DUNDEE CITY COUNCIL

REPORT TO: SCRUTINY COMMITTEE - 20TH JANUARY 2010

REPORT ON: ANNOUNCED INSPECTION OF THE MACKINNON SKILLS CENTRE FOR ADULTS WITH PHYSICAL IMPAIRMENTS BY THE SCOTTISH COMMISSION FOR THE REGULTION OF CARE

REPORT BY: DIRECTOR OF SOCIAL WORK

REPORT NO: 39-2010

1.0 PURPOSE OF REPORT

1.1 The purpose of this report is to report on the findings of the Inspection of the MacKinnon Skills Centre carried out on 22nd and 25th September 2009.

2.0 **RECOMMENDATIONS**

- **2.1** It is recommended that the Scrutiny Committee:
 - i) notes the contents of this report; and
 - ii) requests that the Director of Social Work monitor the continued progress towards improving this service.

3.0 FINANCIAL IMPLICATIONS

3.1 None.

4.0 MAIN TEXT

4.1 The MacKinnon Skills Centre was inspected on 22nd and 25th September 2009 by the Scottish Commission for The Regulation Of Care. A report of the findings was published on 29th September 2009.

The service can support up to 40 adults with physical impairments at any one time. It provides support and skills development opportunities for adults with physical disabilities and/or progressive illness. Service users attend from Dundee, Angus and Perth and Kinross. The service is in Broughty Ferry and is based in a single storey, purpose built premises.

- **4.2** The Care Commission's focus of inspection targeted the following Quality Themes.
 - Quality of Care and Support
 - Quality of Environment
 - Quality of Staffing
 - Quality of Management and Leadership.

Each Quality theme is made up of several quality statements and this inspection focussed on eight of these quality statements.

- **4.3** The Care Commission identified the following strengths at the MacKinnon Skills Centre from the quality themes and statements inspected.
 - There was good practice in involving service users and carers in assessing and improving the quality of care and support. A range of methods were used to involve service users and carers.
 - The Service facilitated regular meetings where service users and carers were encouraged to give their views on how the service could be improved on. There was evidence of staff acting on comments they had received.
 - The Service was seen to seek the views of service users and carers separately.
 - Service users commented positively on the opportunities they were offered both in relation to their individual care routine preferences and social opportunities.
 - The Service had a very good involvement of service users and carers in assessing and improving the quality of the environment in the Service.
 - Excellent use was made of information from service user and carer consultations held about the quality of the environment. The choice and decision of design of new furniture, bedding and curtains were consulted on prior to purchase.
 - The Service had excellent outcomes in the area of safety for service users. The use of track hoists and profile beds ensured service users were supported to be as independently as possible during their stay.
 - The service had a very thorough induction programme for all new staff.
 - The service had excellent practice in involving service users in assessing and improving the quality of the staffing in the Skills Centre. Service Users were involved in interviewing and selecting staff.
 - The Service had excellent involvement of service users and carers in assessing and improving the quality of management and leadership of the service.
 - Outcomes for service users had improved as a result of consultation work carried out with an action plan to address recommendations.
 - The service facilitated regular consultation opportunities where service users and carers were encouraged to express their opinion as to how the service could be improved. Ideas taken directly from service users were drawn up into an action plan and implemented.

4.4 Evaluation

The Care Commission can apply the following to Services:

- Enforcement Action
- o Requirements
- Recommendations

The MacKinnon Skills Centre did not receive any enforcement actions or requirements following the Inspection. There were four recommendations, two of which were for the Skills Centre and the other two were Corporate.

Recommendations for the Skills Centre:

Standards 4 & 12 - Support Arrangements and Expressing your views

1. The service should ensure that personal plans fully set out service users' needs and include their views about how needs are met.

Standard 5 - Management and Staffing Arrangements

2. The service's induction and ongoing assessment of staff competence should evidence and evaluate all essential care practice and use of social service's values

Corporate Recommendations: Safer Recruitment - Inspection Focus Area outcome

3. Standard 5 - Management and staffing arrangements

It is recommended that the provider ensure that a formal application process is followed for each period of employment. (Scottish Social Services Council Code of Practice - Employer 'Make sure people are suitable to enter the workplace 1.1. and National Care Standards, Care homes for older people.)

4. Standard 5 - Management and staffing arrangements.

It is recommended that the provider audits the procedures for the recording of staff skills and qualification records. (Scottish Social Services Council - Code of Practice - Employer' Make sure people are suitable to enter the workplace - 1.1.)

