

Rowan Alba Ltd - Outreach Service Perth

Service name

Rowan Alba Ltd - Outreach Service Perth

Service address

28 Glasgow Road
Perth
PH2 0NX

Type of care service

Housing Support Service

Provider name

Rowan Alba Ltd

Service number

CS2007163337

Date Inspection Completed

22 January 2009

Type of inspection

Announced

Period since last inspection

17 months

Care Commission Office

Central East Region
Compass House
11 Riverside Drive
Dundee
DD1 4NY

Inspection Report for Rowan Alba Ltd – Outreach Service Perth

Introduction

Rowan Alba-Outreach service Perth is registered by the Care Commission to provide a housing support service.

The service is provided to people requiring housing support services in their own home. The service operates within Angus, Perthshire and Edinburgh and is provided to adults of all ages and can provide support, advice and information to service users who have difficulty managing their own tenancies.

Within the support service's "Aims and Objectives" it focuses on enabling and empowering service users to live independently within their own homes. The service is provided within three locations.

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

Quality of Care and Support - 5 - Very Good

Quality of Staffing - 5 - Very Good

Quality of Management and Leadership - 5 - Very Good

This inspection report and grades represent the Care Commission's 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. Please refer to the care services register on the Care Commission's website (www.carecommission.com) for the most up-to-date grades for this service.

Basis of Report

Before the Inspection

The Annual Return

The service submitted a completed Annual Return as requested by the Care Commission.

The Self-Assessment Form

The service submitted a self-assessment form as requested by the Care Commission

Views of service users

A total of four completed Care Commission questionnaires "How satisfied are you with your care service" were returned to the Care Commission.

Regulation Support Assessment

The inspection plan for this service was decided after a Regulation Support Assessment (RSA) was carried out to determine the intensity of inspection necessary. The RSA is an assessment undertaken by the Care Commission

Inspection Report for Rowan Alba Ltd – Outreach Service Perth

Officer (CCO) which considers complaints activity, changes in the provision of the service, nature of notifications made to the Care Commission by the service (such as absence of a manager) and action taken upon requirements. The CCO will also have considered how the service responded to situations and issues as part of the RSA.

LOW

This assessment resulted in this service receiving a low RSA score and so a low intensity inspection was required. The inspection was based on the relevant Inspection Focus Areas and associated National Care Standards, recommendations and requirements from previous inspections and complaints or other regulatory activity.

During the inspection process

Staff at inspection

The inspection was carried out by Care Commission officer Jane Blair on the 22nd January 2009.

Evidence

Evidence was gathered from a range of sources including:

- The services Self Assessment Document
- Service users support plans
- Staff training records
- Policies and procedures
- Quality audits

The manager and a member of the Floating support staff were spoken with during the inspection.

Inspection Focus Areas and links to Quality Themes and Statements for 2008/09

Details of the inspection focus and associated Quality Themes to be used in inspecting each type of care service in 2008/09 and supporting inspection guidance, can be found at:

<http://www.carecommission.com/>

Fire Safety Issues

The Fire (Scotland) Act 2005 introduced new regulatory arrangements in respect of fire safety, on 1 October 2006. In terms of those arrangements, responsibility for enforcing the statutory provisions in relation to fire safety now lies with the Fire and Rescue service for the area in which a care service is located. Accordingly, the Care Commission will no longer report on matters of fire safety as part of its regulatory function, but, where significant fire safety issues become apparent, will alert the relevant Fire and Rescue service to their existence in order that it may act as it considers appropriate. Further advice on your responsibilities is available at www.infoscotland.com/firelaw

Inspection Report for Rowan Alba Ltd – Outreach Service Perth

Action taken on requirements in last Inspection Report

There were three recommendations and two requirements made following the previous inspection.

Recommendations: The provider had demonstrated evidence of meeting all recommendations following the previous inspection.

Requirements:

1. The provider must develop a policy and procedure on restraint
This is in order to comply with SSI/114 Regulation 4(1)(a)(c)- a requirement that providers shall make proper provision for the health and welfare of service users and ensure that no service user is subject to restraint unless it is the only practicable means of securing the welfare of that or any other service user and there is exceptional circumstances.

This requirement had been met.

2. Staff must receive appropriate training in relation to assessment and record keeping associated with restraint

In addition the Care Service will ensure access to appropriate training in adult abuse issues and use of associated policy and procedures to all staff with access to service users.

