REPORT TO: HOUSING COMMITTEE - 25 AUGUST 2014

REPORT ON: INSPECTION OF SHELTERED HOUSING WARDEN SERVICE BY THE

CARE INSPECTORATE

REPORT BY: DIRECTOR OF HOUSING

**REPORT NO: 298-2014** 

#### 1. PURPOSE OF REPORT

1.1. The purpose of this report is to report on findings of the Care Inspectorate inspection of the Sheltered Housing Warden Service.

#### 2. RECOMMENDATIONS

- 2.1. It is recommended that the Housing Committee:
  - i. Notes the contents of this report, and
  - ii. Instructs the Director of Housing to monitor progress towards meeting the areas for improvement contained in this report.

#### 3. FINANCIAL IMPLICATIONS

3.1. None.

#### 4. MAIN TEXT

- 4.1. The Sheltered Housing Warden Service was inspected in February 2014 by the Care Inspectorate. They published a report on their findings and this is attached as Appendix 1.
- 4.2. The Care Inspectorate identified the following key strengths of the service:
  - Tenants of the service who responded to the questionnaires or who were interviewed by staff, stated that the wardens provide a good person centred, caring service which they appreciate and which enables them to remain safely in their own home.
  - The service also listens to constructive comments and takes action in an effort to improve the outcome for service users and staff.
  - Comments included:
    - o "We have Tai Chi classes each week I love these."
    - o "I can't live without my warden they are so good to me and often go that extra mile without being asked."
    - o "Caring, friendly and very approachable and taking their time to get to know you and they never talk at you and this means a lot to me."
    - o "Yes I feel safe in my wee house knowing that the wardens are around at certain times and that I have the pull cord when they are not."
  - Folders with information about the service and the service's policies and procedures are available to tenants in common rooms.
  - Comment boxes are available in each complex.
  - There is a Management Roadshow for staff which takes place on a quarterly basis and includes information regarding the Sheltered Housing Service.

- The service encourages tenants who require advice and support outwith their carers and families to use an advocacy service.
- Wardens whom we met during this inspection were very aware of each tenant's medical needs.
- Newsletters are produced by the Housing Service quarterly and include information regarding the Sheltered Housing Service.
- Wardens assist tenants in organising events to keep fit, for example, exercise classes and swimming which they thoroughly enjoy.
- Tenants we spoke with during the inspection all stated that wardens knew how to care for them and supported them fully.
- The tenants reported that the service they receive from the wardens is professional, person centred and caring. They appreciate the commitment of the wardens and the service that they receive which enables them to stay in their own homes.
- There are notice boards in each complex and the ones we saw were up to date with pertinent information about what was going on at the individual complexes.
- There are policies and guidance available to staff. Guidance on Lone Working is contained in the Employee Handbook and the service has an up to date Adult Protection Policy. Other relevant policies are available to staff.
- There are a variety of activities available to tenants. Some have been organised by the tenants and some by the wardens. Those include regular exercise classes, beauty therapy sessions, bingo afternoons, afternoon dances, "chippie" teas with some complexes having Christmas dinners at local hotels and New Year parties.
- There is evidence that the manager of the service now has regular supervision meetings with the senior wardens and minutes are produced of those meetings. This, one anticipates, will allow for consistency in approach with staff and, where appropriate, tenants.
- As a means of undertaking quality assurance wardens complete a weekly checklist of tasks and send this to the manager.
- No complaints have been upheld, or partially upheld, since the last inspection.

#### 4.3. Evaluations

- 4.3.1. The following were identified as requirements for improvement:
  - The service Involvement Strategy requires to be completed.
  - The service needs to address the issue of awarding permanent contracts to the service's staff.
  - The service must ensure at all times, suitably qualified and competent persons are working
    in the service in such numbers as are appropriate for the health and welfare of the service
    users.
  - A provider shall provide the service in a manner which promotes and respects the independence of the service user and, so far as it is practicable to do so, affords them the choice in the way that the service is provided to them.
  - The provider shall 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 are
    exceptional circumstances.
  - The service shall provide a written statement of the Aims and Objectives of the service.
  - The provider shall have regard to the size and the nature of the service, the statement of Aims and Objectives and the number of needs of the service users to ensure the service must ensure at all times, suitably qualified and competent persons are working in the service in such numbers as are appropriate for the health and welfare of the service users.
- 4.3.2. The following were identified as recommendations for improvement:
  - The manager must encourage and include tenants in ensuring the quality of the service offered meets the needs of the tenants.
  - The manager must consult with staff to enable them to carry out duties to the best of their ability and be trained to carry out the roles of the warden service.

• The manager must encourage and include tenants in ensuring the quality of the service offered meets the needs of the tenants.

