
| Statement 2   | 5 - Very Good |
| <b>Quality of Staffing - 5 - Very Good</b>                  |               |
| Statement 2   | 4 - Good      |
| Statement 3   | 6 - Excellent |
| <b>Quality of Management and Leadership - 5 - Very Good</b> |               |
| Statement 3   | 6 - Excellent |
| Statement 4   | 5 - Very Good |

## 6 Inspection and grading history

| Date        | Type                     | Gradings  |
|-------------|--------------------------|---|
| 20 Jun 2013 | Announced (Short Notice) | Care and support 5 - Very Good<br>Staffing 5 - Very Good<br>Management and Leadership 5 - Very Good |
| 9 Jul 2012  | Announced (Short Notice) | Care and support 5 - Very Good<br>Staffing 4 - Good<br>Management and Leadership 4 - Good           |
| 8 Jul 2010  | Announced                | Care and support 4 - Good<br>Staffing 4 - Good<br>Management and Leadership 4 - Good                |

All inspections and grades before 1 April 2011 are those reported by the former regulator of care services, the Care Commission.

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ہے بایتسرد یم روناہبزرگی رولکش رگی رپ شرازگ تعاشرا ہی

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Telephone: 0345 600 9527

Email: [enquiries@careinspectorate.com](mailto:enquiries@careinspectorate.com)

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**Action Plan – Updated July 2015**

This Action Plan has been updated following the Care Inspectorate Inspection Report June 2015. The recent inspection included one recommendation.

| <b>Action</b>   | <b>Targets/<br/>Comments</b>   |
|---|--|
| Tenants to be involved in Care Inspectorate Self Assessment Process   | Carry Forward Action – completed & ongoing   |
| Identify opportunities to involve our tenants in warden training.   | Carry Forward Action - Not completed   |
| <p>NEW ACTION<br/> <u>(Care inspectorate Recommendation June 2015 )</u><br/>           RECRUITMENT CHECKS<br/>           The manager should ensure that checks are carried out against the registers of relevant professional bodies.National Care Standards for Housing Support services: Standard 3 - Management and staffing arrangements.</p> | <p>Initial discussions have taken place with HR.<br/>           Further discussion required between Housing &amp; HR prior to future recruitment</p> |
| <p>NEW ACTION<br/>           RECRUITMENT<br/>           Compulsory attendance of future candidates to meet with tenants as part of the recruitment process (previous recruitment invited candidates to attend an informal meeting with tenants - non compulsory)</p>  | <p>Initial discussions have taken place with HR.<br/>           Further discussion required between Housing &amp; HR prior to future recruitment</p> |
| <p>NEW ACTION<br/>           Care Inspectorate wish us to consider the involvement of tenants in PRD process</p>  | <p>Housing Services to consider ways to fulfil this Care Inspectorate comment.</p>   |
| <p>NEW ACTION<br/>           Risk Assessments<br/>           Risk Assessments to be kept on site with Housing Support Plans.</p>  | <p>Risk Assessments are carried out by CHCP. Meeting requested with CHCP to discuss sharing of Risk Assessments with our Sheltered Wardens</p>       |
| <p>NEW ACTION<br/>           Accident Reporting<br/>           Accident Reporting <u>within</u> an individual tenants home is now required to be reported to the Care Inspectorate (on line eforms)</p>   | <p>New Procedure introduced for Staff whilst Care Inspectorate were on site.</p>   |