This is in order to comply with SSI/114 Regulation 13- a requirement that a provider shall, having regard for the size and nature of the service, the statement of aims and objectives and the number and needs of the service users and ensure that persons employed in the provision of the care service receive training appropriate to the work they are to perform.

This requirement had been met.

Comment on Self-Assessment

A fully completed Self Assessment Document was submitted by the service. The document was completed to a satisfactory standard and contained evidence of where the service felt they were doing well and areas for improvement.

Views of Service Users

A total of four completed Care Commission questionnaires "How satisfied are you with your care service" were returned to the Care Commission, service users expressed a high level of satisfaction with the service provided, comments included:

" I am very happy with my support worker"

" I am very pleased with the service and find it very valuable to my life"

Inspection Report for Rowan Alba Ltd – Outreach Service Perth

Views of Carers

There were no carers available during the inspection,

Quality Assessment Framework Themes and Statements

Theme - Quality of Care and Support

Overall CCO Theme Grade - 5 - Very Good

Quality Statement 1.1 We ensure that service users and carers participate in assessing and improving the quality of the care and support provided by the service.

Strengths:

The service demonstrated very good evidence of the participation of service users in assessing and improving the quality of care and support provided.

The "Service User Participation strategy" described the service aims and objectives regarding service users participation and how it intends to achieve its aim to "enable and encourage full service user participation in the management of Rowan Alba and in the delivery of services" The strategy described how the service "believes in service user involvement as a core value underpinning its mission statement"

The services "Annual Action Plan 2008/2009" identified objectives in terms of service user participation and how this should be achieved, these included:

- To undertake feedback surveys
- Publication of a quarterly Newsletter
- Staff to encourage service user involvement by requesting information/suggestions for inclusion in the newsletter
- Look at the development of a service user forum.

The manager confirmed that targets identified in the action plan had either been achieved or were being developed. Staff spoken with, were aware of the action plan and had been involved in implementing and planning the range of methods to involve service users.

In addition to planned developments in terms of service user participation, the service demonstrated evidence of employing a range of methods in order to elicit the views of service users.

There was evidence of frequent reviews where the support plan was evaluated and a plan for the forthcoming three months was evaluated in consultation with the service user. Service users were informed in writing prior to the review informing them of the procedure and advising that any representatives would be welcomed. The manager confirmed that reviews were carried out in the service user's residence with the involvement of the "Key worker"

A recent initiative to review the "Support service handbook" was carried out in consultation with service users. This was achieved by using a questionnaire to

Inspection Report for Rowan Alba Ltd – Outreach Service Perth

assess the effectiveness of the handbook in terms of its content and format whilst providing opportunities to service users to make any suggestions for the improvement of the document.

The handbook itself provided essential information to service users regarding the service operation. Information was provided in a user friendly format and was clear and concise in its delivery, information included:

- Aims and objectives of the service.
- Staffing
- The principals of the service and service user's rights, for example: The right to Dignity, Privacy, Choice, Safety, Realising potential and Equality and Diversity, reflecting the values and principals of the National Care Standards.
- Regulation and monitoring of the service.
- Getting involved in the service.

In addition to this the handbook contained a range of policies and procedures, including:

- Confidentiality
- Employee Code of Conduct
- Useful contact details such as, Advocacy, Supporting people team and Welfare rights service.

This comprehensive information provided a guide to service users regarding what they could expect from the service and ways in which they could participate in their care and support. Feedback from participants in the consultation event was positive regarding the reviewed handbook.

The service had also developed a discharge questionnaire in order to elicit the views of service users who had moved on. The aim of which was to gather feedback regarding the staff and the quality of support provided using some open questions and encouraging comments and suggestions, for example:

- "How involved did you feel in relation to all aspects of your support?"
- "Did you feel respected and valued by your support by your support worker?"

The manager indicated that the service had found it difficult to encourage service users to complete and return the questionnaires.

Areas for Improvement:

An area for improvement identified in the Self Assessment document was where possible to encourage more active involvement of family and other carers in the assessment, support planning and review of the service being provided.

