

Thistle Foundation Housing Support Service

Thistle Centre of Wellbeing
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Edinburgh
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Telephone: 0131 661 3366

Type of inspection:

Announced (short notice)

Completed on:

5 February 2020

Service provided by:

Thistle Foundation

Service provider number:

SP2004005062

Service no:

CS2004080907

About the service

Thistle Foundation is a voluntary organisation. Guided by a board of directors, the organisation is managed on a day to day basis from a Head Office in Craigmillar, Edinburgh. The service provides housing support and care at home for adults with physical disabilities, learning disabilities, mental health problems and head injuries. It is delivered by small teams of personal assistants (PA's) who provide the direct support and care. At the time of the inspection the service is supporting 177 people, this ranged from a few hours per day to twenty-four hour care with a staff team totalling 348 full and part time staff.

The Thistle vision, mission statement and manifesto states:

"We believe life is for living. We always go the extra mile to help people with disabilities or longstanding health conditions to lead great, authentic lives, where they are in control. Thistle Foundation is a boundary-pushing, pioneering organisation helping to bring about a society where everyone has the right to feel involved and empowered to live the life they choose, regardless of their disabilities or health condition. We go the extra mile to find the right solution for people, without presuming we know the answers."

What people told us

During the inspection we met service users, family members, staff and all levels of the management team. We telephoned and corresponded with additional family members and professionals that have had links with or supported people using the service.

35 Care Standard Questionnaires and 35 staff questionnaires were sent out prior to the inspection, 13 of each of these were returned to us. The feedback on all questionnaires was generally positive with service users and families happy with the support they received and were confident in approaching staff teams or managers if needed. Information from staff questionnaires highlighted the high level of support and training they said they received. Four out of the thirteen staff were not registered with the Scottish Social Services Council (SSSC) at the time the questionnaires were distributed. This was discussed with the manager during the inspection and was being looked into.

Comments received back from families and service users included:

"My support plan tells people in my words what I like and do not like. It also tells people about me and what's important to me."

"I am often given the things that I ask for/need/want, if I can't have something I ask for/need/want it is explained to me why and I understand, I always feel listened to."

"They (Thistle) have six monthly reviews which I, my family and staff go to, we can also go to their team meetings...I do not have any complaints."

"They (Thistle) make sure I'm safe, my doors are locked. They set me up for the day making sure I've got the things I need for the day - keys, bus pass, money, phone on, my power chair is charged and working. I go to all my meetings...It gives good quality of care and support and helps me lead a normal and active life."

"I'm happy with staff that I work with and also I have known them a long time, pleased staff support me with preparing meals and house work, staff communicate with my dad."

"Staff will let me know all activities before hand, I'm fully aware what they are doing even if I am not with my son...staff team communicates very well...Too frequent with staff changes although I have been informed about changes before hand...After listening to my concerns, they (Thistle) let me know the name of the staff before taking my son out on a Saturday."

"With the support my daughter receives she has grown in confidence. She has matured and become more sociable....I always feel my daughter is safe with her support worker, due to their training. On the odd occasion when she has become unwell when in the care of her support worker, she has always been looked after with compassion and professionalism...My daughter does get upset when one of her support workers leave as she does build up a bond/relationship with them."

"Staff are always friendly and aim to direct X in a friendly way, allowing X to do things at his pace, never made to do anything that he isn't interested in doing. Anything that is noticed that may be different is discussed between the team, family and if needed specialist outside support...At the start of X's journey with Thistle we had quite a high turnover of staff, but with new management for our team it has gone in the direction we wanted."

Comments from staff questionnaires included:

"I have worked in this organisation altogether for 20 years. I am very happy with the support I get from managers and team. I know how to access information if needed. I am grateful for the training I have been given so far over the years."

"Very proud to work for Thistle Foundation, in my opinion they are the most forward thinking, person centred organisation I know of. Great management team and workforce, very caring and supportive. Learned more with Thistle in 12 months than I have anywhere else. Best learning opportunities ever."

"Thistle has been a great company to work for."

"I have worked in a few services and have found that the manager and staff are among the best that I have worked with."

"Thistle is a brilliant employer, I feel respected and valued."

