

# Inspection report

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

Ballochyle House  
Kirk Street  
Dunoon PA23 7DP

**Inspected by:** Daphne Ndlovu  
**(Care Commission Officer)**

**Type of inspection:** Announced

**Inspection completed on:** 4 September 2008

**Service Number**

CS2005097372

**Service name**

Cowal Council on Alcohol &amp; Drugs - Supporting People

**Service address**Ballochyle House  
Kirk Street  
Dunoon PA23 7DP**Provider Number**

SP2005007478

**Provider Name**

Cowal Council on Alcohol &amp; Drugs

**Inspected By**Daphne Ndlovu  
Care Commission Officer**Inspection Type**

Announced

**Inspection Completed**

4 September 2008

**Period since last inspection**

11 Months

**Local Office Address**4th Floor  
1 Smithhills Street  
Paisley  
Renfrewshire  
PA1 1EB  
Telephone: 0141 843 4230

## **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.

The aim of the service is; "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."

Based on the findings of this inspection the service has been awarded the following grades:  
Quality of Care and Support - 4 - Good  
Quality of Staffing - 4 - Good  
Quality of Management and Leadership - 5 - Very Good

This inspection report and grades represent the Care Commission's 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. Please refer to the care services register on the Care Commission's website ([www.carecommission.com](http://www.carecommission.com)) for the most up-to-date grades for this service.

## **Basis of Report**

### **Before the Inspection**

The report was written following an announced inspection which took place on Thursday 4th September 2008 between 9:30 and 16:00 hours

### **The Annual Return**

The service submitted a completed Annual Return as requested by the Care Commission.

### **The Self-Assessment Form**

The service submitted a self-assessment form as requested by the Care Commission

### **Views of service users**

Four service users were spoken with individually and a further six service users were spoken with in a group setting. Three questionnaires were also returned to the care commission. All gave very positive views about their experience in the service. Their views are reflected throughout the report.

### **Regulation Support Assessment**

The inspection plan for this service was decided after a Regulation Support Assessment (RSA) was carried out to determine the intensity of inspection necessary. The RSA is an assessment undertaken by the Care Commission Officer (CCO) which considers complaints activity, changes in the provision of the service, nature of notifications made to the Care Commission by the service (such as absence of a manager) and action taken upon requirements. The CCO will also have considered how the service responded to situations and issues as part of the RSA.

This assessment resulted in this service receiving a medium RSA score and so a medium

intensity inspection was required. The inspection was based on the relevant Inspection Focus Areas and associated National Care Standards, recommendations and requirements from previous inspections and complaints or other regulatory activity.

This service may receive a number of inspections over the year 08/09. This inspection was based upon requirements and recommendations made at the last inspection on 25th October 2007/08.

During the inspection process

Staff at inspection

The inspection was carried out by one Officer from the Care Commission, Daphne Ndlovu. Evidence of the inspection was gathered from the Manager, Administrator and 2 Support Workers.

Evidence was gathered from a number of sources including discussions with service users. A review of a range of policies, procedures, records and other documentation also took place.

Documents reviewed included:

Registration Certificate

Service user's personal plans

Staff files

Whistle Blowing policy

Complaints Policy

Protection of vulnerable adults policy

Staff meeting minutes

Service Brochure

Service Agreement

Business Plan

Annual Report

Service User Introductory pack

Observations were made of staff interactions with service users. All of the above information was taken into account during the inspection process and is reported on.

Inspection Focus Areas and links to Quality Themes and Statements for 2008/09

The inspection was based on the Quality Assessment Framework. This report reflects four Quality Themes appropriate to a Support Service:

- Quality of Care and Support
- Quality of Staffing
- Quality of Management and Leadership

Inspection Focus Area:

Notifications

Details of the inspection focus and associated Quality Themes to be used in inspecting each type of care service in 2008/09 and supporting inspection guidance, can be found at:

