

Trust Housing Association Ltd - Branch Seven

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

CS2004056404

Date of inspection

27 October 2005

Type of inspection

Announced

Care Commission Office

Stuart House Eskmills Musselburgh
EH21 7PB

Period since last inspection

Introduction

Trust Housing Association, Branch 7 - Housing Support Service was first registered with the Care Commission in July 2004 to provide a Housing Support Service to older people living in sheltered housing developments.

Branch 7 consists of 7 sheltered housing developments at Tillicoultry, Lauder, Galashiels, Forfar, Chirside and 2 developments in Alloa.

The service is provided via a staff team of 6.74 staff. The operational hours of each of the developments vary according to the needs of the tenants. In addition, all tenants have access to an alarm call centre.

At the time of the inspection 244 people were receiving the service.

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

Basis of Report

This announced inspection was carried out by one Care Commission Officer (referred to in the report as the Officer) over a period between the 1st August 2005 and the 28th October 2005.

The report is based on:

A pre inspection meeting on the 1st August 2005 with Trust Housing Association managers to discuss the inspection process and subsequently individual consultation with the named manager of the service.

Further discussion with the manager on the 27th and 28th October 2005.

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

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

Standard 1 Informing and Deciding.

Standard 2 - Your Legal Rights.

Standard 3 - Managing and Staffing Arrangements.

Standard 4 Housing Support Planning.

Standard 7 - Exercising your Rights.

Three of the 7 developments within the service were inspected. One hybrid sheltered housing development at Galashiels and two sheltered housing developments at Lauder and Chirnside were selected. The above standards were divided between the 3 developments.

The Regulation of Care (Requirements as to Care Services) (Scotland) Regulations 2002. Scottish Statutory Instrument 114 (SSI 114).

Individual meetings with 3 tenants and telephone contact with 4 tenants.

A further brief discussion with 2 tenants who were willing to share their views of the service and social contact with 5 tenants.

Consideration of the content of 2 tenant questionnaires.

Consideration of the content of 2 tenant representative questionnaires.

Discussion with 3 coordinators and telephone contact with 4 staff.

Consideration of the content of 11 staff questionnaires that were completed and returned to the Care Commission.

Examination of selected records and documentation, including:

- Accident and Incident Records

-Support Plans

-Staff Training Records

-Policies and Procedures

- Personnel records were examined at Trust Housing Association s head office on the 26th September 2005

Action taken on requirements in last Inspection Reports

This was the first inspection of this service.

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. This was the manager s first involvement in the completion of the Self Evaluation documentation and the content was of a satisfactory standard and showed evidence that the future development of the service had been considered. The manager advised the officer that development coordinators would be involved in the completion of the documentation for future inspections.

View of Service Users

The Care Commission mailed a total of 40 postcards to a random sample of tenants across the 7 developments, asking if they wished to be involved in the inspection process.

Sixteen postcards were returned directly to the Care Commission.

Seven tenants did not wish to be part of the inspection.

Two tenants requested that a relative complete a short questionnaire on their behalf.

Four tenants requested to complete a short questionnaire.

Six tenants requested to meet with the officer in person, although because of location 4 were contacted by telephone.

Four postcards were returned as not received (the manager subsequently wrote directly to all tenants at the developments to inform them of the times of the inspection visit should they wish to meet with the officer).

All tenant questionnaires and tenants who spoke with the officer indicated satisfaction with the service and positive views about staff. The tenants stated that staff were reliable and that they always knew which staff would be coming to support them. Staff were said to speak to tenants in a respectful and polite manner and to be professional in their approach. Tenants stated that staff were mindful of their privacy while in their homes. Tenants confirmed that they knew how to make a complaint and would feel comfortable about speaking to staff about any concerns they might have. Tenants had a copy of their written agreement and questionnaires indicated they received the support which was agreed.

Direct comments included:

"I am very happy with the service"

"I have no complaints about the service or staff"

"The staff are very good"

"Staff are great, they are always there if I need them"

"If you need and want support the staff give this, but if you want to be alone staff respect this"

"It's reassuring that if I need more support it will be there and I won't have to leave my home"

"It would be good if staff were here all the time"

One comment regarding repairs was passed to the manager for consideration as this was not part of the Care Commission remit.