#### 4.4. Grading

4.4.1. The Care Inspectorate reports use a six-point scale for reporting performance:

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

4.4.2. The following grades were awarded:

Theme	Individual Grade Awarded	Overall Grading
Quality of Care and Support	Statement 1 - (3) - Adequate Statement 3 - (3) - Adequate	(3) - Adequate
Quality of Staffing	Statement 1 - (3) - Adequate Statement 3 - (3) - Adequate	(3) - Adequate
Quality of Management and Leadership	Statement 1 - (3) - Adequate Statement 4 - (2) - Weak	(2) - Weak

4.5. An Action Plan to meet the recommendations in the Care Inspectorate report has been agreed and submitted. The Action Plan is attached as Appendix 2.

#### 5. **POLICY IMPLICATIONS**

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

#### 6. **CONSULTATION**

6.1. The Chief Executive, Director of Corporate Services, Head of Democratic and Legal Services and all other Chief Officers have been consulted in the preparation of this report. No concerns were expressed.

#### 7. BACKGROUND PAPERS

7.1. None.

ELAINE ZWIRLEIN DIRECTOR OF HOUSING

**AUGUST 2014** 



# Care service inspection report

# Dundee City Council - Sheltered Housing Warden's Service

Housing Support Service

West District Housing Office 3 Sinclair Street Dundee DD2 3DA

Telephone: 01382 307321

Inspected by: Elma Davidson

Type of inspection: Announced (Short Notice)
Inspection completed on: 21 February 2014



# Contents

	Page No
Summary	3
1 About the service we inspected	6
2 How we inspected this service	8
3 The inspection	13
4 Other information	26
5 Summary of grades	27
6 Inspection and grading history	27

### Service provided by:

Dundee City Council

### Service provider number:

SP2003004034

### Care service number:

CS2006118106

### Contact details for the inspector who inspected this service:

Elma Davidson Telephone 01383 841100 Email enquiries@careinspectorate.com



# Summary

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

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

### We gave the service these grades

Quality of Care and Support 3 Adequate

Quality of Staffing 3 Adequate

Quality of Management and Leadership 2 Weak

#### What the service does well

Tenants of the service who responded to the questionnaires or who were interviewed by staff, stated that the wardens provide a good person centred, caring service which they appreciate and which enables them to remain safely in their own home.

The service also listens to constructive comments and takes action in an effort to improve the outcome for service users and staff. This was demonstrated by the fact that the settings on the "motion sensors" within each of the designated houses have been fine tuned following an incident at the end of the 2013. An additional comment will be added to the Missives which will advise that there are motion sensors installed in each tenancy.

The Housing Department is planning to move toward using Smart Technology and they have stated they will inform tenants of any developments.

Meetings now take place between management and senior wardens to improve communication and ensure consistency of the service.

A deputy has been appointed to the Housing Service Manager. This will mean that the manager of the service will be offered more direct support and this person will also attend the warden manager meetings.

#### What the service could do better

We were told that the service has been under review for at least the last two years and the staff feel that this is a hinderance to the development of the service especially to the staff being able to acquire permanent contracts. Better communication with regard to this topic would help staff realise the situation as well as tenants being properly acquainted with the facts. Senior Management are of the view that this has been addressed but the information/feedback during this inspection would indicate this is not the case.

Senior management advised they have a development plan for the service but again this plan did not seem to be known by the staff and tenants. Staff and tenants have also expressed concerns that some tenancies within sheltered complexes are being allocated to tenants who do not require sheltered housing. Such decisions need to be made for the benefit of the service as a whole but need to be clearly and effectively conveyed to the various parties.

Better communication needs to be implemented at operational level which is clear and consistent and leaves no one in any doubt as to the plans and direction of travel for this service. This uncertainty is causing stress to residents and staff - especially staff not at management levels.

Motion sensors are installed in every flat in all complexes and we have concerns, which are shared by the Mental Welfare Commission, about the apparent lack of awareness and permission undertaken by the service regarding this issue.

As stated in the last report the service had been experiencing a staff shortage resulting in a high level of unfamiliar staff working in various complexes.

Although the Housing Department have access to the Dundee District Council training options, the service still requires to draft a training plan relevant for the Sheltered Housing Service which clearly identifies via the staff supervision sessions what their training needs are.

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

The manager stated that she is now a year in post and feels more confident in her role.

The manager told us that she meets with Senior Wardens on a regular basis.

The Housing Department has now appointed a manager to offer support and supervision to the manager of this service.

### Conclusion

All the tenants spoken with during this inspection feel well supported by their wardens. They told us they enjoy the activities arranged and feel safe in their homes. During this inspection we observed some good quality friendly discussion between wardens and tenants and tenants stated that wardens knew them well and they felt they had a good knowledge of their support needs.

### Who did this inspection

Elma Davidson

Lay assessor: Mrs Winnie Whyte



# 1 About the service we inspected

The Care Inspectorate regulates care services in Scotland. Information about all care services is available on our website at www.careinspectorate.com

This service was previously registered with the Care Commission and transferred its registration to the Care Inspectorate on 1 April 2011.

