

Care service inspection report

Full inspection

Thistle Foundation - Renfrew Housing Support Service

25 High Mair
Renfrew



HAPPY TO TRANSLATE

Service provided by: Thistle Foundation

Service provider number: SP2004005062

Care service number: CS2004080904

Inspection Visit Type: Unannounced

Care services in Scotland cannot operate unless they are registered with the Care Inspectorate. We inspect, award grades and set out improvements that must be made. We also investigate complaints about care services and take action when things aren't good enough.

Please get in touch with us if you would like more information or have any concerns about a care service.

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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	5	Very Good
Quality of staffing	5	Very Good
Quality of management and leadership		N/A

What the service does well

When we visited the Thistle Foundation Renfrew we found that personal assistants were motivated, experienced, friendly and committed to delivering a high standard of care.

We found that the service worked in partnership with a range of statutory and voluntary agencies and that staff worked well as a team, displaying a positive attitude and working to support clients get the most benefit from using the service. Examples of this can be found when clients are: supported to make choices, be independent, live in their own home and be involved in the community. Clients told us that staff were reliable and consistent.

What the service could do better

The service has identified areas for development which include: using the self assessment to highlight positive outcomes for clients and increasing staff awareness of Notification guidance.

What the service has done since the last inspection

A new manager has been appointed and was seen to be very engaged in developing the service.

As a result of funding changes the service has started a 24/7 service. Clients can buy into this service by "laying aside" some of their core support hours which can then be used at a time that suits them.

Conclusion

Everyone spoken with during the inspection was very committed to making sure that the service meets client's expectations and needs.

When speaking with personal assistants and observing their practice it was evident that they work to make client's support enjoyable and meaningful.

We thought that clients were very confident about exercising choice, and that they were provided with individualised care and support.

1 About the service we inspected

Thistle Foundation Renfrew is a combined Housing Support/Care at Home service that supports adults with a range of support needs.

The service uses Personal Assistants (staff) to support clients to live in their own home, develop skills and be part of the community.

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

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

Recommendations

A recommendation is a statement that sets out actions that a care service provider should take to improve or develop the quality of the service, but where failure to do so would not directly result in enforcement.

Recommendations are based on the National Care Standards, SSSC codes of practice and recognised good practice. These must also be outcomes-based and if the provider meets the recommendation this would improve outcomes for people receiving the service.

Requirements

A requirement is a statement which sets out what a care service must do to improve outcomes for people who use services and must be linked to a breach in the Public Services Reform (Scotland) Act 2010 (the "Act"), its regulations, or orders made under the Act, or a condition of registration. Requirements are enforceable in law.

We make requirements where (a) there is evidence of poor outcomes for people using the service or (b) there is the potential for poor outcomes which would affect people's health, safety or welfare.

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

Quality of care and support - Grade 5 - Very Good

Quality of staffing - Grade 5 - Very Good

Quality of management and leadership - N/A

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 0345 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

This report was written following an unannounced inspection on 7, 8 and 9 June 2016. Feedback was given to the manager and three service leaders on the latter date.

From the 1 April 2016 the way in which we carry out an inspection has changed. We choose which quality themes and statements are inspected for better performing services, to be more proportionate and targeted in our work. In highly performing services, inspections will consider Quality Theme 1: Quality of Care and support, Quality Theme 1, Statement 3 "We ensure that service user's health and well-being needs are met" will be considered during all inspections.

During this inspection information was gathered from a number of sources:

We spoke at length with:

The manager, service leaders, personal assistants and clients.

We looked at:

Outcome based support plans.

Risk assessments.

Review minutes.

Staff supervision and appraisal records.

Training records.

Training plan.

Accident /incident records.

Complaint log.
Returned Staff Questionnaires.
Returned client/family Care Standard Questionnaires.
Self assessment.
Annual return.
Notifications.
Registration Certificate.

We visited four clients in their own home and sat in on a team meeting.

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.firescotland.gov.uk

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 fully completed self assessment from the manager.

We were satisfied with the way this had been completed and with the information provided.

The manager identified what the service did well, areas for development and any planned changes.

We discussed how the self assessment could be used to highlight how the service has helped clients achieve positive outcomes and have their goals worked towards.

Taking the views of people using the care service into account

Six Care Standard Questionnaires had been returned by clients. Their comments are reflected in the inspection report.

