

Capability Scotland - North Lanarkshire Services Support Service

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Type of inspection:
Unannounced

Completed on:
17 April 2023

Service provided by:
Capability Scotland

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Service no:
CS2003055019

About the service

Capability Scotland is a registered charity who provides services to adults with complex physical and learning disabilities.

The base for this service is an office within the Dalziel Building in Motherwell where the manager, team leaders and administrators work from. People are supported to access community activities and are supported within their own home, to achieve their outcomes in life. Additionally, there is one area manager who oversees this service as well as others across Scotland.

The vision of the organisation is "An inclusive Scotland where everyone has the opportunity to have their voice heard, contribute to society and fulfil their potential."

About the inspection

This was an unannounced inspection which took place on 11, 12 and 13 April between 09:30 and 17:30. The inspection was carried out by one inspector from the Care Inspectorate. To prepare for the inspection we reviewed information about this service. This included previous inspection findings, registration information, information submitted by the service and intelligence gathered since the last inspection. In making our evaluations of the service we:

- spoke with four people using the service and seven family representatives
- spoke with 7 staff and management
- observed practice and daily life
- reviewed documents
- received feedback from 2 external professionals involved with the service.

Key messages

People receive a very good level of care and support from a consistent staff team.

Staff have a very good level of training that meets the needs of people who are supported.

Infection control and procedures are monitored effectively.

The quality assurance in place supports good practice and the organisational development plan is progressing well.

People we spoke with were very positive about the service provided.

From this inspection we evaluated this service as:

In evaluating quality, we use a six point scale where 1 is unsatisfactory and 6 is excellent

How well do we support people's wellbeing?	5 - Very Good
How good is our leadership?	5 - Very Good

Further details on the particular areas inspected are provided at the end of this report.

How well do we support people's wellbeing?

5 - Very Good

We found significant strengths in aspects of the care provided and how these supported positive outcomes for people, therefore we evaluated this key question as very good.

Care plans contained particularly good information on how a person should be supported in accordance with their wishes and preferences. Key risk assessments and reviews of care were in place. We saw information that highlighted what was important to people, and any triggers that may cause distress or anxiety with the identified responsive action that should be followed. People outlined their goals and aspirations that they wanted to achieve.

Care plans were held both in the office premises and within people's homes and not all the information was up to date in both plans. This could lead to potential confusion or mistakes being made. Hospital passports for people that are held in people's homes should be the most up to date version to ensure this document accompanies them to any hospital admission. Medication records in the home of one person were handwritten by one staff member. These sheets should be printed by the dispensing pharmacy. However, we heard that this is being requested.

We observed very positive and warm interactions with staff and the people they supported. It was evident very good relationships had been formed. Supported people told us that staff were "excellent" and "wonderful." Overall, people received care from a consistent staff team.

Staff that we met demonstrated exceptionally good knowledge about the person they supported. This included their medication needs and daily routines. We observed responsive, calm and appropriate action being taken by a staff member to support a person who needed this. Staff were kind, respectful and at all times allowed people to speak for themselves where possible. It was acknowledged by staff how people they supported very much valued their independence. Relatives of supported people we spoke with told us that they had confidence in staff and told us they were competent and met the needs of people in their care. One relative told us "I have peace of mind when staff are out with my son."

Staff supported people with the maintenance of their environment such as ensuring services were up to date for boilers, vehicles or other household appliances. Some people were also supported to manage their finances and pay household bills and daily shopping and this was undertaken in a well-managed way that was clearly recorded.

Supported people were able to be involved in community life and attend various clubs and other events of their own choosing. Many of the staff team facilitated this by driving the person's adapted vehicle. People we spoke with told us how they had made new friends at these various groups and this clearly had benefitted people by expanding their social circle and further opportunities.

We spoke to guardians and relatives of supported people who could not communicate with us. We heard that people were very happy with the care and support provided, and "staff were reliable, flexible, kind and communicated well." Relatives told us they were involved in reviews of care.