<http://www.carecommission.com>

Fire Safety Issues

The Fire (Scotland) Act 2005 introduced new regulatory arrangements in respect of fire safety, on 1 October 2006. In terms of those arrangements, responsibility for enforcing the statutory provisions in relation to fire safety now lies with the Fire and Rescue service for the

area in which a care service is located. Accordingly, the Care Commission will no longer report on matters of fire safety as part of its regulatory function, but, where significant fire safety issues become apparent, will alert the relevant Fire and Rescue service to their existence in order that it may act as it considers appropriate. Further advice on your responsibilities is available at [www.infoscotland.com/firelaw](http://www.infoscotland.com/firelaw)

### **Action taken on requirements since last Inspection**

Three requirements and one recommendation arose from the last inspection. An action plan which detailed how the service would be addressing these, was submitted. Two of the requirements and the one recommendation have now been met. The outstanding requirement will appear in this report as requirement 1 in this report.

### **Comments on Self Assessment**

A fully completed self assessment document was submitted by the service. It was completed to a satisfactory standard and gave relevant information for each of the Quality Themes and Quality Statements. The service identified its strengths and some areas for future development and gave evidence of service user involvement and how they planned to implement change. This information was sampled and used during the inspection process.

### **View of Service Users**

The officer spoke with 4 service users individually and a further 6 in a group setting. The following were some of the comments that they made:

‘Staff are polite and approachable, they really are on the ball ’

‘This is a very valuable service, helping a lot of people’

‘My support worker doesn’t do things for me, but he empowers me to do things’

‘The manager is very approachable and easy to get on with.’

‘My whole package is going smoothly.’

‘They help me with managing my money.’

‘We put ideas forward and discuss them as a group.’

‘I like the anonymity. People really observe confidentiality.’

‘This is somewhere where we get listened to. It also gives us a structure to our day.’

‘If it wasn’t for this place, I wouldn’t be here today.’

### **View of Carers**

There were no carers present on the day of the inspection, however one carer had responded to a questionnaire. Comments made included:

‘The support worker provides a high quality service of care and support for my dad. She has

been invaluable over the last few months.'

I am very happy with the help my dad receives.'

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

**Overall CCO Theme Grading: 4 - Good**

**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 had a participation strategy. This outlined how the people using the service would be involved in the different areas of the life of the service.

A client involvement group met on a regular weekly basis. On the day of the inspection the officer had the opportunity to attend one of these meetings. Minutes of the group meetings sampled demonstrated how issues of concern, affecting service users both within and out with the service had been addressed and how this had improved the quality of care and support received by the people. From a request by the people who use the service, a computer with risk assessed safe internet use had been purchased for use of the group.

The service had used questionnaires to access the views of those who use the service and their carers. The manager held individual case reviews with each of the people who used the service.

The people who used the service that were spoken with confirmed that they were consulted about support and their care needs. They also confirmed that they were encouraged to be fully involved in making decisions that affect their care.

### **Areas for Development**

The manager has identified the need to continue to involve the people who use the service and their carers in assessing and in improving the quality of their care and support.

Based on the findings of this inspection, the service has been awarded the following grade: Quality Statement 1. 1 5 - Very Good

### **CCO Grading**

5 - Very Good

### **Number of Requirements**

0

### **Number of Recommendations**

0

**Statement 4: We use a range of communication methods to ensure we meet the needs of service users.**

### **Service Strengths**

The service had an informative easy to read introductory pack. The people who used the service had individual housing support plans and service agreements. The service agreements outlined the type of support that the service provided, how this support would be provided and what the responsibility of the people using the service was. The service agreement also gave details of how to complain and whom to complain to. This included contact details of the Care Commission.

The service users spoken with confirmed they were always treated fairly and with respect. From minutes of meetings sampled it was evident that confidentiality of the people who use the service was paramount, for example, at one external training event, service users had been unintentionally identified by being asked to introduce themselves and say where they worked etc, the manager had taken steps to minimise the risk of this happening again in future and had addressed this with the training provider and all the service users.

There was evidence that the staff of the service advocated for the people who used the service. The manager had received training in advocacy.

The views of the people who use the service were sought through questionnaires and through the regular meetings that the manager had with the service users.