Clients spoken with during the inspection were complementary about the service and staff. Please read the report for their comments.

Taking carers' views into account

No Care Standard Questionnaires had been returned by relatives.

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: 5 - Very Good

Statement 3

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

Service Strengths

At this inspection we spoke with: the manager, service leaders, personal assistants and clients and read: support files, support plans and review minutes. When we visited we found that clients were keen to be involved in the inspection. We decided that the service supported client's health and well being very effectively and continued to work to a very good standard.

When we spoke with clients they told us:

"The 24/7 service is a very good development and it works well for us."

"Nothing is ever a problem."

"I've a very good staff team."

"Lovely people."

"While I have issues with headquarters I cannot fault my support."

By talking to personal assistants, observing practice in client's homes and reading support plans we saw that staff work to support, maintain and improve people's health and wellbeing. Personal assistants do this by supporting with: personal care, medication, housework, attending appointments, being involved in what they want to do and maintaining a family life. When we observed staff it was evident that they were aware of client's privacy and individuality.

Each client has a "My Life My Support" plan and are fully involved in its development and implementation. We saw that nothing is acted on without

their, the clients, involvement and agreement. When we read "My Life, My Support" plans we saw that they were very clearly written, laid out in a standard format, easy to follow and contained a range of information about the clients goals and potential risks. Support plans are reviewed on an ongoing basis with a formal meeting being held every six months, and more frequently if there are any concerns about a clients well being. We saw that there was a strong focus on positive outcomes with plans being updated and outcomes changed to meet client's developing wishes.

We found that support plans focused on the client's goals such as: maintaining a family life, planning activities, meeting friends and outings. By doing this the service encourages people to be in control of their support.

Support plans contained a "hospital passport" which provided essential information to hospital staff. In addition they showed that the service has good relationships with care managers, health professionals and GPs. There were good examples of professional co-operation and staff picking up small changes in client's health. We could see that instructions left by health and social care professionals were followed through.

Areas for improvement

The service should continue to develop outcome based support plans.

Grade

5 - Very Good

Number of requirements - 0

Number of recommendations - 0

Statement 5

“We respond to service users' care and support needs using person centered values.”

Service Strengths

After observing and talking to staff, sitting in on a team meeting, speaking to and visiting clients and looking at support files, risk assessments and review minutes we found that the service continued to work to a very good standard for this statement.

To make sure that the service is right for them and before receiving support people are given information about: the assistance that can be provided, staff, how to complain and opportunities for participation.

We found that there was an experienced and respectful staff group who worked well as a team and displayed a positive attitude. We thought that staff knew and met client's needs very well. To help with this each client has their own staff team and named key worker who: help develop and update their care plan, liaise with social, health and housing agencies and makes sure that the client has their goals and support needs worked towards and met.

When we were invited into people's homes we saw that staff had good relationships with clients and were aware of people's' preferences, choices and means of communication. We saw very good use of communication boards and staff assisting when speech was limited. We thought that this helped clients feel relaxed and supported to express their views and opinions.

We found that staff placed an emphasis on the rights of clients as citizens. They did this by ensuring people maintained a community presence and were supported to be active members of society by: advocating for others, volunteering, attending wheelchair dancing and being involved in developing the service and their support.

When we spoke with clients they commented positively about the quality of the service they receive:

"Love my staff team."

"Great people."

"Good communication."

"My care is pretty damn good."

To make sure that clients can get the support they need at a time of their choice the service has developed a new 24/7. Clients buy into this by "laying aside" some of their core support hours and can access support at any time. By doing this support can be more flexible and responsive to individuals circumstances and support needs by, for example, supporting people to go to evening activities. We thought that this was a positive development as it allowed the client greater control over when and how their support would be delivered.

Areas for improvement

The service should continue to build on very good practice.

Grade

5 - Very Good

Number of requirements - 0

Number of recommendations - 0

Quality Theme 3: Quality of Staffing

Grade awarded for this theme: 5 - Very Good

Statement 3

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

Service Strengths

At this inspection we spoke with: the manager, service leaders, personal assistants and clients and read: training records and supervision and appraisal records we decided that the service was operating to a very good standard for this statement.

We found that staff spoke with respect and consideration of clients, reflected on their practice and had a clear understanding of the service's aims and objectives. Staff practice ensured that client's rights were respected. This can be evidenced when staff listen to people and change support to meet their requests and goals.