Requirements and recommendations

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

- 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, relevant codes of practice and recognised good practice.
- A requirement is a statement which sets out what is required of a care service to comply with the Public Services Reform (Scotland) Act 2010 and Regulations or Orders made under the Act or a condition of registration. Where there are breaches of Regulations, Orders or Conditions, a requirement must be made. Requirements are legally enforceable at the discretion of the Care Inspectorate.

Dundee City Council - Sheltered Housing Warden Service is registered to provide a housing support service to tenants of Dundee City Council. The key feature of the service is the warden led service with each flat having an emergency alarm. The service meets the needs of tenants who are aged 60 or over. The service also provides very sheltered housing to meet the needs of frail older people who require additional support to live in their own homes. This service would include tenants who suffer from dementia, physical disabilities, learning disabilities and mental ill. The service is available to approximately 2000 tenants in 36 sheltered housing complexes.

The housing support service is provided by the manager, eight senior wardens and about 80 wardens. The wardens are on duty in each complex every day of the week, usually between 8.00am and 2.30pm or 4.00pm, depending on the day of the week, but they may be on duty at specified times outside these hours. The tenants are notified in writing about the availability of the warden service in each complex. Tenants are linked to the Community Alarm service outside these hours.

The role of the wardens is to support tenants to live independently with the minimum of intrusions. Wardens check twice daily whether each tenant is active in their home through a mat or motion detector and speak with each tenant daily by intercom or phone. Wardens visit tenants in their home at an agreed frequency. Wardens also assist tenants with filling in forms, dealing with correspondence, contacting health and support agencies and assist tenants to stay safe and well in their home. Wardens assist tenants to organise social activities and a comfort fund for each development. Wardens do not provide personal care, except in an emergency.

Tenants have the use of laundry facilities and a communal lounge in each development.

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

Quality of Care and Support - Grade 3 - Adequate
Quality of Staffing - Grade 3 - Adequate
Quality of Management and Leadership - Grade 2 - Weak

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

Grades for this care service may change following other regulatory activity. You can find the most up-to-date grades for this service by visiting our website www.careinspectorate.com or by calling us on 0845 600 9527 or visiting one of our offices.

# 2 How we inspected this service

### The level of inspection we carried out

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

### What we did during the inspection

During this inspection we looked at:

- the registration forms displayed in complexes
- the insurance documentation
- the service's annual return and the self assessment
- the returned Care Service Questionnaires both from tenants and staff
- · policies and procedures
- senior wardens' supervision notes
- minutes of meetings
- the newsletter
- the calendar of activities planned
- the report on a recent incident and the engineer's report on the monitoring system
- tenants' files
- the notice boards in the complexes
- minutes of tenant and warden meetings
- the tenancy contract which is signed and given to each tenant.

### We spoke with:

- The City Housing Manager
- The Housing Service Manager
- · The Manager of the service
- · 8 wardens and one senior warden
- 1 Domestic Assistant
- 7 tenants
- The Mental Welfare Commission
- · 47 tenants by phone

The Lay Worker spoke with:

- 11 tenants and one relative face to face in one complex
- 14 tenants by telephone.

### Grading the service against quality themes and statements

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

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

### Inspection Focus Areas (IFAs)

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

### Fire safety issues

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

# What the service has done to meet any recommendations we made at our last inspection

### Recommendation Quality Theme 1.1

It is recommended that tenant notice boards are displayed in a way which encourages tenants to use them to refer to regular events and updates.

National Care Standards - Housing Support - Standard 6 - Choice and Communication.

The notice boards have now been cleared of policies, etc. and those are held in a folder in the common room resulting in only essential notice and information for tenants on display.

This recommendation has now been addressed.

#### Recommendation Quality Theme 1.3

It is recommended that where there is a change of regular warden, that the service inform tenants of those changes.

Tenants spoken with during this inspection stated that this does not always happen.

This recommendation has therefore not yet been addressed and remains outstanding. Please see Theme 4, Statement 4 of this report.

### Recommendation Quality Theme 3.1

 The service should develop a training plan for all staff based on their training needs analysis for new and experienced staff. This is to ensure that the service and its staff can respond appropriately and in an informed manner to tenants' health, welfare and safety needs.

This recommendation has therefore not yet been addressed and remains outstanding. Please see requirement 1 of Theme 4, Statement 4 of this report.



It is recommended that the service consolidates management systems across all
complexes. This is in order to ensure that staff working across different areas are
easily able to access the required information in order to provide the best support to
tenants.

Senior Wardens have been placed over eight complexes but access to the same information is still being developed to ensure a consistent quality service to tenants.

This recommendation has not been fully addressed and further progress is needed.

#### The annual return

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

Annual Return Received: Yes - Electronic

#### Comments on Self Assessment

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

We received a very full Self Assessment from the service and during this inspection. We discussed with the manager the benefit of being more focused and concise in completing this report.

