

Inspection report

Cowal Council on Alcohol & Drugs - Supporting People Housing Support Service

Ballochyle House
Kirk Street
Dunoon PA23 7DP

Inspected by: Margaret Brogan
(Care Commission Officer)

Type of inspection: Announced

Inspection completed on: 6 December 2006

Service Number

CS2005097372

Service name

Cowal Council on Alcohol & Drugs - Supporting People

Service addressBallochyle House
Kirk Street
Dunoon PA23 7DP**Provider Number**

SP2005007478

Provider Name

Cowal Council on Alcohol & Drugs

Inspected ByMargaret Brogan
Care Commission Officer**Inspection Type**

Announced

Inspection Completed

6 December 2006

Period since last inspection

First inspection

Local Office AddressCentral West Region
4th Floor,
1 Smithhills St
Paisley
PA1 1EB

Introduction

Cowal Council on Alcohol & Drugs Support Service was registered with the Care Commission in April 2006 to provide a Housing Support Service to people with alcohol and drugs problems in Dunoon.

It aims "to promote the prevention and early detection of alcohol – related problems, drug and other forms of substance abuse related problems, and to assist individuals experiencing such problems, in particular, those who reside within the Cowal peninsula and environs."

This was the service's first inspection.

Basis of Report

This announced inspection took place on the 6th December 2006 and was conducted by two Care Commission Officers. This service was inspected after a Regulation Support Assessment (RSA) was carried out to determine what level of support was necessary. The RSA is an assessment undertaken by the CCO which considers: complaints activity, changes in the provision of the service, nature of notifications made to the Care Commission by the service, action taken upon requirements etc. This service was required to have a high level of support that resulted in an inspection based on the national inspection themes, the core standards for the inspecting year and any recommendations and requirements from previous inspections, complaint or other regulatory activity.

Prior to the inspection the manager was asked to complete an annual return and a self evaluation document, questionnaires were sent to service users, their representatives and staff.

During the course of the inspection the Officer spoke to the Manager and two members of staff. A range of documentation was examined including the services' policies and procedures, service user support plans, staff personnel files, records of accidents incidents and complaints. The Officer also looked at the arrangements for managing service users' finances. The inspection focused on four standards from the National Care Standards Housing Support Services :

Standard 2 Your Legal Rights.

Standard 3 Management and Staffing Arrangements.

Standard 4 Housing Support Planning.

Standard 6 Choice and Communication.

In addition, the inspection focussed on the following key theme for support services:

Safe recruitment and the Scottish Social Services Council's (SSSC) codes of practice.

The outcome of this is recorded in the section of the report covering Standard 3.

The Officer also took into account the current legal requirements, with reference to the Regulation of Care (Requirements as to Care Services) (Scotland) Act 2002.

Action taken on requirements in last Inspection Report

This was the first inspection of this service

Comments on Self-Evaluation

The annual return and the electronic self evaluation document had not been returned at the time of writing the report due to technical difficulties.

View of Service Users

Service users were very positive in their view of the service and the staff providing it, commenting that staff had the time to sit and listen and help with accessing other services. Reference was made to dependability, kindness and understanding. People felt that they could do things at their own pace.

One service user said that they did not know how to make a complaint about the service and that they did not have a written plan, but they were very satisfied with the service which they received.

View of Carers

There were no responses from carers.

Regulations / Principles

Regulation :

Strengths

Areas for Development

National Care Standards

National Care Standard Number 2: Housing Support Services - Your Legal Rights

Strengths

An introductory pack was being produced which would be made available to service users giving them details of how the service would meet their needs, charges for the service and arrangements for changing or ending the service.

Clients were made aware of what services were available and they chose which ones they wanted to access.

Areas for Development

It was noted that the service user agreement needed to be more specific, while still maintaining appropriate flexibility.

The agreement should contain contact details for the Care Commission, which is a condition of Registration. See Requirement 1

The manager reported that the written agreement was under review and that service users would be offered this once it was fully developed. See Recommendation 1

National Care Standard Number 3: Housing Support Services - Management and Staffing Arrangements

Strengths

There was a statement of mission, aims and objectives in place for the service.

There was a range of policies and procedures in place.

Discussions with staff and responses from staff questionnaires evidenced that they were aware of these procedures and knew how to put them into practice.

A lone worker service was in place using Argyll Telecom.

Staff said that they felt supported by the manager and that they had reasonable access to training.

Areas for Development

There was a lack of awareness of the Scottish Social Services Council. See Recommendation 2.

Accidents and incidents were found to be recorded in client visit sheets, but not always collated in the office. See Recommendation 3.

Inspection of training records and discussions with staff indicated that they had not received training in managing challenging behaviour.

Safer Recruitment statement.

There were policies and procedures in place for the safe recruitment of staff and volunteers which included seeking two written references and an Enhanced Disclosure before the staff member started working with the organisation. Inspection of staff personnel files evidenced that some documentation relating to recruitment was missing in some staff files, including references and health declarations. The manager stated that when he came in to the post he found some documentation missing and was currently reorganising the administrative procedures to ensure that all relevant recruitment documentation would be held in staff personnel files.

All new staff undertake a period of induction and there were plans for staff currently employed to undertake refresher induction training.

The manager stated that the management committee were reviewing the Disclosure policy and were considering a number of options.

National Care Standard Number 4: Housing Support Services - Housing Support Planning

Strengths

Service user support plans were in place containing details of the service being provided.

Areas for Development

Inspection of service user support plans evidenced that some were incomplete, did not contain essential information and were not signed or dated by the service user.

See Requirement 2.

Service user assessments and support plans were not person centred and lacked detail.

Personal risk assessments were not routinely undertaken with service users. See Recommendation 4.

National Care Standard Number 6: Housing Support Services - Choice and Communication

Strengths

Service users confirmed that they received written and verbal information about the service and the choices they had available to them.

They also stated that care staff provided them with information about services and amenities available in the local area and assisted sourcing additional information and other services when needed.

Appropriate systems were in place to aid communication within staff teams to ensure that the service users' care needs were met and the service users' choices and preferences were

recorded.

Areas for Development

The Introductory pack was being developed to include detailed information on what the service had to offer, how it will be provided and how to contact the service outwith office hours.

Enforcement

There has been no enforcement action since registration.

Other Information

The service has had a change of manager since registration.

Requirements

Requirement 1

The service provider should ensure that service users have written details of the name and address of the Care Commission. This is a Condition of Registration and should be complied with within one month of this report being published. SSI 114/2002 reg (25)(6)(a)

Requirement 2

Service user support plans containing all essential information should be in place within one month of them using the service. They should be signed and dated by the service user to indicate their participation and agreement with the content. SSI 114/2002 reg 5 (1) & reg 19 (1)

Recommendations

Recommendation 1

Service users should be provided with an appropriate and readily understandable written agreement.

National Care Standard 2.1

Recommendation 2

The provider should ensure that all staff are aware of the Scottish Social Services Council and what they are required to do to achieve registration in the future.

National Care Standard 3.5

Recommendation 3

Accidents and incidents should be fully recorded.

National Care Standard 3.1

Recommendation 4

Service user assessments and support plans should be person centred and contain appropriate detail. They should contain personal risk assessments which are regularly reviewed and updated.

National Care Standards 4.1

Margaret Brogan

Care Commission Officer