View of Carers

Two questionnaires were returned to the Care Commission.

The questionnaires indicated that the relatives were satisfied with the service provided to their relative and knew how to raise concerns. One questionnaire also indicated involvement in the review of their relatives support.

One questionnaire indicated that the relative was not involved in reviewing their relatives support. The officer established that all tenants were offered this opportunity.

Regulations / Principles

National Care Standards

National Care Standard Number 1: Housing Support Services - Informing and Deciding

Strengths

An introductory pack was provided to all new tenants and contained information about areas identified in this Standard, including, a service leaflet, explanation of the principles and values of the organisation and a copy of the organisation complaints procedure which included the Care Commission contact details.

A booklet entitled 'Trust Housing Support Service' provided details on charges, tenants' rights as a user of the service, risk assessment, confidentiality and housing support plans. Tenants were also advised of their right to have anyone of their choice involved in the planning of their support.

The booklet also detailed how inspection reports could be accessed although as this was the first inspection of the service, previous reports were not available.

Areas for Development

The manager identified in the self evaluation document that the content of the introductory pack would benefit from regular formal review to ensure information was current.

National Care Standard Number 2: Housing Support Services - Your Legal Rights

Strengths

Tenant questionnaires confirmed that tenants were in receipt of a written agreement detailing the housing support arrangements. The housing support plans detailed the core housing support service provided and the plans were signed and dated by tenants.

Tenants were also in receipt of a Scottish Secure Tenancy Agreement.

This was the first inspection of the service by the Care Commission and previous reports were not available. The manager stated that future inspection reports would be made available to tenants and information on how to access the report was included in the booklet 'Trust Housing Support Service'.

Areas for Development

No areas for development were identified at this inspection.

National Care Standard Number 3: Housing Support Services - Management and Staffing Arrangements

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. A corporate review of policies had recently taken place and the revised policies had been issued to the developments. Copies of the policies were held at each development and the officer observed that these were easily accessible to staff. Staff indicated in questionnaires that they were aware of the policies and had access to them. There was evidence that new policies were discussed at team meetings.

Systems were in place to record accidents and incidents and a system was in place to monitor these corporately via the organisation's Health and Safety Adviser.

Trust Housing Association was committed to staff training as an organisation and a number of staff across the service were participating in SVQ training. The manager spoke knowledgeably of the organisation's strategic approach toward assisting staff gain a qualification. Mandatory training in First Aid, Manual Handling and Food Hygiene were provided to all staff.

A recruitment strategy was in place and staff were recruited through a process that included criminal record checks, taking up references and selection interviews. New staff were inducted to the organisation and staff questionnaires and staff who spoke with the officer confirmed that staff had received induction. All staff were issued with a copy of the Scottish Social Services Council's Code of Conduct. The officer observed that copies of the code of conduct were also displayed and accessible at the developments.

In developments with larger staff teams, staff practice was discussed, monitored and developed through individual supervision and staff meetings. Records sampled evidenced that supervision and team meetings took place on a regular basis.

The 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 manager was described as supportive and approachable.

There had been no increase or decrease in the staffing levels agreed with the Care Commission at the time of registration.

The officer was informed that the service did not provide routine financial assistance to tenants. Rigorous financial procedures were in place to record development expenses, although in 1 instance staff signatures were not in place. The coordinator agreed to rectify this.

Areas for Development

The organisation had recently reviewed its complaints procedure and recording methods. The manager had identified in the self evaluation that the new procedure was expected to be fully implemented by the end of 2005 and that staff training on managing complaints would be provided. Progress on this will be followed up at future inspections.

Staff questionnaires and staff who spoke with the officer indicated that not all Trust relief and bank staff received formal supervision. Staff stated that they knew who to contact to discuss any issues they may have. The manager had identified in the self evaluation document that consideration was being given to the implementing of annual staff appraisals and agreed to consider how the supervision of bank and relief staff should be managed. Progress will be followed up at the next inspection.