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

"We have Tai Chi classes each week - I love those"

"I can't live without my warden they are so good to me and often go that extra mile without being asked"

"I wish they (the Council) would make sure the staff were looked after better as there have been times when there has only been one on duty and this is a big complex for 1 person to cover"

"Caring, friendly and very approachable and taking their time to get to know you and they never talk at you and this means a lot to me" (talking about the wardens)

"There are some new members of staff and we are going to have a meeting so we can meet them"

Dundee City Council - Sheltered Housing Warden's Service, page 11 of 28

"Yes I feel safe in my wee house knowing that the wardens are around at certain times and that I have the pull cord when they are not"

"We feel safe in the house but have concerns if a fire engine or ambulance is required regarding when cars are parked in the street as they park at the entrance of our culde-sac and the emergency services can not get through. Double yellow lines would make it safer."

"Well it is a matter of opinion as the wardens are brilliant but they are always short staffed and we pay for 2 wardens so why do we not get 2 no one will give me an answer all I get is short staffed. Why"

"I was not given the choice of an alarm when the housing officer showed me the house and the alarm was already in it"

"I am not very well at the moment and they (the wardens) pop in and will run small errands for me and they will also contact my GP (General Practitioner) for me"

"It would be good to see the main complex being decorated and refurbished and it can be a bit dirty as I feel that the cleaner does not do her job"

"I would like to say the management team do not acknowledge me when we meet and they talk down to me when they do speak which is not very often"

"Yes we have called for help but no one came as the warden was caught up with something else. I think it depends on where they are at the time".

### Taking carers' views into account

"We could use a handyman to shift heavy equipment like tables and chairs"

"The community room is tired and carpet is dirty. We have been promised refurbishment but to date this has not happened"

# 3 The inspection

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

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

Grade awarded for this theme: 3 - Adequate

#### Statement 1

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

### Service strengths

The service was awarded an adequate grade for this Quality Statement. We decided this after we spoke with the City Housing Manager, Housing Service Manager, the Manager of the service, staff and tenants and looked at appropriate documentation.

The Manager of the service stated that the service's involvement strategy is currently being updated.

Some complexes hold tenant and warden meetings and the wardens ensure that all tenants receive a copy of the minutes.

Questionnaires have been issued and are currently being collated.

Senior wardens hold meetings at 4 to 6 week intervals.

Comment boxes are available in each complex.

1x1 meetings take place between wardens and tenants.

Folders with information about the service and the service's policies and procedures are available to tenants in common rooms.

Newsletters are produced by the Housing Service quarterly and include information regarding the Sheltered Housing Support Service.

There is a Management Road Show for staff which takes place on a quarterly basis and includes information regarding the Sheltered Housing Service.

One of the tenants produces a newsletter about their complex and copies are available to tenants within that complex.

The service encourages tenants who require advice and support outwith their carers and families to use an advocacy service.

#### Areas for improvement

The Involvement Strategy review needs to be completed as soon as possible. (See requirement 1a of this Statement).

Tenants have told us that they have written to senior management and the Lord Provost with concerns about the service. Those concerns include perception by tenants that there are low staffing levels. It was commented during this inspection that there was often only one warden on duty in a large complex as well as regular transfers of staff between complexes. It was also alleged that there is a lack of consistent information to tenants about changes in staffing. Senior management have met with tenants but tenants state they also appear unable to do anything about this situation. Some tenants state this leaves them feeling anxious and unsupported.

(See requirement 4 of Theme 4, Statement 4 of this report).

Evidence supplied by the Senior Management shows that the staffing levels have not fallen and that the quality of staff being recruited continues to rise. The service manager requires to find ways to convey this factual information to tenants and thus alleviate tenants' anxiety.

Staff sickness could play a part in the apparent lack of staff and the service could give consideration into looking at employing some bank staff which could help the situation

The supervision meetings between the manager of the service and the senior wardens should include helping them to organise their workload and deliver on required tasks in a positive meaningful way. Requests made to them need to be consistent and achievable in order that the tenants feel that the service is managed and staffed accordingly.

(See requirement 1 of this Statement).

Additional support and training would assist the registered manager to enable the senior wardens to undertake staff supervision and appraisals within their allocated hours.

(See requirement 1 of this Statement).

Grade awarded for this statement: 3 - Adequate

Number of requirements: 1

Number of recommendations: 2

### Requirements

- a) The service Involvement Strategy requires to be completed...
  - b) The service needs to address the issue of awarding permanent contracts to the service's staff.

SSI210/2011 Regulation 15 - Staffing.

Timescale: This must be completed within 12 weeks of this report.

#### Recommendations

 The manager must encourage and include tenants in ensuring the quality of the service offered meets the needs of the tenants.

National Care Standards - Standard 8 - Being encouraged to make your views known on any aspect of the housing support service.