Self assessment

We are not asking services to submit a self-assessment for this inspection year. During the inspection we discussed improvement plans. Issues relating to quality assurance, feedback from people using the service and their relatives along with the quality of the service's improvement plan were all considered throughout the inspection.

From 1 April 2018, the new 'Health and Social Care Standards' replaced the National Care Standards. These seek to promote and improve outcomes for people who experience care. Services should now be providing support in accordance with the guidelines outlined therein.

These are:

- 1 I experience high quality care and support that is right for me.
- 2 I am fully involved in all decisions about my care and support.
- 3 I have confidence in the people who support and care for me.
- 4 I have confidence in the organisation providing my care and support.
- 5 I experience a high quality environment if the organisation provides the premises

<http://scotgov.publishingthefuture.info/publication/health-and-social-care-standards-my-support-my-life>

From this inspection we graded this service as:

Quality of care and support	5 - Very Good
Quality of staffing	5 - Very Good
Quality of management and leadership	5 - Very Good

Quality of care and support

Findings from the inspection

The service was proactive in ensuring the best possible care and support was provided by specially picked teams to meet the individual needs of service users. It was evident when speaking to service users, staff and families that a person's needs, wants and wishes were understood, their changing routines, likes and dislikes quickly adapted to with staff being very good at encouraging people to try new things, but at their own pace.

The families we spoke to were very pleased with the improved levels of communication between themselves, the staff teams and the management team. All said they would not hesitate to contact staff members of all levels if they had any concerns, issues, ideas or information to improve or change the support provided. One family member told us "I feel immensely lucky that my son is supported by Thistle, things are excellent as is communication with the manager and the staff team."

Two people using the service had been dissatisfied with the level and type of support provided. Thistle had developed and provided a learning programme for the individuals and their team. This discussed the areas of support that were / were not working well, why, what was wanted, resulting from this there was now a clearer understanding of what is needed, the expectations on all sides and some changes to team members. The people using the service were now very satisfied and felt more confident and clearer when raising any issues.

We found the staff teams to be mindful of the needs and wishes of each person they supported, this was evident in the quality and detail of the 'My Life, My Support Plan' documents we saw. The files we looked at had very good information in them that covered all aspects of an individual's life and support needs. These were reviewed regularly via team meetings, changes in support and at the statutory six monthly reviews. Support was delivered in a person centred and outcome focused way, ensuring the individual supported was as independent as possible. Generally, communication links with family members and staff had improved, this was helped by using WhatsApp groups, regular text and telephone messages and including families in reviews, celebrations and events.

Some teams who were working towards Self Organised Teams (SOT) had more up to date IT equipment and software, the management team were still reviewing the effectiveness and compatibility of this system so they could support staff. We found the service had greatly improved with people being fully involved in all aspects of their support and having teams based around their individual needs.

Some family members and staff said how the two day training through the Behavioural Support Strategies course had helped to define any particular need for physical intervention, what, when and why. It had also helped staff to define changes in behaviour with recording tools to evaluate causes and changes to support. All information was discussed with families and professionals as needed.

The service continued to hold its Family Forum meetings for families, staff and service users. It also held monthly Big Conversation meetings which focused on the wellbeing and engagement being delivered throughout the organisation. Through discussions information was fed back to senior managers as to what people thought, changes that could be beneficial and working together to achieve these. In both of these groups the SOT concept and delivery was covered.

Through conversations with families, staff and managers we saw how the service was very good at dealing with issues and complaints in a prompt way, either internally or when needed using an external agency to investigate the concerns. We saw that changes had been made to the support provided, staff, better communication and more active listening in these services.

The service had improved on its recording systems, checks, audits and staff expectations. We found this in the areas of medication, finances and all staff generally keeping documents updated with good, clear and easy to follow content.