During the inspection of the hybrid housing development the officer was informed that the service was operating at full capacity. The coordinator stated that the staff resources were fully utilised in meeting the current support needs of tenants, allowing limited managerial time for staff development. Given that tenants are naturally becoming frailer and that new tenants support needs tend to be of a higher degree than previously experienced the officer noted that in order to maintain the quality of the service provision, staffing levels would have to increase in accordance with tenants increasing support needs.

The manager confirmed Trust's awareness of the situation. The situation will be followed up at future inspections.

Staff questionnaires and staff who spoke with the officer indicated that although staff knew that SVQ qualifications would be available, they were not sure how this would be rolled out to staff or the timescales involved. (see Recommendation 1)

National Care Standard Number 4: Housing Support Services - Housing Support Planning

Strengths

Tenant questionnaires indicated that tenants were satisfied with the service provided and that the service was provided in the manner agreed.

The new housing support plan system was being implemented across the services and was at an early stage of development in some cases. The officer noted that the support plans recorded relevant information about individual Tenants.

The service carried out a review of the individual's housing support plans three months after taking up tenancy, thereafter the housing support plans would be reviewed on an annual basis or earlier if support needs changed.

Out of hours contact was covered by a service called 'Hanover Careline'. Basic information was held by this service to assist with out of hours service provision.

All tenants' personal files were securely stored. Files sampled evidenced that only information pertinent to the service was held. Tenants could access the file on request.

A key worker system was in place in the hybrid sheltered developments. In sheltered developments tenants identified the coordinator as the named member of staff with whom they would discuss changes and developments to their support provision. Tenants who spoke with the officer were able to identify who the key contact person was.

Areas for Development

Staff demonstrated knowledge of the individual tenants support needs. The support plans identified the areas of staff input, but the specific input was not detailed.

The manager had identified in the self evaluation document that the support plans required to be developed. (see Recommendation 2).

National Care Standard Number 7: Housing Support Services - Exercising Your Rights

Strengths

Information on tenants rights and responsibilities and the service provision was included in the service introductory pack.

A confidentiality policy was in place. Confidentiality was also outlined in the booklet Trust Housing Support Service. There was evidence that confidentiality was discussed at team meetings.

The Human Resource department confirmed that all staff were issued with a copy of the Scottish Social Service Council Code of Conduct at the time of employment. Staff questionnaires confirmed this. Staff stated that elder abuse had been discussed at the annual conference and some staff had attended training on the Protection of Vulnerable Adults. Tenants stated that staff respected their privacy and were polite.

Only tenant information pertinent to the service was held. Trust Housing Support Service booklet detailed how information would be used. The officer observed that information was securely stored and access limited. Tenants could access this information on request.

Tenants described staff as polite and respectful of their rights to privacy and confidentiality. Staff were said to be helpful and to respond quickly to requests for assistance. The officer observed staff responding immediately to tenants request for assistance.

Areas for Development

No areas of development were identified at this inspection.

Enforcement

No Enforcement Action had been taken against this service since registration with the Care Commission.

Other Information

1. Staff Questionnaires indicated that staff were not aware that the name of the service registered with the Care Commission was Branch 7 and referred to the service name, in the questionnaires, as the local operational name. The manager agreed to ensure that staff and tenants were familiar with the registered name. This agreement will be followed up at future inspections.

2. Staff questionnaires and staff who spoke with the officer expressed the view that due to the number of meals provided each day at the hybrid sheltered development, the domestic cooking and dish washing facilities would benefit from upgrading. Staff also highlighted the effect of the increased number of tenants wishing cooked meals and the limited available dining facilities.

The manager advised that Trust Housing were aware of these issues. Progress will be monitored at future inspections.

Requirements

No Requirements were made following this inspection.

Recommendations

1. It is recommended that information on the organisation's strategic approach to assisting staff gain a recognised qualification be shared with all staff to increase staff knowledge.

Naitonal Care Standards "Housing Support Services" Standard 3.7 - Management and Staffing.

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

National Care Standards "Housing Support Services" Standard 4 - Housing Support Planning.

Rose Bradley
Care Commission Officer