The manager must consult with staff to enable them to carry out duties to the best of their ability and be trained to carry out the roles of the warden service.

National Care Standards - Standard Management and Staffing Arrangements - Standard 3.

#### Statement 3

We ensure that service users' health and wellbeing needs are met.

### Service strengths

The service was awarded an adequate grade for this Quality Statement. We decided this after we spoke with the senior management, the manager of the service, staff and tenants and looked at appropriate documentation.

Wardens whom we met during this inspection were very aware of each tenant's medical needs.

Revised recording systems have been introduced in some of the complexes which give written permission for information to be shared with third parties should there be an admission to hospital - for example.

Wardens assist tenants in organising events to keep fit, for example, exercise classes and swimming which they thoroughly enjoy attending.

Healthy meals are provided by an outside caterer at the very sheltered complex.

Tenants we spoke with during this inspection all stated that wardens knew how to care for them and supported them fully.

Several tenant's stated that wardens go "above and beyond" in caring and we saw evidence of thoughtful, appropriate support being given to a tenant who was just out of hospital.

#### Areas for improvement

Staff state that although the Local Authority had a training programme they felt they urgently needed to have training in mental health issues as well as working with older people and substance abuse. Addressing this declared need requires to be given priority, given the identified needs of clients by both social work and housing.

Grade awarded for this statement: 3 - Adequate

Number of requirements: 0

Number of recommendations: 0

### Quality Theme 3: Quality of Staffing

Grade awarded for this theme: 3 - Adequate

#### Statement 1

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

### Service strengths

The service was awarded an adequate grade for this Quality Statement. We decided this after we spoke with the senior management, the manager of the service, staff and tenants and looked at appropriate documentation.

The tenants reported that the service they receive from the wardens is professional, person centred and caring. They appreciate the committment of the wardens and the service that they receive which enables them to stay in their own homes.

Several of the complexes have regular tenant meetings and minutes of those meetings are posted to tenants within the specific complexes.

There are notice boards in each complex and the ones that we saw were up to date with pertinent information about what was going on at the individual complexes.

Tenants each have individual files which are kept within their complex.

There are policies and guidance available to staff. Guidance to Lone Working is contained in the Employee Handbook and the service has an up to date Adult Protection Policy. Other relevant policies are available to staff.

There are a variety of activities available to tenants. Some have been organised by tenants and some by the wardens. Those include regular exercise classes, beauty therapy sessions, bingo afternoons, afternoon dances, "chippie" teas with some complexes having Christmas dinners at local hotels and New Year parties.

Most of the complexes have comfort funds to enable them to raise money for improvements or classes within their complexes. The funds are held by wardens and are audited on a regular basis. Fund raising includes raffles, weekly bonus ball, as well as applications by wardens and tenants for specific monies from various funding bodies.

There is evidence that the manager of the service now has regular supervision meetings with the senior wardens and minutes are produced of those meetings. This, one anticipates will allow for consistency in approach with staff and where appropriate tenants.

#### Areas for improvement

Tenants' personal files are in the process of being updated and wardens have advised that this was a task which had been delegated to them. The time frame for achieving this was quite short and given this was a task which some staff were unfamiliar with it had raised anxiety within the staff group. To have files truly person centred some additional discussion, training and support should have been agreed with staff in order to help with their confidence in achieving the task. There is an acquired skill to the process of information gathering, interviewing tenants and writing the reports. These are all essential steps to producing a quality person centred assessment.

Consideration should be given to establishing a work plan for all staff which is realistic with the contents being of benefit both to staff development and residents' needs.

Management have told us that where management are given appropriate notice from staff who are unable to attend work, the staff within the complex will be the first to be approached to cover the shift. This ensures that the staff are familiar with the service and the tenants know the staff member. If this is not possible then staff will be sought from the wider core where staff are familiar with the service and tenants. Only if it is not possible to obtain cover in this way would the service approach staff from elsewhere in the service. If time allows the worker who is covering could go to the service and gain essential information about the running of that specific service or if available the worker could contact the worker being covered. Management state that the service manager is available if there are any problems.

Where management are given appropriate notice of the need for a change in staffing tenants will be notified either face to face or via the daily intercom system. If little or no advanced notice is given then it is acknowledged that this is a difficult situation for both staff and tenants and management should ensure that staff and tenants are aware of the difficulties and the system that is presently used to obtain staff cover. Perhaps the service should consider having an information booklet on the service to assist staff who are placed without prior knowledge of the service.

Many of the tenants spoken with stated they are very concerned about the high level of work wardens are expected to undertake. Some tenants told us that there was only one warden on duty in a complex for a number of months.

New staff require to complete induction training and this should be planned, recorded and undertaken over a period of time and include specific training, for example, report writing, roles and responsibilities, awareness of mental health issues etc. Future



training dates should be agreed as well as supervision and support dates and personal development meetings. Recently appointed new members of staff do not appear to have received any induction training as we were unable to locate any record of this and the new members of staff confirmed that this training and support had not taken place.

