

REPORT TO: HOUSING COMMITTEE – 8 FEBRUARY 2016

REPORT ON: INSPECTION OF SHELTERED HOUSING WARDEN SERVICE BY THE CARE INSPECTORATE

REPORT BY: EXECUTIVE DIRECTOR OF NEIGHBOURHOOD SERVICES

REPORT NO: 24-2016

1. PURPOSE OF REPORT

- 1.1. The purpose of this report is to report on findings of the Care Inspectorate inspection of the Sheltered Housing Warden Service.

2. RECOMMENDATIONS

- 2.1. It is recommended that the Housing Committee:
- i. Notes the contents of this report, and
 - ii. Instructs the Executive Director of Neighbourhood Services to monitor progress towards meeting the areas for improvement contained in this report.

3. FINANCIAL IMPLICATIONS

- 3.1. None.

4. MAIN TEXT

- 4.1. An inspection of the Sheltered Housing Warden Service was completed on 11 December 2015 by the Care Inspectorate. They published a report on their findings and this is attached as Appendix 1.

- 4.2. The Care Inspectorate identified the following key strengths of the service:

- Tenants spoken to as part of this inspection were very positive in their views about the service. Comments included:
 - “Very happy with the service.”
 - “The staff are professional yet friendly and you can have a joke and a laugh.”
 - “At our complex we have zumba classes, bingo, beauty therapy and we celebrate things like Halloween and St. Andrews day.”
 - “Yes I do get questionnaires from the service asking my views. We also have tenants meetings and a newsletter. We are well informed.”
 - “I feel safe here. They call me every morning to make sure I’m ok.”
 - “The staff go the extra mile to help us.”
 - “Yes I do get a review of my circumstances every six months.”
 - “I trust their confidentiality.”
 - “We had craftwork classes and now our work is in an exhibition.”
- All complexes hold regular tenants meetings to discuss changes and activities and outings with tenants. Their views are gathered and minutes are posted on notice boards in the complexes.

- All service users received a complaints procedure and the complexes visited showed complaints information on noticeboards.
- The service has a comprehensive involvement strategy which commits to things such as communicating big changes by letter, to consultation, to involving tenants in decision making and to the tenants rep's forum for discussing things which matter to the sheltered housing service.
- All the complexes send out regular newsletters keeping tenants up to date with issues and developments. Tenants spoken with confirmed these were seen and appreciated.
- Each service user had a support plan (support agreement) which outlined how the service was going to support them. These contained good detail on how people were to be supported, a summary of that person's needs for quick access and comprehensive records of contacts. A number of plans were randomly selected across the service and all were found to be complete and person centred. There was evidence that each plan was reviewed every six months to update contacts and note any changes in needs and views.
- All tenants were able to get welfare visits from wardens when they needed them. There was a lot of evidence from tenants that these were taking place. One tenant spoke with praised the 'moral support' she had got from wardens when her daughter had become ill.
- The service sent out its 2015 annual questionnaire to all service users to gather their views on the service. This information was gathered and collated. Findings showed the vast majority of people who replied (87%) were happy with the service.
- The service has given tenants a variety of ways in which they can raise any issues that concern them. This, coupled with the good relationships fostered between staff and tenants, means that there are high levels of satisfaction among people who use the service. Tenants felt they would be listened to and concerns acted upon. One tenant said they had asked for an art group and the wardens had organised one for them.
- It was clear that the service took its monitoring of tenants seriously with the use of motion detectors in people's homes and use of daily calls and welfare visits all being used to ensure the safety of people. Interviews with tenants again confirmed that they felt safe and the service would know if there was a problem. The inspector saw a lot of evidence of wardens checking up on people they were concerned about and visiting their homes to make sure everything was okay.
- Throughout all the complexes visited there was evidence of social activities taking place. There was also evidence of community support meetings where tenants got talks from fire safety officers and community police officers. Every complex was also open to non-tenants to use which made it a part of the wider community which had benefits for wider social links for tenants.
- It was clear from the use of notice boards, newsletters and information tables that the complexes were not only set up as places of social activity but also as hubs for information.
- The inspector was impressed by the community spirit fostered by the complexes he visited and with the enthusiasm of the staff.
- The service had employed an activities co-ordinator who had the remit of developing activities with tenants. Projects already underway included, garden's renovation, use of volunteer befrienders and liaison with community service. Students from a local art college had carried out a project with some sheltered complexes. This was confirmed by one tenant who was excited about going to see the resultant exhibition in a local gallery.
- The inspector was impressed with the quality and effectiveness of the support planning used by this service. It was clear that the service was living up to its aims of providing safety, choices and respect.
- Staff in the service had a high level of training. Training records and staff interviews confirmed that all staff had been through an induction programme when they began work and that this included core training such as values, manual handling, confidentiality and adult protection. Staff also received training that they had identified as being useful for them. Several wardens who were interviewed cited a certificated dementia course that they had been on recently which they felt would help them in

their work practice. Another warden stated they had received training in Huntington's disease so they could best support a particular service user.