4.5 Quality Indicators

Scottish Commission for the Regulation of Care reports use a six-point scale for reporting performance:

6	Excellent	
5	Very good	
4	Good	
3	Adequate	
2	Weak	
1	Unsatisfactory	

The following quality statements based on the National Care Standards were evaluated as:

Statement 1 - Quality of Care and Support	6 - Excellent
Statement 2 - Quality of Care and Support	5 - Very Good
Statement 1 - Quality of Environment	6 - Excellent
Statement 2 - Quality of Environment	6 - Excellent
Statement 1 - Quality of Staffing	5 - Very Good
Statement 2 - Quality of Staffing	4 - Good
Statement 1 - Quality of Management and Leadership	6 - Excellent
Statement 2 - Quality of Management and Leadership	5 - Very Good

These grades are then translated into the grade for the Quality Theme and are as follows:

Quality Theme	Overall Grade
Quality of care and support	5
Quality of environment or information	6
Quality of staffing	4
Quality of management and leadership	5

5.0 POLICY IMPLICATIONS

- **5.1** This report has been screened for any implications in respect of Sustainability, Strategic Environment Assessment, Anti-Poverty and Equality Impact Assessment and Risk Management.
- **5.2** There are no major issues

6.0 CONSULTATION

6.1 This report has been subject to consultation with the Chief Executive, Depute Chief Executive (Support Services), Assistant Chief Executive and Director of Finance.

7.0 BACKGROUND PAPERS

- 7.1 The following Background Paper was relied upon in preparation of this report:
 - Inspection Report Dundee City Council MacKinnon Skills Centre

Alan G Baird Director of Social Work

31 December 2009



Inspection report

MacKinnon Skills Centre Support Service Without Care at Home

491 Brook Street Broughty Ferry Dundee DD5 2DZ 01382 431970

Inspected by: (Care Commission officer) Patrick Sweeney

Type of inspection:

Announced

Inspection completed on:

29 September 2009

Improving care in Scotland

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Service provided by: Dundee City Council

Service provider number: SP2003004034

Care service number: CS2004074670

Contact details for the Care Commission officer who inspected this service:

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Easy read summary of this inspection report

We grade all the Quality Statements for a service at each inspection. Each grade describes how well we think the service is doing based on what we inspected.

We can choose from six grades:



This inspection report and grades are our assessment of the quality of how the service is performing in the areas we examined during this inspection.

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

What the service does well

There was excellent practice in involving service users and carers in assessing and improving the service. An action plan for the skills centre had been written based upon these consultations including service users' and carers' ideas for improvements. Service users are routinely involved in interviewing and selecting staff. Service users were represented on a service user group, which met regularly with the management of the service.

Service users had access to an innovative range of skills programmes and special projects which promoted their independence and confidence. The personal planning system recorded service users' health and personal care needs to a good degree. The service had a very good practice of updating its agreements with service users about their skills. There was very good communication between skills officers, attendant staff and senior staff about any significant developments for service users.

The service had a good induction programme for all new staff. The staff were very aware of safety issues especially for transport, personal care and moving and handling.

What the service could do better

The service should ensure that personal plans fully set out service users' needs and include their views about needs are met.

The induction and ongoing assessment of staff competence should evidence and evaluate all essential care practice and use of social service values.

What the service has done since the last inspection

A recommendation was partially met. The service had improved the information in personal plans setting out how service users' needs would be met.

The service has consulted extensively with service users and carers about changes to the building and the future of the service and written an action plan based upon their feedback.

Conclusion

Service users gave many examples of how the service had assisted them to be more confident and independent in their daily lives. They also made these comments about how the service was provided;

- "Service users help each other, particularly when people are down or withdrawn."
- "I have got to know many people here and was made to feel comfortable here very quickly."
- "Personal care is given with our dignity in mind."
- "The staff have the right attitudes to help and support service users."
- "The service should get ideas from service users about improvements."

Who did this inspection

Lead Care Commission Officer

Patrick Sweeney

Other Care Commission Officers

Not applicable.

Lay Assessor

Not applicable.

Please read all of this report so that you can understand the full findings of this inspection.

About the Care Commission

We were set up in April 2002 to regulate and improve care services in Scotland.

Regulation involves:

- registering new services
- inspecting services
- investigating complaints
- taking enforcement action, when necessary, to improve care services.

We regulate around 15,000 services each year. Many are childminders, children's daycare services such as nurseries, and care home services. We regulate many other kinds of services, ranging from nurse agencies to independent healthcare such as hospices and private hospitals.