Access to training as well as how to identify and access training should be clearly explained to all staff. The importance of supervision and support and personal development meetings should also be arranged and discussed and this should allow for clarity within the whole staff group and shared understanding of the work of the service. For the purposes of continuity a supervision and personal development plan should be developed by management. The senior wardens with the support of the manager should produce a realistic supervision plan for the staff they are responsible for. Any meetings or discussion with staff should produce accurate minutes of the topics discussed and as per good practice guidance minutes should be agreed and signed by both parties.

Concerns were expressed to the visiting inspectors by staff, that they had not been offered the support they felt they needed following a recent major incident. Senior management felt they had considered offering support but had decided against this. Unfortunately the reason why the support/debriefing was not offered had not been conveyed to the staff group and it is strongly recommended that such communication needs are considered for this staff team.

The service should consider reviewing their policy regarding staff attendance at the funeral of tenants who they may have worked with over a number of years.

(See outstanding recommendation 2 at Theme 3, Statement 1 in the previous report).

Grade awarded for this statement: 3 - Adequate

Number of requirements: 0

Number of recommendations: 0



#### Statement 3

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

### Service strengths

The service was awarded an adequate grade for this Quality Statement. We decided this after we spoke with the senior management, the manager of the service, the staff and the tenants and discussed training needs.

### (Please see Theme 1, Quality Statement 1 of this report).

Tenants state that the service that they receive from their individual wardens "is second to none".

The service has issued questionnaires and the response was poor so wardens are encouraged to carry out 1x1 meetings with tenants which are recorded in their personal files.

An 8 week rota for senior wardens has recently been introduced in an attempt to get more consistency of service in each complex. Wardens report that there is a "good sense of team" within their individual complex staff team.

The manager told us that there is a service improvement team that have met on two occasions in September and October 2013 but to date have not reported back.

#### Areas for improvement

Although there is a Dundee City Council training department the manager when asked was unable to produce a training plan for staff employed within this service. This matrix requires to be developed following the individual supervision and support sessions.

Wardens told us that they urgently needed training in mental health issues, dementia, dealing with addiction issues and working with older people. Tenants with additional needs require specialist support and staff must receive the training to offer such support. Staff stated they had experienced difficulties in sourcing such training. Management need to be supportive to ensure the best service possible.

There is no audit trail of tenants being involved with the improvements and development of the service. Tenants spoken with during this inspection confirmed this.

Grade awarded for this statement: 3 - Adequate

Number of requirements: 0

Number of recommendations: 0

Dundee City Council - Sheltered Housing Warden's Service, page 20 of 28



### Quality Theme 4: Quality of Management and Leadership

Grade awarded for this theme: 2 - Weak

#### 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 was graded an adequate grade for this Quality Statement. We decided this after we spoke with the senior management, the manager of the service, senior wardens, staff and the tenants.

### (Please see Theme 1, Quality Statement 1 of this report).

This service is a much needed resource for the city of Dundee although uptake of late has meant that there has been some decommissioning of properties being allocated which were identified as sheltered housing.

Management told us that they are looking at additional ways in which they can more actively involve tenants in the improvement of the service.

#### Areas for improvement

The manager of the service should look to the development of methods to better capture the concerns of tenants and the development of strategies to deal with them.

Methods to capture the information from the questionnaires tenants are being asked to complete needs to be considered. In particular tactics for quickly demonstrating "you said - we did" would be beneficial to the service, staff and tenants. (See recommendation 1 of this Statement).

Grade awarded for this statement: 3 - Adequate

Number of requirements: 0

Number of recommendations: 1

### Recommendations

 The manager must encourage and include tenants in ensuring the quality of the service offered meets the needs of the tenant. This should be ongoing.

National Care Standards - Being encouraged to make your views known on any aspect of the Housing Support Service.

#### Statement 4

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

### Service strengths

The service was awarded a weak grade for this Quality Statement. We decided this after we spoke with the senior management, the manager of the service, staff, tenants and read relevant reports.

The senior management of this service are aware of the need to improve communication and look at the evolving needs of older people within the city of Dundee

As a means of undertaking quality assurance wardens complete a weekly checklist of tasks and send this to the manager.

### Areas for improvement

We were told that there has been a review of service which has been ongoing for at least the last 2 years. We were advised that due to this little or no funding for training had been released and that new staff were only being offered temporary contracts. On exploring this claim it became apparent that the senior management within the housing department have undertaken a review of the service and have a clear direction of travel in mind. Regrettably this information for whatever reason had not been filtered down to operational staff within the registered service and we are very concerned about the effect that this has on the staff and subsequently the tenants.

