

Trust Housing Association Ltd - Branch Nine**Service name**

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Service address

12 New Mart Road

Edinburgh EH14 1RL

Type of care service

Housing Support Service

Provider name

Trust Housing Association Ltd

Service number

CS2004062641

Date of inspection

22 January 2007

Type of inspection

Announced

Care Commission OfficeStuart House Eskmills Musselburgh
EH21 7PB Tel No: Lo-call 0845 600 8335**Period since last inspection**

14 months

Introduction

Trust Housing Association, Branch 9 - Housing Support Service was registered with the Care Commission in July 2004 to provide a Housing Support Service and in 2006 it was registered to provide a Care at Home Service to older people living in their own homes. Although these services were registered separately they are delivered in a combined way by the same staff team.

The service consists of developments at East Calder, Livingston, Markinch, Dunfermline and 2 developments at Stornoway. The operational hours of each of the developments vary according to the needs of the tenants and all tenants have access to an emergency alarm call centre.

Trust Housing Association's Mission Statement is To provide quality housing and related services for older people and others in need.

Since the last inspection Trust Housing Association requested that the developments within the service be altered and the Care Commission agreed to this.

Basis of Report

This announced inspection was carried out by 1 Care Commission Officer, Rose Bradley (referred to in the report as the officer) over a period from November 2006 to January 2007.

This service was inspected after a Regulation Support Assessment (RSA) was carried out to determine what level of support was necessary. The RSA is an assessment undertaken by the officer which considers: complaints activity, changes in the provision of the service, nature of notifications made to the Care Commission by the service, action taken upon requirement etc.

This service was required to have a MEDIUM level of support that resulted in an inspection based on the inspection themes, the core standards for the inspecting year and any recommendations and requirements from previous inspections, complaint or other regulatory activity.

The report is based on:

Consideration of the content of Pre Inspection material completed by the manager prior to the inspection.

Consideration of 17 tenant questionnaires which were completed and returned directly to the Care Commission (36 were issued).

Consideration of the content of 22 staff questionnaires which were completed and returned directly to the Care Commission (32 were issued).

Discussion with the registered manager, 3 coordinators, 3 staff members and 1 volunteer.

Examination of selected records and documentation, including:

- Accident and Incident Records
- Support Plans
- Staff Training Records
- Complaint Records

The National Inspection Themes Safer Recruitment.

The National Care Standards Care at Home and Housing Support Services and in line with the policy of the Care Commission against 5 pre determined core standards:

Standard 2:(Care at Home) : The Written Agreement

Standard 4 (Care at Home : Management and Staffing

Standard 6 (Care at Home): Eating Well

Standard 8(Care at Home): Medication

Standard 6 (Housing Support): Choice and Communication

Account was also taken of The Regulation of Care (Requirements as to Care Services) (Scotland) Regulations 2002. Scottish Statutory Instrument 114

(SSI 114).

Action taken on requirements in last Inspection Reports

No requirements were made following the last inspection.

Comment on Self-Evaluation

The purpose of the Self Evaluation Form is to assist the provider of a service judge the quality of the service against the National Care Standards being inspected.

Prior to the inspection, the manager completed and returned the Self Evaluation form within the agreed timescales and showed evidence that the future development of the service had been considered. The self evaluation was used as a basis for further discussion during the inspection.

View of Service Users

Seventeen tenant questionnaires were returned directly to the Care Commission from a total of 36 issued.

Seventeen questionnaires indicated that tenants were satisfied with the service provided. All questionnaires stated that staff were professional, polite and respectful and had the skills necessary to meet their needs.

Fourteen questionnaires indicated that tenants had support plans, received the support agreed and knew how to complain while 3 indicated this was not the case. The officer was unable to confirm this as the returns were anonymous.

Direct comments included:

"They are very patient and I feel that extra staff would be helpful at the busy times."

"Excellent under sometimes difficult occasions."

"I have no complaints about my care. They treat me with respect."

"The staff know their job well."

"I am pleased with the measure of independence and privacy."

"Staff are very helpful."

View of Carers

Relatives were not contacted during this inspection.

Regulations / Principles

National Care Standards

National Care Standard Number 2: Care at Home - The Written Agreement

Strengths

Fourteen tenant questionnaires identified that tenants were in receipt of a written agreement detailing the housing support arrangements. Housing support plans detailed the core housing support service provided and these were signed and dated by tenants. Information on the number of support hours, the service costs, how support times would be agreed, contact numbers, how to end or change the service and how to complain were provided.

Areas for Development

Three tenant questionnaires indicated that a written agreement was not in place but as the questionnaires were returned anonymously the officer was unable to confirm this. The manager stated that agreements were in place throughout the service and he would confirm this with all coordinators.

The manager identified in the self evaluation that the service required to develop a method of planning and recording the support provided to tenants who do not wish to participate in planning their support. Progress will be monitored at future inspections.