We regulate services for the very young right through to those for the very old. Our work can, therefore, affect the lives of most people in Scotland.

All our work is about improving the quality of care services.

We produce thousands of inspection reports every year; all are published on our website: www.carecommission.com. Reports include any complaints we investigate and improvements that we ask services to make.

The "Care services" area of our website also:

- allows you to search for information, such as reports, about the services we regulate
- has information for the people and organisations who provide care services
- has guidance on looking for and using care services in Scotland.

You can also get in touch with us if you would like more detailed information.

About the National Care Standards

The National Care Standards (NCS) set out the standards that people who use care services in Scotland should expect. The aim is to make sure that you receive the same high quality of service no matter where you live.

Different types of service have different National Care Standards. When we inspect a care service we take into account the National Care Standards that the service should provide.

The Scottish Government publishes copies of the National Care Standards online at: www.scotland.gov.uk

You can get printed copies free from:

Blackwells Bookshop 53-62 South Bridge Edinburgh EH1 1YS Telephone: 0131 662 8283 Email: Edinburgh@blackwells.co.uk

What is inspection?

Our inspectors, known as Care Commission Officers (CCOs), check care services regularly to make sure that they are meeting the needs of the people in their care.

One of the ways we check on services is to carry out inspections. We may turn up without telling the service's staff in advance. This is so we can see how good the care is on a normal day. We inspect some types of services more often than others.

When we inspect a service, typically we:

- talk to people who use the service, their carers and families, staff and managers
- talk to individuals and groups
- have a good look around and check what quality of care is being provided
- look at the activities happening on the day
- · examine things like records and files, if we need to
- find out if people get choices, such as food, choosing a key worker and controlling their own spending money.

We also use lay assessors during some inspections. These are volunteers who have used care services or have helped to care for someone who has used care services.

We write out an inspection report after gathering the information. The report describes how things are and whether anything needs to change.

Our work must reflect the following laws and guidelines:

- the Regulation of Care (Scotland) Act 2001
- regulations made under this Act
- the National Care Standards, which set out standards of care that people should be able to expect to receive from a care service.

This means that when we register or inspect a service we make sure it meets the requirements of the 2001 Act. We also take into account the National Care Standards that apply to it.

If we find a service is not meeting these standards, the 2001 Act gives us powers that require the service to improve.

Recommendations, requirements and complaints

If we are concerned about some aspect of a service, or think it could do more to improve its service, we may make a requirement or recommendation.

- 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.
- 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.

Complaints: We have a complaints procedure for dealing with any complaint about a registered care service (or about us). Anyone can raise a concern with us - people using the service, their family and friends, carers and staff.

We investigate all complaints. Depending on how complex it is, a complaint may be:

- upheld where we agree there is a problem to be resolved
- not upheld where we don't find a problem
- partially upheld where we agree with some elements of the complaint but not all of them.

How we decided what to inspect

Why we have different levels of inspection

We target our inspections. This means we spend less time with services we are satisfied are working hard to provide consistently high standards of care. We call these low-intensity inspections. Services where there is more concern receive more intense inspections. We call these medium or high intensity inspections.

How we decide the level of inspection

When planning an inspection, our inspectors, or Care Commission Officers (CCOs) carefully assess how intensively each service needs to be inspected. They do this by considering issues such as:

- complaints
- · changes to how the service provides care
- any notifications the service has given us, such as the absence of a manager
- what action the service has taken in response to requirements we have made.

The CCO will also consider how the service responded to situations and issues: for example how it deals with complaints, or notifies us about incidents such as the death of someone using the service.

Our inspections take account of:

- areas of care that we are particularly interested in (these are called Inspection Focus Areas)
- the National Care Standards that the service should be providing
- · recommendations and requirements that we made in earlier inspections
- any complaints and other regulatory activity, such as enforcement actions we have taken to improve the service.

We grade each service under Quality Themes which for most services are:

- Quality of Care and support: how the service meets the needs of each individual in its care
- Quality of environment: the environment within the service (for example, is the service clean, is it set out well, is it easy to access by people who use wheelchairs?);
- **Quality of staffing:** the quality of the care staff, including their qualifications and training
- Quality of management and leadership: how the service is managed and how it develops to meet the needs of the people it cares for
- **Quality of information:** this is how the service looks after information and manages record keeping safely.

Each of the Quality Themes has a number of Quality Statements in it, which we grade.

We grade each heading as follows:



We do not give one overall grade.