Requirements

Number of requirements: 0

Recommendations

Number of recommendations: 0

Grade: 5 - very good

Quality of staffing

Findings from the inspection

Since the last inspection the service had started to roll out its 'Self Organised Teams' (SOT) to a select number of teams within the organisation. This model had included a lot of training (Test and Learn) for staff and families, incorporating new IT systems and equipment, the model for a team was less hierarchical, working towards being more networking. Staff had clearer definitions and accountability regarding the roles to be undertaken to effectively support people. These worked on individuals' strengths and working styles with more emphasis on inclusive and productive team meetings, discussion and peer support (Intervision). Part of the process is for staff to take on specific roles which will be rotated so all members have the skills to undertake any role to support service users, families and each other. The service and teams worked closely with an external organisation who provided support, monitored training and reviewed any learning and changes needed. They worked very closely with families, service users, professionals and the SOT team to support the individual.

The SOT's will be rolled out throughout the whole service in the next few years. The staff, families and managers involved said how well this had been working, families felt very included in the development, roles and responsibilities of each team member and how individualised all care and support was. Each team was required to work to a set of principles and practices known as the operational framework. Once teams demonstrated that they were working to the framework they would be recognised by managers as a self organised team and each worker in the team would become a Wellbeing Practitioner, this included a pay rise.

One staff member highlighted on the questionnaire returned to us the following:

"Development: I have begun the 'Test and Learn' phase of the Self Organised Teams. This is an excellent opportunity to learn and develop new and existing skills, enhancing self-esteem and team moral and progression with our roles and responsibilities being recognised.

I am a Big Conversation Keyworker - this gives me the opportunity to be a part of the development and future of Thistle."

In line with the SOT structure and the development plans for the overall service, all teams were now producing three monthly rotas. Staff said this gave them a better shift pattern, more quality time off and they knew when they would be working in advance to help with a better work/life balance.

All levels of staffing held their individual and at times joint team meetings on a monthly basis. Some meetings had started to be organised so different people took on a role within the meeting - minute taker, chair and timekeeper. Minutes showed that teams and managers needed to ensure that when someone was responsible for a task this has a timeframe with it, two minutes of meetings said staff would do a task 'ASAP' or something needed to be 'put on a rota', no indication was found as to whether this had been completed.

The service needs to ensure that all staff are registered with the SSSC or another regulatory body. Although each staff member is responsible for updating their training records for the SSSC, having some type of check that this has been completed would be beneficial to the overall service.

The last Employee Engagement survey had had generally good feedback across the organisation. The results of the questions asked included - positive feedback, 'Knowing what is expected of them at work', neutral feedback, 'Their opinions are counted', improvements, 'A better flow of information and communication'. An external organisation was working with Thistle in identifying how it could improve from the feedback given, this was through focus groups, meetings and individual sessions.

From the documents we saw and the people we spoke to it was very evident The Thistle Foundation invested a lot in its staff and ensured their training was of a high standard, covered mandatory (Health and Safety, Food Hygiene and Moving and Positioning) and personal and professional development training (Epilepsy, Autism, English as Speakers of Another Language and five workshops on areas of Mental Health).

Each staff member had a Life is for Living four day induction programme, on many of these courses a Peer Support Worker from the organisation co-facilitated. This covered all areas of the service including values, policies, procedures and risk assessments. The service also encouraged staff to complete the Person Centred Principles Into Practice 12 day course (PIP). This was modular and very applicable for the SOT teams, following this course staff were encouraged to complete the Scottish Vocational Qualification (SVQ) Level 3 Health and Social Care course. The organisation also provided training in all areas for supervisors, lead practitioners and managers. An external agency evaluated the Test and Learning made through the services Wellbeing strategy which linked to the SOT teams. All staff had a Support Services Policy Handbook (June 2019) which covered among other topics - mission and values, quality assurance framework, person centred support and policies and procedures.

All mandatory training was recorded centrally with Lead Practitioners and managers being alerted when training was due to be renewed, had not taken place or was not available. Any courses completed online, or additional research undertaken needed to be recorded by the staff member on their SSSC registration documentation.

All staff had regular supervision, within the timeframes set out in the services procedures. We found that these sessions were now audited more and the quality of and type of content had improved. The SOT were starting peer supervision (Intervision), we were told that staff thought this would bond the team far more, sharing skills and experience.