- Staff all stated that they felt that they were supported to do their job and their ideas were valued by management. Most felt they were part of a team that was supportive.
- All staff confirmed they got regular supervision at which they could discuss their ideas, their performance and the people they supported.
- Interviews with staff showed they were all aware of the National Care Standards.
- The inspector was impressed with the calibre of staff in the service. They were well informed, confident and knew what they were trying to do when supporting people. The attention to a person centred approach was impressive.
- It was clear that the health and wellbeing of service users was at the core of what the service does with its person centred and detailed approach.
- The service had a good level of participation whereby service users, staff and other stakeholders can have an input into what the service delivers
- The service is continually planning its development and this was evidenced in its annual plan. The current plan included: a review of support agreements, tenants forums and quality assurance checks by senior wardens.

To summarise, the inspector stated that this was a very good service which was characterised by knowledgeable and friendly staff, person centred support and high customer satisfaction. Staff and management had put in a lot of hard work to arrive at this level of service and should be commended.

The service had received no formal complaints, which the inspector found impressive, given the size of the service.

4.3. **What the service has done since the last inspection**

- A review of lone working and risk assessment of visits to tenants homes.
- Some staff have undertaken detailed best practice in dementia training. More staff will undertake this training.
- A newsletter (Complex Matters) which encompasses all complexes has been produced.
- Some complexes have had upgrades to décor.
- Staff have received food hygiene training.
- The service has made close links and now meets with the social care response team.
- Liaison with the community safety team.
- Ongoing engagement meetings with staff and with service users.
- Questionnaires have been sent out to service users for feedback on the service.

This inspection confirmed that all of the recommendations identified from the previous inspection had been met in full.

4.4. Evaluations

4.4.1. There were no issues/concerns identified as requirements for improvement:

4.4.2. The following were identified as recommendations for improvement:

- The service should ensure safe recruitment.
- The service should have a written protocol for what they should do if they discovered that a tenant had died when they visited their home.

4.5. Grading

4.5.1. The Care Inspectorate reports use a six-point scale for reporting performance:

6	Excellent
5	Very Good
4	Good
3	Adequate
2	Weak
1	Unsatisfactory

4.5.2. The following grades were awarded:

Theme	Individual Grade Awarded	Overall Grading
Quality of Care and Support	Statement 1 - (5) - Very Good Statement 3 - (5) - Very Good	(5) - Very Good
Quality of Staffing	Statement 1 - (5) - Very Good Statement 3 - (5) - Very Good	(5) - Very Good
Quality of Management and Leadership	Statement 1 - (5) - Very Good Statement 4 - (5) - Very Good	(5) - Very Good

4.5.3. This compares to the grades awarded following the previous inspection:

Theme	Individual Grade Awarded	Overall Grading
Quality of Care and Support	Statement 1 - (4) - Good Statement 3 - (5) – Very Good	(4) - Good
Quality of Staffing	Statement 1 - (4) - Good Statement 3 - (4) - Good	(4) - Good
Quality of Management and Leadership	Statement 1 - (4) - Good Statement 4 - (4) - Good	(4) - Good

4.6. The grades have improved across all three Quality Themes, from Good to Very Good for Quality of Care and Support; Quality of Staffing; and Quality of Management and Leadership.

4.7. The inspection identified no requirements and only two recommendations for improvement. An Action Plan to meet the two recommendations in the Care Inspectorate report has been agreed and submitted. The Action Plan is attached as Appendix 2.

5. **POLICY IMPLICATIONS**

- 5.1. This report has been screened for any policy implications in respect of Sustainability, Strategic Environment Assessment, Anti-Poverty, Equality Impact Assessment and Risk Management. There are no major issues.

6. **CONSULTATION**

- 6.1. The Chief Executive, the Executive Director of Corporate Services, Head of Democratic and Legal Services have been consulted and are in agreement with the contents of this report.

7. **BACKGROUND PAPERS**

- 7.1. None.