We also uncovered that the staff can/would have access to training provided by the Council however this is not happening currently. We were advised it is the intention to improve this with the roll out of the support and supervision sessions, as well as the latest round of Employe Performance and Development reviews. However at the time of the inspection staff were very clearly indicating that they were not receiving the necessary training.

The staff we spoke with are professional and strive to give the best service to their tenants but are not familiar with the Quality Assurance methods being discussed at senior management and management level.

The manager of the service did not present pertinent information to the inspectors during this inspection.

We have been told that each housing unit is fitted with a permanent motion sensor. We believe that this can be mentioned to prospective tenants while they are viewing the tenancy. We have some concerns about this system and tenants' rights.



We spoke with the Mental Welfare Commission and discussed rights, risks and limits to freedom and they stated that they agreed with us that this sensor could be an infringement of people's privacy. Since the inspection steps have now been taken to address this and information in relation to this is to be contained in the missives.

The information given to the inspectors at the various meetings differed somewhat from the information inspectors were able to gain from senior management. (See requirement 2 of this Statement).

This is a regulated service with a registered manager. Although senior management have a clear idea of the future direction of this service and of the systems to monitor and evaluate it this information is, at present, not shared at the operational level of the service.

Grade awarded for this statement: 2 - Weak

Number of requirements: 4

Number of recommendations: 0

### Requirements

 The service must ensure at all times, suitably qualified and competent persons are working in the service in such numbers as are appropriate for the health and welfare of the service users.

SSI210/2011 Regulation 15 - Staffing

Timescale: 6 months from receipt of this report.

a) A provider shall provide the service in a manner which promotes and respects
the independence of the service user and so far as it is practicable to do so affords
them the choice in the way in which the service is provided to them.

SSI210/2011 Regulation 3 - Principles

b) The provider shall 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 are exceptional circumstances.

SSI210/2011 Regulation 4 - Welfare of users and the Mental Welfare Commission for Scotland - "Rights, Risks and Limits to Freedom".

Timescale: 6 weeks from receipt of this report.



The service shall provide a written statement of the Aims and Objectives of the service.

SSI210/2011 Regulation 3 - Principles

Timescale: within 8 weeks of the receipt of this report.

- 4. The provider shall have regard to the size and the nature of the service, the statement of Aims and Objectives and the number of needs of the service users to:
  - (a) ensure at all times that suitably qualified and competent persons are working in the service in such numbers as are appropriate for the health and welfare of the service users.

SSI210/2011 Regulation 3 - Principles, Regulation 15 - staffing.

Timescale: within 6 months of this report.

### 4 Other information

### Complaints

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

### **Enforcements**

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

### Additional Information

### Action Plan

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

# 5 Summary of grades

Quality of Care and Support – 3 – Adequate			
tatement 1 3 - Adequate			
Statement 3	3 - Adequate		
Quality of Staffing - 3 - Adequate			
Statement 1 3 - Adequate			
Statement 3	3 - Adequate		
Quality of Management and Leadership – 2 – Weak			
Statement 1	3 - Adequate		
Statement 4 2 - Weak			

# 6 Inspection and grading history

Date	Туре	Gradings	
30 Jan 2013	Announced (Short Notice)	Care and support Staffing Management and Leadership	4 - Good 3 - Adequate 4 - Good
17 Jun 2011	Unannounced	Care and support Staffing Management and Leadership	3 - Adequate 3 - Adequate 3 - Adequate
7 May 2010	Announced	Care and support Staffing Management and Leadership	4 - Good 4 - Good 3 - Adequate
4 Jun 2009	Announced	Care and support Staffing Management and Leadership	3 - Adequate 3 - Adequate 3 - Adequate

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

### To find out more about our inspections and inspection reports

Read our leaflet 'How we inspect'. You can download it from our website or ask us to send you a copy by telephoning us on 0845 600 9527.

This inspection report is published by the Care Inspectorate. You can get more copies of this report and others by downloading it from our website: www.careinspectorate.com or by telephoning 0845 600 9527.

#### Translations and alternative formats

This inspection report is available in other languages and formats on request.

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

অনুরোধসাপেকে এই প্রকাশনাটি অন্য ফরম্যাট এবং অন্যান্য ভাষায় পাওয়া যায়।

-- بایتسد ریم روزابز رگید روا رولکش رگید رپ شرازگ تعاشل می

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

عرخا تناغلبو تناقى سنتب بلطلا دنع رفاوتم روشنملا 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.