Requirements

Number of requirements: 0

Recommendations

Number of recommendations: 0

Grade: 5 - very good

Quality of management and leadership

Findings from the inspection

The frequency and quality of auditing throughout the service at all staff levels had improved and was far more accountable. All staff members were aware of their responsibilities and frequency for checks to be completed and passed to senior management for weekly, monthly and quarterly auditing. Any discrepancies, training or further discussions in particular areas was dealt with promptly to assist staff in their routines and workload. We found that this process had helped to improve the quality and consistency of support plans, supervision records, reviews and other documents. Reports covering the findings for all areas audited were produced monthly and quarterly and action plans were devised by the training and management teams when needed.

The senior management team had recognised that some teams needed more support in guiding staff on what was needed for different aspects of the service, how, why and when. This was in the process of being delivered.

Audits need to ensure that any adult with Incapacity documentation was up to date, in one file this required document had run out on 6/8/2019. Also all staff need to ensure all documents are signed and dated (day, month, year) by the appropriate people, this needs to be part of the auditing process. In one service user file the person's Power of Attorney had been rescinded, there was no evident recording of what had/had not happened in place of this.

The senior management team had highlighted how it would be beneficial if the Wellbeing Support Team provided up to date information, roles and responsibilities to people returning from long term absences. They also thought it would be useful for this team to have current information on the organisation, any changes to the composition of staffing/teams and the services on-going development plans.

The services central 'Carista' system was being reviewed to ensure all staff were getting paid for attending training and that the whole system was "smoother".

One of the areas the management team were looking at how staff could securely store minutes of team meetings and Intervision meetings (previously known as supervision) on the newly acquired software. This was especially important for the SOT and others moving forward in the development of the type of service Thistle wanted. Managers and staff highlighted how it would be beneficial for teams to be able to share their experiences, especially with other groups either starting or intending to use the SOT structure.

The service evidenced that all reviews were held as required within the six-monthly statutory timeframe. All of the documents we saw were on Thistle paperwork.

The service needs to ensure all of its policies and procedures are reviewed and updated timeously. Their Annual Return returned to the Care Inspectorate stated the Risk Assessment was last updated on 22/12/2015, this was discussed with the manager and all policies and procedures will be reviewed.

Requirements

Number of requirements: 0

Recommendations

Number of recommendations: 0

Grade: 5 - very good

What the service has done to meet any requirements we made at or since the last inspection

Previous requirements

There are no outstanding requirements.

What the service has done to meet any recommendations we made at or since the last inspection

Previous recommendations

There are no outstanding recommendations.

Complaints

There have been no complaints upheld since the last inspection. Details of any older upheld complaints are published at www.careinspectorate.com.

Enforcement

No enforcement action has been taken against this care service since the last inspection.

Inspection and grading history

Date	Type	Gradings
14 Aug 2018	Announced (short notice)	Care and support 4 - Good Environment Not assessed Staffing 4 - Good Management and leadership 4 - Good
2 Jun 2017	Announced (short notice)	Care and support 5 - Very good Environment Not assessed Staffing Not assessed Management and leadership 5 - Very good
7 Jun 2016	Announced (short notice)	Care and support 5 - Very good Environment Not assessed Staffing Not assessed Management and leadership 5 - Very good
30 Jun 2015	Announced (short notice)	Care and support 4 - Good Environment Not assessed Staffing 5 - Very good Management and leadership 4 - Good
10 Jun 2014	Unannounced	Care and support 5 - Very good Environment Not assessed Staffing 5 - Very good Management and leadership 5 - Very good

Date	Type	Gradings
6 Jun 2013	Unannounced	Care and support Environment Staffing Management and leadership
		5 - Very good Not assessed 5 - Very good 5 - Very good
26 Jun 2012	Announced (short notice)	Care and support Environment Staffing Management and leadership
		5 - Very good Not assessed 5 - Very good 4 - Good
17 Feb 2011	Announced	Care and support Environment Staffing Management and leadership
		5 - Very good Not assessed Not assessed Not assessed
19 Mar 2010	Announced	Care and support Environment Staffing Management and leadership
		5 - Very good Not assessed 4 - Good Not assessed
22 Dec 2008	Announced	Care and support Environment Staffing Management and leadership
		5 - Very good Not assessed 5 - Very good 5 - Very good

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