Both the manager and a member of staff acknowledged that further development was required in order to achieve the outcomes detailed in the services action plan in terms of service user participation. (See recommendation 1)

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| CCO Grading | 5 - Very Good |
| Number of Requirements | 0 |
| Number of Recommendations | 1 |

Inspection Report for Rowan Alba Ltd – Outreach Service Perth

Theme - Quality of Care and Support

Overall CCO Theme Grade - 5 - Very Good

Quality Statement 1.3 **We ensure that service user's health and wellbeing needs are met.**

Strengths:

The service demonstrated very good evidence of ensuring that service user's health and wellbeing needs were met.

The service demonstrated its commitment to providing support to a wide range of service users including:

- People with mental health difficulties.
- Women at risk of domestic violence.
- People with physical/sensory impairment.
- People with drug and alcohol problems.

The range of support provided included assistance with bill paying, budgeting, weekly grocery shopping and help with managing compulsive behaviour and anxiety. Outcomes for service users were maintaining their tenancy, access to benefits, and maintaining health and wellbeing.

The service maintained a support plan for each service user detailing their individual needs and planned support interventions. Support plans were regularly reviewed and support workers maintained detailed records following each visit.

Links were maintained with other agencies, such as: General practitioner, Community psychiatric nurse and advocacy workers. This was achieved by regular contact, referrals and joint reviews.

Records indicated that support workers often carried out duties over and above the support identified in the support plan, demonstrating commitment and motivation in staff.

A large percentage of support staff were working towards or had achieved SVQ level 3 in Health and Social care.

In addition to this qualification staff had received a good range of training, including:

- First aid
- Health and safety
- Equality and Diversity
- Dementia
- Adult protection
- Assist (Suicide prevention)
- Welfare benefits

Respondents to the Care Commission questionnaire "How satisfied are you with your care service" expressed a high level of satisfaction regarding the

Inspection Report for Rowan Alba Ltd – Outreach Service Perth

quality of care provided, comments included:

"I am pleased with the service I receive and the kindness shown toward me as I am very anxious at times"

"The service I received has been of great help and find that it is invaluable to me to help me"

Areas for Improvement:

The services Self Assessment document indicated that the recording of changes in medication or changes in health condition as well as being fully aware of where and how to report any significant deterioration as being an area for improvement.

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| CCO Grading | 5 - Very Good |
| Number of Requirements | 0 |
| Number of Recommendations | 0 |

Inspection Report for Rowan Alba Ltd – Outreach Service Perth

Theme - Quality of Staffing

Overall CCO Theme Grade - 5 - Very Good

Quality Statement 3.1 **We ensure that service users and carers participate in assessing and improving the quality of staffing in the service.**

Strengths:

The service demonstrated very good evidence of involving service users and carers in assessing and improving the quality of staffing within the service.

The services "Participation strategy" detailed how the involvement of service users in the assessment and improvement of staffing will be achieved. The key worker system and regular reviews provided opportunities for service users to comment on the quality of the support worker. In addition to this the "Leavers questionnaire" was a means of proactively eliciting the views of service users regarding the staffing within the service.

For further evidence in support of this statement see quality statement 1.1

Areas for Improvement:

For areas for improvement see quality theme 1.1

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| CCO Grading | 5 - Very Good |
| Number of Requirements | 0 |
| Number of Recommendations | 0 |

Inspection Report for Rowan Alba Ltd – Outreach Service Perth

Theme - Quality of Staffing

Overall CCO Theme Grade - 5 - Very Good

Quality Statement 3.3 **We have a professional, trained and motivated workforce which operates to National Care Standards, legislation and best practice.**

Strengths:

The service demonstrated very good evidence of a professional, trained and motivated workforce which operates to National Care Standards, legislation and best practice.

The annual training plan identified staff development as a major focus for the coming year.

The services training policy detailed how the service aims to achieve continuous professional development, this involved annual appraisal, annual training needs analysis and flexible working for professional development.

- Staff had been trained in a range of topics (See quality statement 1.3)

This training was provided in addition to the SVQ level 3 qualification.

Staff spoken with, indicated an awareness and understanding of the National Care Standards and spoke positively regarding the levels of training and advice offered.

Regular supervision records indicated an open and transparent relationship between employees and supervisors, where support workers were confident in raising and discussing concerns and suggestion improvements to the service provision as well as discussing future professional development. In addition to this the service carried out exit interviews with staff leaving employment as a quality assurance exercise.