ELAINE ZWIRLEIN
EXECUTIVE DIRECTOR OF NEIGHBOURHOOD SERVICES

22 JANUARY 2016



Care service inspection report

Full inspection

Dundee City Council - Sheltered Housing Warden's Service Housing Support Service

West District Housing Office
3 Sinclair Street
Dundee



Inspection report for Dundee City Council - Sheltered Housing Warden's Service
Inspection completed on 11 December 2015

Service provided by: Dundee City Council

Service provider number: SP2003004034

Care service number: CS2006118106

Inspection Visit Type: Announced (Short Notice)

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	5	Very Good

What the service does well

This service supports tenants in sheltered housing complexes across Dundee. Its strengths are in its professional and friendly staff, its efficient and effective approach to support and in its fostering of social and community activities.

What the service could do better

The service is aware of the areas in which it needs to improve and is engaged in acting on these areas. This inspection highlighted areas for improvement in staff training, recording of incidents and protocols. These issues were not seen by the inspector as serious - rather as matters which would improve an already very good service.

What the service has done since the last inspection

The service has undertaken the following developments since the last inspection:-

- A review of lone working and risk assessment of visits to tenants homes.
- Some staff have undertaken detailed best practice in dementia training. More to follow.
- A newsletter (Complex Matters) which encompasses all complexes has been produced.
- Some complexes have had upgrades to décor.
- Staff have received food hygiene training.
- The service has made close links and now meets with the social care response team.
- Liaison with the community safety team.
- Ongoing engagement meetings with staff and with service users.
- Questionnaires have been sent out to service users for feedback on the service.

Conclusion

This was a very good service which was characterised by knowledgeable and friendly staff, person centred support and high customer satisfaction. Staff and management had put in a lot of hard work to arrive at this level of service and should be commended.

1 About the service we inspected

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

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

Dundee City Council - Sheltered Housing Warden's Service is registered to provide a housing support service to tenants of Dundee City Council. The key feature of the service is the warden led service with each flat having an emergency alarm. The service meets the needs of tenants who are aged 60 or over. The service also provides very sheltered housing to meet the needs of frail older people who require additional support to live in their own homes. The service is available to approximately 2000 tenants in 36 sheltered housing complexes.

The housing support service is provided by the manager, eight senior wardens and about 80 wardens. The wardens are on duty in each complex every day of the week, usually between 8.00am and 2.30pm or 4.00pm, depending on the day of the week, but they may be on duty at specified times outside these hours. The tenants are notified in writing about the availability of the warden service in each complex. Tenants are linked to the Community Alarm service outside these hours.

The role of the wardens is to support tenants to live independently with the minimum of intrusions. Wardens check twice daily whether each tenant is active in their home through a mat or motion detector and speak with each tenant daily by intercom or phone. Wardens visit tenants in their home at an agreed frequency. Wardens also assist tenants with filling in forms, dealing with correspondence, contacting health and support agencies and assist tenants to stay safe and well in their home. Wardens assist tenants to organise social activities and a comfort fund for each development. Wardens do not provide personal care, except in an emergency. Tenants have the use of laundry facilities and a communal lounge in each development.

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 - Grade 5 - Very Good

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 high intensity inspection. We carry out these inspections where we have assessed the service may need a more intense inspection.

What we did during the inspection

This report was written after a short-term announced inspection which took place between 2 and 11 December 2015. One inspector was involved in the inspection.

As requested by us, the service sent us an annual return. The Care Inspectorate wrote to the service to request completion of the self assessment form which was duly completed.

The inspector had telephone interviews with 20 service users who were randomly picked by the service and who gave permission to be contacted. These covered all 8 complexes in the service. He also had face to face interviews with 9 tenants while out visiting different complexes within the service.

Evidence was also gathered from the following sources:-

- Interviews with 26 staff.
- Interviews with 29 service users.
- Interviews with manager of the service and activities co-ordinator.
- Inspection of personal plans in 8 different complexes.
- Inspection of records.
- Inspection of policies and procedures.
- Observation of staff practice.

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.

The Care Inspectorate received an extensively detailed and fully completed self assessment document from the service provider. We were very impressed with the way this had been completed and with the information they had provided under each theme that we were inspecting.

Taking the views of people using the care service into account

Twenty-nine tenants who use the service were spoken with during the inspection and the views expressed were very positive about the service. Here are some of the things people said:-

- Very happy with the service.
- The staff help me with advice on any queries I have or forms to fill out.
- The staff are professional yet friendly and you can have a joke and a laugh.
- At our complex we have zumba classes, bingo, beauty therapy and we celebrate things like Halloween and St. Andrews day.
- Yes I do get questionnaires from the service asking my views. We also have tenants meetings and a newsletter. We are well informed.
- I feel safe here. They call me every morning to make sure I'm okay.
- I would go to the senior warden if I had a complaint but I have never had a complaint.