How grading works.

Services assess themselves using guidance that we given them. Our inspectors take this into account when they inspect and grade the service. We have the final say on grading.

The Quality Themes for this service type are explained in section 2 The Inspection.

About the service we inspected

Mackinnon Skills Centre has been registered as a support service by the Care Commission since 1 April 2002. The service is provided by Dundee City Council Social Work Department.

The service is provided for up to 40 adults with physical impairments at any one time. It provides support and skills development opportunities for adults with physical disabilities and / or progressive illness. Service users attend from Dundee, Angus and Perth and Kinross. The service is in Broughty Ferry and is based in single storey, purpose-built premises.

The Skills Centre's mission statement is; 'to empower adults with physical disability to establish a positive personal identity, to raise public awareness and to promote wider social inclusion'.

Skills Officers deliver individualised skills programmes and Care attendant/driver provide personal care and support.

Skills programmes offer skills training and development, which is tailored to individual needs in areas such as: personal and domestic care, social and communication skills, arts and crafts; music, gardening and information technology.

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

Quality of Care and Support	5 - Very Good
Quality of Environment	6 - Excellent
Quality of Staffing	4 - Good
Quality of Management and Leadership	5 - Very Good

This inspection report and grades are our assessment of the quality of how the service is performing in the areas we examined during this inspection.

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

You can use the "Care services" area of our website (www.carecommission.com) to find the most up-to-date grades for this service.

What level of inspection did we make this service

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 activities did we undertake during the inspection

The report was written following an announced inspection on Tuesday 22 September and Friday 25 September 2009, by a Care Commission officer. The inspection findings were given in a meeting with a senior skills officer and external manager of the service on 29 September.

The Annual Return The service submitted an annual return as requested by the Care Commission.

The Self Assessment The service submitted a self assessment form as requested by the Care Commission.

Views of Service Users

The views of service users were obtained in a focus group with six service users during the inspection visit.

Regulatory Support Assessment

The inspection plan for this service was decided after a Regulatory Support Assessment (RSA) was carried out to determine the intensity of the inspection necessary. 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 a sample of two Quality Statements under each of the four Quality Themes, relevant Inspection Focus Areas and associated National Care Standards, recommendations and requirements from previous inspections and complaints or other regulatory activity.

During the inspection, evidence was gathered from a number of sources including:

- A review of a range of policies, procedures and records and other documentation including; service users' and staff records.
- Examination of the environment, including the premises and equipment used.
- Observation of interactions between the staff and service users.
- Interviews with the manager, three staff, six service users.

All the above information was taken into account during the inspection process and was used to assess the performance of the service.

Inspection Focus Areas (IFAs)

Each year we identify an area, or areas, we want to focus on during our inspections. We still inspect all the normal areas of a care service; these are extra checks we make for a specific reason.

For 2009/10 we will focus on:

- Meaningful activity for all adult services
- · How care services assess the health of people with learning disabilities
- · Involving parents for children's services
- Medication for looked after children for residential accommodation for children
- How care services make sure they have safe recruitment procedures for staff for all services except childminders.

You can find out more about these from our website www.carecommission.com.

Fire safety issues

The Care Commission no longer reports on matters of fire safety as part of its regulatory function. Where significant fire safety issues become apparent, we will alert the relevant Fire and Rescue service to their existence in order that it may act as it considers appropriate. Care service providers can find more information about their legal responsibilities in this area at: www.infoscotland.com/firelaw

Actions Taken on Recommendations Outstanding

Recommendation 1

The service should ensure that personal plans fully set out service users' needs and include their views about needs are met. National Care Standards, Standard 4 Support arrangements and Standard 12 Expressing your views.

This recommendation was partially met. See strengths and areas for improvement and Recommendation 1 under Quality Theme 1, Statement 2.

The annual return

We use annual returns (ARs) to:

- make sure we have up-to-date, accurate information about care services; and
- decide how we will inspect services.

By law every registered care service must send us an annual return and provide us with the information we have requested. The relevant law is the Regulation of Care Act (Scotland) 2001, Section 25(1). These forms must be returned to us between 6 January and 28 February 2009.

Annual Return Received

Yes - Electronic

Comments on Self Assessment

We received a fully completed self assessment document from the service. The service had provided relevant information for each Quality Statement.

The service identified what they thought they did well, some areas for development and any changes they planned. The service told us how service users and their carers had taken part in the self assessment process.