Telephone: 0845 600 9527

Email: enquiries@careinspectorate.com

Web: www.careinspectorate.com



### **ACTION PLAN**

Service Name:	Dundee City Council - Sheltered Housing Warden Service
CS Number:	2006118106
Service Provider:	Dundee City Council
Address:	West District Housing Office, 3 Sinclair Street, Lochee, Dundee, Dundee DD2 3DA
Care Inspectorate Inspection Officer:	Elma Davidson
Date Inspection Concluded:	21 February 2014

Requirements and Recommendations	Action Planned	Timescale	Responsible Person
Quality Theme 1, Statement 1  Requirements			
1a). The service Involvement Strategy requires to be completed.	A proposed Involvement Strategy, to ensure that service users have the opportunity to be involved in how the service develops and is improved, has been drafted. The Strategy sets out how the service will take on board the views of sheltered tenants and their carers and how the service will involve them in service development. Examples of how this will be delivered include 6 monthly reviews of Support Plans, an Annual Tenants Survey, regular tenant/warden meetings and through a 6 monthly meetings of the Sheltered Tenants Representative Forums.  The redrafted Involvement Strategy has been consulted upon and agreed within the service by both warden staff and also at the recent Sheltered Tenants Representative Forum Meetings on 29 April and 2 May 2014.	To be completed end August 2014	S. Steen, Housing Services Team Leader

		ı	
1b). The service needs to address the issue of awarding permanent contracts to the service's staff.	The recent conclusion of the Sheltered Housing Review has allowed the service to move to make temporary Sheltered Housing staff permanent.	To be completed effective from 1 August 2014.	D. Simpson, City Housing Manager
Recommendations			
The manager must encourage and include tenants in ensuring the quality of the service offered meets the needs of the tenants.	The Involvement Strategy detailed above addresses this recommendation.	To be completed end August 2014.	S. Steen, Housing Services Manager
2. The manager must consult with staff to enable them to carry out duties to the best of their ability and be trained to carry out the roles of the warden service.	The service will continue to develop the Senior Sheltered Housing Wardens to provide support, guidance and assistance and to ensure that relevant and appropriate training needs are identified. This will be achieved through regular communication with warden staff and specifically through support and supervision sessions and the staff undertaking the latest Employee Performance Development Review Scheme (EPDR).	All Sheltered Housing Staff to complete EPDR by end September 2014.	S. Donaldson, Sheltered Housing Supervisor/Senior Sheltered Housing Wardens.
Quality Theme 4, Statement 1			
Recommendations			
The manager must encourage and include tenants in ensuring the quality of the service offered meets the needs of the tenants.	The Involvement Strategy detailed above addresses this recommendation.	To be completed end August 2014.	S. Steen, Housing Services Manager
Quality Theme 4, Statement 4			
Requirements			
1. The service must ensure at all times, suitably qualified and competent persons are working in the service in such numbers as are appropriate for the health and welfare of the service users.	The recently approved Sheltered Housing Review report acknowledges the need for a more flexible use of existing staff resources with the creation of a relief pool. In terms of qualifications and competence, the job description and person specification for the post of Sheltered Housing Warden have been reviewed and remain appropriate at this time.	To be completed by end October 2014.	J. Fenton, Housing Services Manager

	The existing job description and person specification have continued to be used where temporary contracts have been offered, during the Sheltered Review, with no reduction in either the level of applications or the quality of candidates.  The Relief Pool will be established by end of October 2014.		
2a). A provider shall provide the service in a manner which promotes and respects the independence of the service user and, so far as it is practicable to do so, affords them choice in the way that the service is provided to them.	Items 2a), 2b), and 3 are related and the action proposed relates to all.  The service will prepare an Aims and Objectives document to share with all existing sheltered tenants focussed around not only promoting and respecting their independence but also ensuring that this is embedded within all aspects of the Sheltered Housing Service. Included within the aims and objectives will be freedom for sheltered tenants to make choices in the way the service is delivered to them.	Aims and Objectives document to be completed by end August 2014.	S. Steen, Housing Services Team Leader
2b). The provider shall 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 are exceptional circumstances.	The Sheltered Housing Service is free from restraint of any kind and the motion sensors that are in place in all sheltered tenancies are designed to assist tenants in respect of their health and wellbeing. We will seek the express written agreement from all existing and new sheltered tenants regarding the use of motion sensors in sheltered housing tenancies.		
3. The service shall provide a written statement of the Aims and Objectives of the service.			

4. The provider shall have regard to the size and the nature of the service, the statement of Aims and objectives and the number of needs of the service users to ensure: the service must ensure at all times, suitably qualified and competent persons are working in the service in such numbers as are appropriate for the health and welfare of the service users.	The recently approved Sheltered Housing Review report acknowledges the need for a more flexible use of existing staff resources with the creation of a relief pool. In terms of qualifications and competence, the job description and person specification for the post of Sheltered Housing Warden have been reviewed and remain appropriate at this time. The existing job description and person specification have continued to be used where temporary contracts have been offered, during the Sheltered Review, with no reduction in either the level of applications or the quality of candidates.  The Relief Pool will be established by end of October 2014.	To be completed by end October 2014.	J. Fenton, Housing Services Manager
---	---	--	--

Name: Susan Donaldson

Designation: Sheltered Housing Supervisor

Signature:

In signing this form, you are confirming that you have the authority to complete it on behalf of the service provider.