We found good examples of staff going "the extra mile". For example when a client was supported by a temporary team they worked extra hours to help build the persons confidence. Staff took on additional duties to make sure that support was seamlessly delivered .

To make sure that staff work to the service's expectations the Thistle foundation has a range of policies that support staff practice and development including: induction, learning & development, supervision and recruitment.

To make sure that staff maintain good practice there is a programme of training, supervision and appraisal. Supervision records showed that staff discussed client's support needs and that they, staff, were set clear goals and learning targets. This shows that the service is committed to making sure that the support staff provide has a positive impact on clients' lives.

Staff receive a range of training appropriate to individual's support needs such as: induction, shadow shifts, service leadership, "Life is for living", Codes of Practice, care standards, principles into practice and Scottish Vocational Qualifications in Social Care. To help build leadership skills team leaders had been on a three day residential "leading others" course. Staff training is reviewed and updated through practice development groups, client comments and supervision. Staff said that training is provided if a client has a support need that they have not previously had to address.

Staff were aware of the need to work towards SSSC registration and the management team were taking steps to make sure that registration took place when required.

Areas for improvement

The management team should expand the range of training opportunities available to include Adult Protection.

Grade

5 - Very Good

Number of requirements - 0

Number of recommendations - 0

Statement 4

"We ensure that everyone working in the service has an ethos of respect towards service users and each other."

Service Strengths

At this inspection we spoke with: the manager, service leaders, personal assistants and clients and read: support plans and team meeting minutes. We decided that the service was operating to a very good standard for this statement.

To make sure that staff are respectful and following support plans team leaders undertakes unannounced spot checks when staff are working with clients. During these staff practice is observed and clients spoken with. By doing this the service gives assurance to clients that staff practice is monitored to make sure they are delivering support in an appropriate manner.

To make sure that staff practice is in line with the service's expectations and focused on clients goal staff take part in practice development groups. These meet six times a year and are used by staff to discuss developments and practice issues.

We saw that the service had held "quality audit workshops" and "Big Conversations" to discuss practice and developments. "Big Conversations" looked at how the service could "collaborate in a creative and flexible way to support improved health and wellbeing and the achievement of outcomes". We saw that these meetings set a series of goals/priorities and identified staff to assist their development and implementation. These were all aimed at improving the service and ensuring positive outcomes.

Staff said that the management team encourages a transparent and open culture and that they are encouraged to identify their own training needs and to develop their professional skills and expertise. The benefits of this for clients is that staff feel confident raising issues of practice.

Areas for improvement

To continue to build on very good practice.

Grade

5 - Very Good

Number of requirements - 0

Number of recommendations - 0

Quality Theme 4: Quality of Management and Leadership

Quality theme not assessed

4 What the service has done to meet any requirements we made at our last inspection

Previous requirements

There are no outstanding requirements.

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

Previous recommendations

There are no outstanding recommendations.

6 Complaints

There had been one complaint since the previous inspection. This was outwith the remit of the Care Inspectorate to investigate.

7 Enforcements

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

8 Additional Information

There is no additional information.

9 Inspection and grading history

Date	Type	Gradings	
19 Jun 2015	Unannounced	Care and support	5 - Very Good
		Environment	Not Assessed
		Staffing	5 - Very Good
		Management and Leadership	5 - Very Good
23 Jun 2014	Unannounced	Care and support	5 - Very Good
		Environment	Not Assessed
		Staffing	5 - Very Good
		Management and Leadership	5 - Very Good
1 Jul 2013	Unannounced	Care and support	5 - Very Good
		Environment	Not Assessed
		Staffing	5 - Very Good
		Management and Leadership	5 - Very Good
9 Jul 2012	Unannounced	Care and support	5 - Very Good
		Environment	Not Assessed
		Staffing	5 - Very Good
		Management and Leadership	5 - Very Good
26 Jan 2011	Announced	Care and support	5 - Very Good
		Environment	Not Assessed
		Staffing	Not Assessed
		Management and Leadership	Not Assessed
28 Jan 2010	Announced	Care and support	5 - Very Good
		Environment	Not Assessed
		Staffing	5 - Very Good
		Management and Leadership	Not Assessed
24 Jun 2008	Announced	Care and support	5 - Very Good
		Environment	Not Assessed
		Staffing	5 - Very Good
		Management and Leadership	5 - Very Good

To find out more

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