Taking the views of people using the care service into account

Six service users spoke with us in a meeting during the inspection visit. They gave personal examples of how the service had assisted them, these included;

- A person who had had a stroke now designed websites
- A person using a wheelchair now made their own way to places rather than relying upon friends and family
- Taking part in arts projects had given one person more interests in life
- One person was now prepared to start a work placement.

Service users' comments about the service included;

- "It's a lifeline."
- "I have got to know many people here and was made to feel comfortable here very quickly."
- "Service users help each other, particularly when people are down or withdrawn."
- "Personal care is given with our dignity in mind."
- "Everyone has a keyworker who you can go to with any concerns."
- "The staff care and listen to you."
- "The staff have the right attitudes to help and support service users."
- "Staff are very aware of our safety and I feel safe."
- "The service should get ideas from service users about improvements."

Taking carers' views into account

No carers were spoken to as part of this inspection.

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

There was excellent practice in involving service users and carers in assessing and improving the quality of care and support.

Several methods were used to involve service users and carers, including;

- review meetings for each service user
- questionnaires for service users and carers
- · service users' meetings carers' meetings
- informal discussions.

Service users' views were recorded in-depth in their skills reviews. The reviews considered how well the service was meeting their needs and the goals they wanted to fulfil through the service.

Service users and carers were asked for their views separately, as these can be different. Service users and carers rated the service highly in their feedback. The service informed service users and carers about the feedback it had got from them and said what they would do to make improvements. Service users' ideas for improvement which had been put into practice included;

- a new sports group
- a stall at the Gala day
- a choice of taxi companies to get to and from the service
- respite service users taking part in the skills programme
- lunch provision for service users attending all day
- a trial of longer skills sessions in the afternoon, which was stopped because of transport difficulties.

There were regular newsletters for service users giving feedback on the progress to meeting their ideas for improvement.

Service users were confident that complaints or concerns would be dealt with properly.

A carers' focus group for both the skills service and respite service met three times in the past year. This provided a forum for a small group of carers to discuss issues of concern to themselves and to give their views and ideas to the service.

The Council had a suitable participation policy for service users and carers to have a say about the quality of care provided.

Areas for Improvement

The service should continue and build upon this excellent practice.

Grade awarded for this statement 6 - Excellent

Number of Requirements

Number of Recommendations

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

There were very good practice for service users in this quality statement.

Service users confirmed that the service offered them a wide range of choice in the skills programme and that these promoted their independence and welfare in their home life and the community. Service users said that the service particularly helped them to be more confident in themselves. Examples of this included;

- a person who had had a stroke now designed websites
- a person using a wheelchair now made their own way to places rather than relying upon friends and family
- · taking part in arts projects had given one person more interests in life
- one person was now prepared to start a work placement.

Service users confirmed that the whole staff team actively assisted in their process through their skills, interests and understanding.

An innovative range of skills programmes and special projects were provided for service users, these included;

- service users provided a workshop to senior managers in the Council on the use of video and digital media to present information
- service users won awards in several categories of the Broughty Ferry in Bloom competition and a Garden and Allotments competition
- service users work was exhibited at Dundee Contemporary Arts and their work published in a book
- service users published a regular newsletter about their experiences with disabilities and their interests.

The personal planning system recorded service users' health and personal care needs and known preferences and choices to a good degree. Service users' essential needs were recorded, and kept up to date. The personal plans also considered restraint issues for each service user.

Reviews with service users evaluated with them what had been achieved, how well the service was meeting their needs and their continuing goals with the service. A commendable practice was how service users' wrote part of their own assessments of their skills programme, their achievements and goals for their reviews.

The service had a very good practice of updating its agreements with service users about the skills programme sessions they attend each time these changed so that how the service had changed over time could be easily reviewed.

Areas for Improvement

Personal plans did not say how personal care needs would be met according to service users' preferences and choices. (Recommendation 1)

To improve practice the service could improve the consistency with which; each skills programme was self evaluated by service users and evaluated by skills officers.

Grade awarded for this statement

5 - Very Good

Number of Requirements

0

Number of Recommendations

1

Recommendation

1.

The service should ensure that personal plans fully set out service users' needs and include their views about needs are met. National Care Standards, Support Services, Standard 4, Support arrangements and Standard 12 Expressing your views.

Quality Theme 2: Quality of Environment

Grade awarded for this theme: 6 - Excellent

Statement 1

We ensure that service users and carers participate in assessing and improving the quality of the environment within the service.

Service Strengths

There was excellent involvement of service users and carers in assessing and improving the quality of the environment.