National Care Standard Number 4: Care at Home - Management and Staffing

Strengths

Trust Housing Association had a selection of policies and procedures that covered all legal requirements including: staffing and training, whistle blowing, complaints, health and safety and managing risks. Twenty one staff questionnaires indicated that staff were aware of the policies and had access to them.

Systems were in place to record accidents and incidents. The officer was informed that the service did not provide tenants with assistance in financial management.

Mandatory training in First Aid, Safer People Handling and Food Hygiene were provided to all staff. Four staff questionnaires indicated that staff did not know if there were opportunities to gain

qualifications. The officer established that a number of coordinators across the service were undertaking the Scottish Vocational Qualification. As recommended at the last inspection, Trust had shared information on the strategic approach to assisting staff gain qualifications in the Trust Staff News Letter, Winter 2006.

In developments with larger staff teams, staff practice was discussed, monitored and developed through individual supervision and staff meetings. Staff questionnaires and records sampled evidenced that supervision and team meetings took place. As discussed at the last inspection coordinators supervision was recorded. Staff who worked at lone working developments met other Trust employees at the yearly annual conference and met with the named manager on a bi monthly basis. Staff who spoke with the officer stated that the manager was easily contactable outwith these arranged meetings and that they felt adequately supported.

The officer observed that staff were appropriately dressed for their tasks and carried identification.

Trust Housing Association had developed an audit system to monitor if the service was meeting the National Care Standards.

Areas for Development

There was no central point for recording complaints received at the developments (see requirement 1). A new complaints policy had been passed by the board and implementation will be monitored at future inspections.

Staff questionnaires indicated that some staff did not refer to the service by the registered name. The manager agreed to address this and progress will be monitored at future inspection.

Volunteers had not been provided with access to policies applicable to their role (see recommendation 1).

An audit of the service's safer recruitment policies and procedures had been carried out by the Care Commission and found to be satisfactory. In discussion it was suggested that the organisation develops a system for rechecking Enhanced Disclosure Checks for staff.

The manager highlighted as part of the self-evaluation process that staff appraisals and formal individual training plans required to be developed and progress will be monitored at future

inspections.

National Care Standard Number 6: Care at Home - Eating Well

Strengths

Meals were provided in a bright and pleasantly furnished dining room, although meals could also be served in tenants' homes if they chose. Meals were prepared by 2 cooks and menus were devised in consultation with tenants. The cook had access to information regarding tenants dietary needs and preferences.

Examination of records evidenced that other healthcare professionals were involved as appropriate and that staff followed the guidance provided. Adapted cutlery and crockery were in use as required.

The premises were subject to environmental health inspections and all staff had received food hygiene training.

Areas for Development

The manager identified in the self evaluation that procedures for preparing meals in tenants flats required to be developed and progress will be monitored at future inspection.

Support plans did not detail all aspects of the support provided to tenants or the method of delivery (see recommendation 2).

National Care Standard Number 6: Housing Support Services - Choice and Communication

Strengths

The service introductory pack contained information on the service provision and tenants rights and responsibilities. Information on advocacy services was available and support plans detailed how and when tenants relatives and other healthcare professionals would be involved in their support.

A confidentiality policy was in place and twenty one staff questionnaires indicated staff were aware of this. Confidentiality was outlined in the booklet 'Trust Housing Support Service' and seventeen tenant questionnaires described staff as polite and respectful of their rights to privacy and confidentiality.

Areas for Development

Support plans did not detail exactly how staff would deliver the support required and there was a reliance on verbally transferring information between staff (see recommendation 2).

National Care Standard Number 8: Care at Home -Keeping Well - Medication

(where help with taking medication is provided as part of the service)

Strengths

At the time of inspection this aspect of the service had not commenced. In preparation for delivering this service, Trust Housing Association had developed a medication policy and procedure. A medication training programme had been developed and delivered to all staff.

Documentation had been devised to record the storage, ordering and delivery of medication. Support plans and risk assessments were being developed. The officer was advised that the current documentation would continue to be amended and developed and progress will be monitored at future inspections.

Areas for Development

The medication procedure did not detail staff action in the event of missing medication and the manager agreed to amend the policy prior to commencing the service.

Enforcement

No Enforcement Action had been taken against this service.

Other Information

No additional information was identified at this inspection.

Requirements

1. The manager must ensure that a system is in place to record all complaints received at the service. Timescale for implementation: 4 weeks from the publication date of this report.

This is to comply with the Scottish Statutory Instrument 114 regulation 19(3)(f)

Recommendations

1. It is recommended that the manager ensure that volunteers have access to policies and procedures applicable to their role.

This is to comply with the National Care Standards, Care at Home Standard 4 - Management and Staffing.

2. It is recommended that support plans contain information not only on the assessed area of support but also the areas and degree of assistance given to tenants.

This is to comply with the National Care Standards, Housing Support Services, Standard 4 - Housing Support Planning.

Rose Bradley
Care Commission Officer