### **Areas for Development**

Although there was clear evidence that staff advocated for the service users in the event of conflict with external agencies, there was no evidence that service users had access to independent advocacy. The manager already has links with an advocacy service where he had received training in advocacy matters. The manager has agreed to make available information to the people who use the service, regarding where and how they could access advocacy if they wished to. (recommendation 1)

There was no evidence to suggest that the people who used the service could access the inspection report. The manager has agreed to make this available. (recommendation 2)

Based on the findings of this inspection, the service has been awarded the following grade: Quality Statement 1. 4 4 -Good

### **CCO Grading**

4 - Good

### **Number of Requirements**

0

### **Number of Recommendations**

2

**Statement 6: People who use, or would like to use the service, and those who are ceasing the service, are fully informed as to what the service provides**

### **Service Strengths**

Each person starting to use the service received an Introductory Pack. People spoken with confirmed that their allocated key worker would go over the information again to ensure their understanding of what was in it.

Within the housing support plans sampled, there were service agreements that had been signed by the service users.

### **Areas for Development**

The introductory pack did not contain any information about what would happen to any records that the service may hold about the individual, when their time at the service came to an end. The manager has agreed to consider adding this information.

### **CCO Grading**

5 - Very Good

### **Number of Requirements**

0

### **Number of Recommendations**

0

## **Quality Theme 2: Quality of Environment**

**Overall CCO Theme Grading:**

### **Quality Theme 3: Quality of Staffing**

**Overall CCO Theme Grading: 4 - Good**

**Statement 1: We ensure that service users and carers participate in assessing and improving the quality of staffing in the service.**

#### **Service Strengths**

See also Statement 1.1

Key work sessions took place regularly and allowed service users to express their views about staffing issues. Service users spoken with stated they could comment on the working relationship with their key worker. One of the service users spoken with confirmed that when they had requested a change in key worker, this had been acted upon.

On the day of the visit staff were observed to be interacting with service users individually, and also in a group setting. The interactions were positive and appropriate. Staff spoken with demonstrated a clear understanding of their roles. Staff confirmed they felt supported by the manager.

#### **Areas for Development**

There was no evidence to suggest that service users had helped to grade this quality theme.

Based on the findings of this inspection, the service has been awarded the following grade: Quality Statement 3. 1 5 - Very Good

#### **CCO Grading**

5 - Very Good

#### **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**

Staff spoken with spoke of a supportive peer group and management. Staff felt valued and comfortable enough to contribute their views in the service.

On commencement of employment in the service, staff received a handbook which included material that they needed to know regarding the service.

Staff were very knowledgeable about the service and their role within it. Staff had copies of

the Scottish Social Services Council Codes of Practice booklet. Staff had some awareness of their responsibility as far as the codes dictated. The people who use the service felt confident in the staff team. One person commented, 'Staff are polite and approachable, they really are on the ball '

Policies viewed included: Making a protected disclosure which also included whistle blowing within it, Protection of Vulnerable Adults, Lone working and managing aggression.

### **Areas for Development**

The recruitment policy did not mention any service user involvement. Service users were not involved in the recruitment of staff. The manager shared that this was still being considered and that discussions were taking place at board level as to what level service users could be involved in this area.

Although there was evidence demonstrating that the manager had taken steps to seek Protection of Vulnerable Adults training for staff, this training remained outstanding. (Requirement 1)

Based on the findings of this inspection, the service has been awarded the following grade: Quality Statement 3. 3 4 - Good

### **CCO Grading**

4 - Good

### **Number of Requirements**

1

### **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**

The organisation's core values, operating principles and policies, all noted respect towards service users and each other. Some of the people who use the service that were spoken with and Care Commission Officers' observation indicated that staff were always respectful and treated people with dignity.

The people who use the service could discuss issues with their key workers in confidence, for example, at key work sessions. This was supported by comments such as; 'People really observe confidentiality.'

Staff training records were in place. There was evidence demonstrating that staff had undertaken training that would enable them to meet the service user's needs. The staff induction programme included training in understanding boundaries and also client centred planning.

Staff and the people who use the service could meet in private in the interview rooms within the office base.