A range of methods were used to ask for service users' and carers' views separately. There was an excellent range of outcomes from the consultation with service users and carers;

- a large toilet, where service users had space to get personal support, had been provided by removing a bath which was no longer suitable
- service users were consulted about using underused rooms for more service users groups and meetings
- service users were consulted about the new assisted shower room to be built by one of the internal entrances to the respite unit
- service users and carers were consulted on proposals to improve the skills centre as part of a redevelopment of the whole building.

Areas for Improvement

The service should continue and build upon its excellent practice.

Grade awarded for this statement

6 - Excellent

Number of Requirements

Number of Recommendations

Statement 2

We make sure that the environment is safe and service users are protected.

Service Strengths

Service users commented that staff were very aware of safety issues especially for; transport, personal care and moving and handling.

This inspection focused upon safety for service users' transport. A preventative approach to risk to individual service users was in place.

Examples of very good safety systems and practices in place included;

- Staff had to pass an external minibus test before driving the centre's minibuses.
- Care attendant/drivers were all briefed and observed on safe practice for; use of tail lift hoist, securing wheelchairs in the minibus, ensuring the safety of passengers, emergency procedures, visual checks of vehicles and regular checks on all equipment used.
- A senior staff member recorded that staff were competent in these practices. Staff confirmed they were supported to meet service users' needs safety and were instructed and trained to do their jobs safely and well.
- There were very thorough risk assessments and risk control measures in place for each aspect of transporting service users.
- The risk assessments were easy to read and understand and based upon advice from the Council's Safety officer and Moving and Handling Assessor.
- Staff had to have moving and handling training before undertaking any of these tasks, with annual refresher training being provided thereafter.
- Safety issues were discussed at weekly meetings for the care attendant/driver team.
- Each outing was assessed for the venue, service users' needs and staffing requirements.
- Attendant/drivers had up to date written information about service users' care needs and risk assessments. They also supported service users' behavioural and social needs to make the journey safe and pleasant.
- Attendant/drivers reported and recorded all incidents for their line manager, which were then followed up by senior staff.

As a model for other services the transport coordinator planned to make a training video and package for other services in the Social Work Department to share practical good practice for transporting service users.

Areas for Improvement

The service should continue and build upon its excellent practice.

Grade awarded for this statement

6 - Excellent

Number of Requirements 0

Number of Recommendations 0

Quality Theme 3: Quality of Staffing

Grade awarded for this theme: 4 - Good

Statement 1

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

Service Strengths

There was very good involvement of service users and carers in assessing and improving the quality of staffing.

A range of methods were used to ask for service users' and carers' views separately.

Service users are routinely involved in interviewing and selecting staff. Some representative service users ask questions at interview and are asked for their views on whether is appropriate to employ a new staff member. These views are taken seriously by the provider, who makes the ultimate decision to employ, and no differences of opinion have occurred to date.

Areas for Improvement

The service should continue and build upon its very good practice.

To improve practice the service should evidence more examples of improvement to staffing made in response to feedback from service users and carers.

Grade awarded for this statement

5 - Very Good

Number of Requirements

Number of Recommendations

0

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

There was good practice in this quality statement.

There were good outcomes for the staff induction practice in the service and good outcomes from the Council's safer recruitment policies, procedures and practice for all employees.

The service had a good induction programme for all new staff. The service's induction for all new staff covered their first few weeks working in the service. The induction ensured new staff;

- shadowed experienced and senior staff for several shifts
- were familiar with important policies, such as confidentiality and equal opportunities, moving and handling. A checklist was completed for this
- were confirmed after assessment that staff were competent in key tasks such as moving and handling and transport procedures.

The induction programme and checklist for competence was particularly thorough for the care attendant/drivers.

Staff progress in their induction was assessed at a supervision meeting with a senior member of staff. The assessment was evaluative as to whether competences were achieved and what further training and development to be planned in the near future.

A separate audit of the Council's, the provider, safer recruitment policies and procedures has been carried out by the Care Commission and found to be satisfactory. Generally the provider had taken time to prepare for the visit and files were well organised and presented.

The staff selection procedure was comprehensive and covered a range of issues such as application procedures, checking of fitness and the interview selection process. There were good systems in place to manage situations where Disclosure Scotland checks raised issues. An audit of 100 files indicated that practice within the service ensured than an application form was completed, appropriate references and checks were requested and the aims and values of the service were explained. There was evidence of very good processes in relation to assessing the medical fitness of prospective employees and the checking of references, particularly from the last employer.