We noted that a variety of professionals such as dietician, learning disability nurses and social workers were involved with people and communication and any follow up action was undertaken. Comments from those professionals we contacted were very positive with regard to the care and support provided. Professionals

told us there was very good communication and followed through any advice provided to enhance people's health.

Staff were provided with infection prevention and control training and in discussion were knowledgeable about their responsibilities within people's home environment. Cleaning records were evidenced and audited regularly. We noted the homes of people we visited to be of an extremely high standard of cleanliness and freshness. Staff had access to PPE that was in plentiful supply and stock sheets evidenced the distribution of these. Staff were updated regularly regarding any policy changes both locally and nationally.

How good is our leadership?

5 - Very Good

We made an evaluation of very good for this key question. We identified major strengths in supporting positive outcomes for people.

The service monitors aspects of its service by regular quality assurance processes that are undertaken internally each month as well as externally on an annual basis. The key areas are medication, support plans and risk assessments, hospital passports, financial records and cleaning records. Any areas of improvement identified are then highlighted in the overall development plan. It was however, not clearly evidenced how often or how many audits were undertaken overall and at the moment seems to be an "ad hoc" approach. The development and improvement plan outlines planned action to progress going forward and the service has recognised that other methods of engagement with supported people will be explored.

We did see that supported people had opportunities to provide their views, goals and aspirations for their future and these views were gathered in organised meetings and acted upon. We heard of a very good example whereby a supported person was enabled and encouraged with his idea of starting his own craft group after the club he anticipated in stopped running. There has been a successful first group craft meeting which was well attended.

Staff told us they had observations of their practice undertaken by team leaders and records evidence they were competent in all key areas of care and support delivery. The management team encouraged and supported additional training requests that were out with mandatory training. New staff spoke positively of their induction and shadowing opportunities. A number of team leaders, senior and existing staff were involved with supporting newly appointed staff.

Supervisions of staff were undertaken on a regular basis that considered reflective practice as well as career development. Staff told us the management team were good communicators and were approachable at any time. We heard numerous comments with regard to staff being supported well in personal circumstances by the management team. This helped promote staff wellbeing.

The service recorded and analysed accidents and incidents to a high standard. There was a very good overview in place of adult support and protection matters that had been reported and the corresponding action taken. All appropriate notifications had been sent to the Care Inspectorate.

Internal complaints received about the service were minimal, we saw good processes in place to investigate these with responses and associated action being swiftly taken.

What the service has done to meet any areas for improvement we made at or since the last inspection

Areas for improvement

Previous area for improvement 1

The service should further develop their training matrix, that is clearly influenced by, and links into staff supervision and training needs. This must include information of training needs identified, requested, planned, attended and due for renewal.

This area for improvement was made on 2 November 2018.

Action taken since then

We saw detailed records of training provision and requests for additional training that were raised in supervision discussions. A tracker was in place to ensure all refresher and mandatory key training was undertaken and staff records were updated with their attendance. This area for improvement has been fully met.

Previous area for improvement 2

The manager should continue to focus on reducing agency staff within the service, to improve outcomes for people and create stability within the teams. Additionally, this should be demonstrated by way of an improvement plan, how they are going to achieve this and include timelines for completion.

This area for improvement was made on 2 November 2018.

Action taken since then

We were advised that the service no longer use regular agency staff and are used very occasionally when required. This area for improvement has been met.

Complaints

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

Detailed evaluations

How well do we support people's wellbeing?	5 - Very Good
1.1 People experience compassion, dignity and respect	5 - Very Good
1.3 People's health and wellbeing benefits from their care and support	5 - Very Good
1.5 People's health and wellbeing benefits from safe infection prevention and control practice and procedure	5 - Very Good
How good is our leadership?	5 - Very Good
2.2 Quality assurance and improvement is led well	5 - Very Good

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