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- The staff go the extra mile to help us.
- Yes I do get a review of my circumstances every six months.
- I meet my friends in the complex every day and we have a blether. Sometimes the staff make us a cuppa or we make our own.
- I use the laundry every week it's a great part of the service.
- I trust their confidentiality.
- We had craftwork classes and now our work is in an exhibition.
- If I tell staff about my hospital appointments they will remind me near the time.
- The staff are all lovely. Ten out of ten!

Taking carers' views into account

Not Applicable.

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 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

This service had a very good level of participation for service users. Here are some examples of the strengths:

- All complexes hold regular tenants meetings to discuss changes and activities and outings with tenants. Their views are gathered and minutes are posted on notice boards in the complexes. Recent minutes from one complex's meeting showed discussion of the social calendar, leaves making the paths slippery and pendant checks.
- All service users received a complaints procedure and the complexes visited showed complaints information on noticeboards.
- Sheltered housing information sessions were held by the provider in all the complexes to promote what the service does, what developments are taking place and to give information on related services such as the community response team.

- The service has a comprehensive involvement strategy which commits to things such as communicating big changes by letter, to consultation, to involving tenants in decision making and to the tenants rep's forum for discussing things which matter to sheltered housing services.
- 6 monthly reviews of support plans were carried out for all tenants - this reviewed their ongoing support needs and any changes that needed to be made to personal details such as phone numbers for the next of kin. Tenants spoken with confirmed these took place and inspection of support plans also backed this up.
- All tenants were able to get welfare visits from wardens when they needed them. There was a lot of evidence from tenants that these were taking place. One tenant spoke with praised the 'moral support' she had got from wardens when her daughter had become ill.
- All tenants were able to get welfare visits from wardens when they needed them. There was a lot of evidence in records of these taking place.
- All the complexes send out regular newsletters keeping tenants up-to-date with issues and developments. Tenants spoken with by volunteer inspectors confirmed these were seen and appreciated. There was also an overarching newsletter (Complex Matters) which informed tenants of changes and developments.
- The service sent out its 2015 annual questionnaire out to all service users to gather their views on the service. This information was gathered and collated. Findings showed the vast majority of people who replied (87%) were happy with the service.
- Service users spoken with felt that their views were asked for by staff and were listened to. One tenant said that they had asked for an art group and the wardens had organised one for them.

The service has given tenants a variety of ways in which they can raise any issues that concern them. This, coupled with the good relationships fostered between staff and tenants, means that there are high levels of satisfaction among people who use the service. The staff should be commended for working hard towards achieving this outcome. Tenants felt that they would be listened to and concerns acted upon. This is why a grade of 'very good' has been awarded here.

Areas for improvement

The service should consider further improvements to its participation practice such as tenant participation in recruitment and further development and use of the findings from the questionnaires - how can they get to the views of the few who are not satisfied.

Grade

5 - Very Good

Number of requirements - 0

Number of recommendations - 0

Statement 3

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

Service Strengths

The service had a very good level of support provision for service users. Here are some examples of the strengths:-

- Each service user had a support plan (support agreement) which outlined how the service was going to support them. These contained good detail on how people were to be supported, a summary of that persons needs for quick access and comprehensive records of contacts. 10 plans were randomly selected across the complexes visited and all were found to be complete and person centred. There was evidence that each plan was reviewed every 6 months to update contacts and note any changes in needs and views.
- Observation of staff practice showed good relationships between staff and service users. In one interaction a warden assisted someone with advice on a letter they had received. In another a warden helped someone to get a phone number for a local service. Tenants themselves reported that staff were very helpful and they trusted them with confidential information.
- It was clear that the service took its monitoring of tenants seriously with the use of motion detectors in people's homes and use of daily calls and welfare visits all being used to ensure the safety of people. Interviews with tenants again confirmed that they felt safe and that the service would know if there was a problem. The inspector saw a lot of evidence of wardens checking up on people they were concerned about and visiting their homes to make sure everything was okay.

- Throughout all the complexes visited there was evidence of social activities taking place. These included regular bingo, themed parties, trips out, exercise classes and reminiscence groups. There was also evidence of community support meetings where tenants got talks from fire safety officers and community police officers. Each complex was also open to non-tenants to use which made it a part of the wider community which had benefits for wider social links for tenants.
- The service had employed an activities co-ordinator who had the remit of developing activities with tenants. Projects already underway included, garden's renovation, use of volunteer befrienders and liaison with community service. Students from the local art college had carried out a project with one complex to make art. This was confirmed by one tenant who was excited about going to see the resultant exhibition in a local gallery.
- It was clear from the use of notice-boards, newsletters and information tables that the complexes were not only set up as places of social activity but also as hubs for information. This was confirmed by wardens who felt it was an important part of their support role. In the complexes, tenants could gain information on a whole range of resources that might be important to them in their lives.