Areas for Improvement

The induction process did not evaluate competencies such as the quality of interactions and use of appropriate social services when working with service users. The induction process did not assess direct care of service users for personal care. There was a lack of evidence of direct observations of practice and other sources of evidence of competence, such as record keeping and interactions with other staff and management. (Recommendation 1)

The Council does not currently undertake three yearly Disclosure checks for all employees but is planning to systematically introduce this over a period of time. In some of the files examined, although it was recorded that a Disclosure check had been completed, it was unclear whether the Disclosure check required further action. The Council advised in these circumstances the information was considered by a recruitment panel and a decision was made in relation to the suitability of the applicant.

In some of the files examined there were no Disclosure checks for ancillary staff. The Council advised they had sought guidance from Disclosure Scotland who indicated these were not necessary. However, the decision to obtain enhanced Disclosures rest with the Council who should consider this in relation to the protection of vulnerable adults and children. There was also no evidence of risk assessments for those employees who had not had a Disclosure check.

In some of the staff files examined identification information such as utility bills and passport information had been unnecessarily retained.

The Council could improve consistency in their practice in relation to evidencing staff skills. For example some files contained photocopies of qualifications whilst others did not.

There were some examples where staff had not completed additional application forms when moving to other posts within the Council notably from permanent contracts to supply posts. (Inspection Focus Area Recommendation 1).

There was some evidence that staff skills had been identified for those who had transferred within the organisation. However, the information held was not consistent and in some cases there was no information. (Inspection Focus Area Recommendation 2)

Grade awarded for this statement

4 - Good

Number of Requirements

Number of Recommendations 3

Recommendations

1.

The service's induction and ongoing assessment of staff competence should evidence and evaluate all essential care practice and use of social service's values. Standard 5, Management and staffing arrangements.

Safer Recruitment - Inspection Focus Area (IFA) outcome

The requirements and/or recommendations below reflect our view of the providers performance in meeting its legal responsibilities when recruiting staff and its compliance with best practice. This is as a result of an audit of the providers recruitment files.

Recommendation

1.

It is recommended that the provider ensure that a formal application process is followed for each period of employment. Scottish Social Services Council Code of Practice - Employer, Make sure people are suitable to enter the workplace - 1.1. and Standard 5 Management and staffing arrangements.

Recommendation

2.

It is recommended that the provider audits the procedures for the recording of staff skills and qualification records. Scottish Social Services Council Code of Practice - Employer, Make sure people are suitable to enter the workplace - 1.1. Standard 5 Management and staffing arrangements.

Quality Theme 4: Quality of Management and Leadership

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 management and leadership of the service.

Service Strengths

The service had excellent involvement of service users and carers in assessing and improving the quality of the management and leadership of the service.

Service users and carers were asked for their views separately. There was an excellent range of outcomes from the consultations which included;

- An action plan for the respite service and skills centre had been written based upon these consultations including service users' and carers' ideas for improvements.
- Service users were represented on a service user group, which met regularly with the management of the service to consult and agree on improvements to the service, such as new procedures and future plans for the service.
- The action plan, service users' group minutes and the collated feedback from consultations was made available to service users and carers.

Areas for Improvement

The service should continue and build upon this excellent practice.

Grade awarded for this statement

6 - Excellent

Number of Requirements

0

Number of Recommendations

0

Statement 3

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

Service Strengths

There were very good outcomes in this quality statement.

There was very good practice in this service of delegating decision making and responsibility to its staff for service users' care and skills programme and to senior staff to ensure the overall quality of the service.

Skills officers had delegated responsibility to;

- plan and lead skills modules
- plan individualised programmes for service users
- evaluate with service users their goals and progress with their individual programme.

Care attendant/drivers had delegated responsibility to;

- ensure safe transport for service users on each bus run and outing
- provide personal care to service users
- support skills groups
- assess risk for moving and handling and other care and support practice.

Senior staff had delegated responsibility to supervise skills officers and attendant staff practice and have an overview of service users' welfare, for example they;

- wrote and reviewed personal plans with service users to promote a consistent approach
- led team meetings for skills officers and attendant staff
- evaluated skills officer and attendant staff practice in supervision meetings
- identified training or development needs for skills officers and attendant staff
- led implementation of new developments, such as a new assessment and personal planning system, and developments of the skills programme.

There was very good communication between skills officers, attendant staff and senior staff about any significant developments for service users. There were regular separate team meetings for skills officers, attendant staff and senior staff to discuss service users' needs and programmes and ideas for improvement in the service.