Respondents to the Care Commission questionnaire sent to staff within the service, expressed a high level of satisfaction regarding the training and development opportunities provided, comments included:

"I can ask for training in any specific area I desire and also take up opportunities to take part in training which comes up regularly"

"The company looks after staff"

"Staff feel valued"

Areas for Improvement:

The manager discussed the plan to review and adapt the existing induction plan in order to tailor the programme to closely reflect the specific "Floating support" service.

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| CCO Grading | 5 - Very Good |
| Number of Requirements | 0 |
| Number of Recommendations | 0 |

Inspection Report for Rowan Alba Ltd – Outreach Service Perth

Theme - Quality of Management and Leadership

Overall CCO Theme Grade - 5 - Very Good

Quality Statement 4.1 **We ensure that service users and carers participate in assessing and improving the quality of the management and leadership of the service.**

Strengths:

The service demonstrated very good evidence of the involvement of service users and carers in assessing and improving the quality of management and leadership within the service.

The many participation methods and initiatives discussed in quality statement 1.1 provided opportunities for service users and carers to participate in this area. This included:

- Regular reviews
- Leavers questionnaires
- Regular contact with the manager of the service.

For further evidence in support of this statement see quality statement 1.1

Areas for Improvement:

For areas for improvement see quality theme 1.1

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| CCO Grading | 5 - Very Good |
| Number of Requirements | 0 |
| Number of Recommendations | 0 |

Inspection Report for Rowan Alba Ltd – Outreach Service Perth

Theme - Quality of Management and Leadership

Overall CCO Theme Grading - 5 - Very Good

Quality Statement 4.4 **We use quality assurance systems and processes which involve service users, carers, staff and stakeholders to assess the quality of service we provide.**

Strengths:

The service demonstrated very good evidence of using quality assurance systems and processes which involve service users, carers, staff and stakeholders to assess the quality of service provided.

The service was subject to regular monitoring by the "Supporting People Team". This provided feedback to the service regarding quality and performance.

The close involvement of outside agencies in the review and the support planning process provided opportunities to elicit the views of mental health professionals, advocacy workers and other professional bodies.

The manager confirmed that a formal auditing process was carried out at monthly and quarterly intervals and results were forwarded to the "Supporting People Team".

At a local level the manager carried out audits on the support plans and staff files and deficits were discussed with staff during supervision sessions.

The inspection focus area for the service was notifications to the Care Commission and the Scottish Social services Council.

The Manager was aware of her responsibility to report any instances of misconduct, staff dismissal or occasions when a member had resigned prior to intended dismissal.

Areas for Improvement:

The services Self Assessment document identified the more active role of staff in the production and development of the annual work plan and for staff to be given responsibility for quarterly review of the annual work plan with targets to be set and achieved as being areas for improvement.

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| CCO Grading | 5 - Very Good |
| Number of Requirements | 0 |
| Number of Recommendations | 0 |

Inspection Report for Rowan Alba Ltd – Outreach Service Perth

Enforcement

There has been no enforcement action against this service since the last inspection.

Other Information

N/A

Requirements

A requirement is a statement which sets out what is required of a care service to comply with the Act and Regulations or Orders made under the Act, or a condition of registration. Where there are breaches of the Regulations, Orders or conditions, a requirement must be made. Requirements are legally enforceable at the discretion of the Care Commission.

No requirements were made at this inspection.

Recommendations

A recommendation is a statement that sets out actions the care service provider should take to improve or develop the quality of the service but where failure to do so will not directly result in enforcement. Recommendations are based on the National Care Standards, codes of practice and recognised good practice.

1. It is recommended that the service continue to further develop methods in order to involve service users and carers in assessing the quality of care and support, staffing and management and leadership within the service. In making this recommendation the following care standards were taken into account:

National Care Standards- Housing support Standard 12 Expressing your views.

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 Commission re-grading the Quality Statement within the Management and Leadership Theme as Unsatisfactory (1). This will result in the Quality Theme for Management and Leadership being re-graded as Unsatisfactory (1).

Inspection Report for Rowan Alba Ltd – Outreach Service Perth

This report was written by

Jane Blair

Care Commission Officer

Date: 29 January 2009

Further information about the Regulation of Care (Scotland) Act 2001, can be found on the Care Commission web-site, under the section 'The Law'.
www.carecommission.com