People who use the service that were spoken with, confirmed that staff empowered them. One comment made was; 'My support worker doesn't do things for me, but he empowers me to do things'

### **Areas for Development**

Although staff were aware of the existence of the SSSC and National Care Standards, it was not clear whether the impact of these within their work setting was high on their agenda. The manager has agreed to continue to raise the SSSC and National Care Standards profile amongst the staff team.

Based on the findings of this inspection, the service has been awarded the following grade: Quality Statement 3. 4 5- Very Good

### **CCO Grading**

5 - Very Good

### **Number of Requirements**

0

### **Number of Recommendations**

0

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

**Overall CCO Theme Grading: 5 - Very Good**

**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**

See also Statement 1.1

Service-user satisfaction surveys allowed the people who use the service to feedback on the quality of management and leadership.

The organisation had a corporate plan and a statement of aims and objectives. One of the stated aims was to 'develop meaningful engagement with service users at an individual and service development level.'

Minutes of meetings demonstrated that the people who use the service raised different issues which were taken into consideration. Issues arising from involvement group meetings are fed into agency planning and considered at the appropriate level for example management, board or local forum.

Service users spoken with confirmed that the Manager communicated, consulted and involved them in decisions about different aspects of the service. One comment made was; 'The manager is very approachable and easy to get on with'

### **Areas for Development**

Although it is clear that service user views are sought on different aspects of the service, there was no evidence of service user involvement in the self assessment.

Based on the findings of this inspection, the service has been awarded the following grade: Quality Statement 4. 1 5- Very Good

### **CCO Grading**

5 - Very Good

### **Number of Requirements**

0

### **Number of Recommendations**

0

**Statement 2: We involve our workforce in determining the direction and future objectives of the service.**

### **Service Strengths**

The service had monthly staff group supervision meetings. Sampled minutes of these meetings showed that discussions included, service development plans, training needs and review of the organisation's business plan.

The manager monitored the quality of support given through his one to one meetings with service users and also through case review meetings with the individual key workers

### **Areas for Development**

The manager has agreed to involve staff more in the service's self assessment process.

Based on the findings of this inspection, the service has been awarded the following grade:  
Quality Statement 4. 2 5- Very Good

### **CCO Grading**

5 - Very Good

### **Number of Requirements**

0

### **Number of Recommendations**

0

**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 organisation had a Corporate Business Plan 2007-2010 which details the current operations of the service and gives a strategic overview.

The manager had a high profile in the service. Service users confirmed that they would be comfortable raising any issues with him and that they were confident that he would deal with any issues competently. This was supported with statements such as; 'The manager is approachable and easy to get on with.'

The organisation provides the contracting 'Supporting People' with information on performance.

The organisation had been awarded the Investors in People Award and also Employer of Excellence (Peninsula)

The organisation had procedures in place for reporting disciplinary issues and matters of staff misconduct to the relevant bodies including the Scottish Social Services Council and the Care Commission.

An action plan outlining how the service would be addressing requirements and recommendations from the last inspection had been submitted to the Care Commission.

## **Areas for Development**

Although service users and carers had been informed about the inspection, there is no evidence to suggest that they were involved in the self assessment.

Based on the findings of this inspection, the service has been awarded the following grade:  
Quality Statement 4. 4 5 - Very Good

## **CCO Grading**

5 - Very Good

## **Number of Requirements**

0

## **Number of Recommendations**

0

**Regulations / Principles**

**National Care Standards**

**Enforcement**

There has been no enforcement action against this service since the last inspection.

**Other Information**

None.

**Requirements**

1. The service should ensure access to appropriate training in adult abuse issues and the use of associated policy and procedures to all staff with access to service users. This is in order to comply with SSI 2002/144 Regulation 13(c) - a requirement to ensure that persons employed in the provision of the care service receive training appropriate to the work they are to perform.

**Recommendations**

1. The service should ensure that the people who use the service have access to independent advocacy. National Care Standards, Housing Support Services, Standard 8.5 Expressing your views.

2. The service should make available the inspection report to the people who use the service. National Care Standards, Housing Support Services, Standard 2.2 Your legal rights and 8.8 Expressing your views

**Daphne Ndlovu**  
**Care Commission Officer**