Areas for Improvement

The service should continue and build upon its very good practice.

To improve practice responsibility to write personal plans, review service user programmes and lead on improvements to the service could be delegated to more staff.

Grade awarded for this statement

5 - Very Good

Number of Requirements 0

Number of Recommendations

Other Information

Complaints

There have been no complaints upheld or partially upheld since the last inspection.

Enforcements

There has been no enforcement 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 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).

Summary of Grades

Quality of Care and Support - 5 - Very Good			
Statement 1	6 - Excellent		
Statement 2	5 - Very Good		
Quality of Environment - 6 - Excellent			
Statement 1	6 - Excellent		
Statement 2	6 - Excellent		
Quality of Staffing - 4 - Good			
Statement 1	5 - Very Good		
Statement 2	4 - Good		
Quality of Management and Leadership - 5 - Very Good			
Statement 1	6 - Excellent		
Statement 3	5 - Very Good		

Inspection and Grading History

Date	Туре	Gradings	
22 Oct 2008	Announced	Care and support Environment Staffing Management and Leadership	5 - Very Good 5 - Very Good 5 - Very Good 5 - Very Good

Terms we use in our report and what they mean

Action Plan - When we inspect a service, or investigate a complaint and the inspection report highlights an area for improvement; either through recommendations or requirements, the action plan sets out the actions the service will take in response.

Best practice statements/guidelines - This describes practices that have been shown to work best and to be achievable in specific areas of care. They are intended to guide practice and promote a consistent and cohesive approach to care.

Care Service - A service that provides care and is registered with us.

Complaints - We have a complaints procedure for dealing with any complaint about a registered care service or about us. Anyone can raise a concern with us - people using he service, their family and friends, carers and staff.

We investigate all complaints which can have more than one outcome. Depending on how complex the complaint is, the outcomes can be:

- upheld where we agree there is a problem to be resolved
- not upheld where we don't find a problem
- partially upheld where we agree with some elements of the complaint but not all of them.

Enforcement - To protect people who use care services, the Regulation of Care (Scotland) Act 2001 gives the Care Commission powers to enforce the law. This means we can vary or impose new conditions of registration, which may restrict how a service operates. We can also serve an improvement notice on a service provider to make them improve their service within a set timescale. If they do not make these improvements we could issue a cancellation notice and cancel their registration.

Disclosure Scotland- Disclosure Scotland provides an accurate and responsive disclosure service to enhance security, public safety and protect the vulnerable in society. There are three types or levels of disclosure (i.e. criminal record check) available from Disclosure Scotland; basic, standard and enhanced. An enhanced check is required for people whose work regularly involves caring for, training, supervising or being in sole charge of children or adults at risk; or to register for child minding, day care and to act as foster parents or carers.

Participation - This describes processes that allow individuals and groups to develop and agree programmes, policy and procedures.

Personal Plan - This is a plan of how support and care will be provided. The plan is agreed between the person using the service (or their representative, or both of them) and the service provider. It is sometimes called a care plan mostly by local authorities or health boards when they commission care for people.

How you can use this report

Our inspection reports give care services detailed information about what they are doing well and not so well. We want them to use our reports to improve the services they provide if they need to.

Care services should share our inspection reports with the people who use their service, their families and carers. They can do this in many ways, for example by discussing with them what they plan to do next or by making sure our report is easily available.

People who use care services, their relatives and carers

We encourage you to read this report and hope that you find the information helpful when making a decision on whether or not to use the care service we have inspected. If you, or a family member or friend, are already using a care service, it is important that you know we have inspected that service and what we found. You may find it helpful to read previous inspection reports about his service. scottish commission for the regulation of care



The Care Commission

We use the information we gather from all our inspections to report to Scottish Ministers on how well Scotland's care services are performing. This information helps us to influence important changes they may make about how care services are provided.

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Translations and alternative formats

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Tha am foillseachadh seo ri fhaighinn ann an cruthannan is cànain eile ma nithear iarrtas.

অনুরোধসাপেক্ষে এই প্রকাশনাটি অন্য ফরম্যাট এবং অন্যান্য ভাষায় পাওয়া যায়।

- یه بایتسد می مونابز رگید روا مولکش رگید رپ شرازگ تعاشا می

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

.ىرخ أتاغلبو تاقى سنتب بلطلا دنع رفاوتم روشنمل اذه

本出版品有其他格式和其他語言備索。

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

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Improving care in Scotland