The inspector was impressed by the community spirit fostered by the complexes he visited and with the enthusiasm of the staff. Service users were well supported and felt happy with their wardens. This is why a grade of very good has been awarded.

Areas for improvement

There was discussion between the inspector and the management of the service about what things should, and should not, be notified to the Care Inspectorate. The service agreed to raise this with senior staff so that a clear and consistent approach was taken to appropriate notifications.

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 1

"We ensure that service users and carers participate in assessing and improving the quality of staffing in the service."

Service Strengths

Please see Quality Theme 1 statement 1 for information in relation to this statement.

Areas for improvement

Please see Quality Theme 1 statement 1 for information in relation to this statement.

Grade

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

We found that the service had a professional and well-trained workforce who were confident in their roles. Here are some of its strengths:-

- Staff at the service had a high level of training. Training records and staff interviews confirmed that all staff had been through an induction programme when they began work and that this included core training such as values, manual handling, confidentiality and adult protection. Staff also received training that they had identified as being useful for them. Several wardens who were interviewed cited a certificated dementia course that they had been on recently which they felt would help them in their work practice. Another warden stated they had received training in Huntington's disease so they could best support a particular service user.
- Staff all stated that they felt that they were supported to do their job and their ideas were valued by management. Most felt they were part of a team that was supportive. They felt they had enough time to do their allotted jobs though sometimes it was busy. There were regular team meetings. Service users who were interviewed were also very enthusiastic about the staff. People highlighted staff qualities as: friendly, like a laugh, keep confidences, supportive in times of stress, knowledgeable on local resources.
- All wardens spoken with confirmed they got regular supervision at which they could discuss their ideas, their performance and the people they supported. All benefitted from an appraisal (EPDR) designed to support their professional development. Staff were also formally observed and given feedback on their performance.

- Interviews with staff showed that they were all aware of the National Care Standards and could apply them to their work role. Many spoken with confirmed they had been given SSSC codes of practice. The inspector observed staff respecting service users' choices, dignity and privacy on the days of inspection. A tenant spoken with by the inspector said that they had respected his confidentiality.
- Staff confirmed that there had been engagement meetings with senior management to discuss and outline the changes taking place and the senior manager was seen as approachable and effective in getting things done.
- All staff have their own service email account and this helped them to keep up-to-date with developments within the service and to be communicated with on matters that concerned them.
- Observation of staff practice undertaking a variety of tasks with tenants showed them to be confident, relaxed and professional in their approach. All wardens spoken with stated that they felt supported and that their concerns were listened to by management.

The inspector was impressed with the calibre of staff at the service. They were well informed, confident and knew what they were trying to do when supporting people. The attention to a person centred approach was impressive. Tenant satisfaction with staff was, also, high which is why a grade of very good has been awarded for this statement.

Areas for improvement

It was noted that one new member of staff was working without a valid PVG. This was investigated and it was found that good recruitment practice had been followed. A PVG had been done and sent but no certificate had been returned. The service immediately changed their procedures to ensure that PVG returns were checked. The member of staff was immediately taken away from lone working until his PVG was completed. See recommendation 1.

Grade

5 - Very Good

Number of requirements - 0

Recommendations

Number of recommendations - 1

1. The service should ensure safe recruitment.

National Care Standards 3 Housing Support Services - Management and Staffing Arrangements;

5 You know that the provider's staff and managers are all recruited and selected through a process which includes:

- taking up references;
- criminal records checks where required; and
- cross-reference to the registers of the Scottish Social Services Council, the United Kingdom Central Council for Nurses, Midwives and Health Visitors (UKCC), or other professional organisations, where appropriate.

Quality Theme 4: Quality of Management and Leadership

Grade awarded for this theme: 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

Please see Quality Theme 1 statement 1 for information in relation to this statement.

Areas for improvement

Please see Quality Theme 1 statement 1 for information in relation to this statement.

Grade

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 service had a very good quality assurance system supported by its provider and from within the service itself. Here are some of the strengths that were identified:-

- It is clear that the health and wellbeing of service users was at the core of what this service does with its person centred and detailed approach. (The information for this can be found in Quality Theme 1 statement 3).
- The service had a good level of participation whereby service users, staff and other stakeholders can have an input into what the service delivers. (The information for this can be found in Quality Theme 1 statement 1).
- The service had effective systems in place to support staff, to develop their skills via training and supervision - they also involve staff in developing the service. (The information for this can be found in Quality Theme 1 statement 3).
- The service is continually planning its development and this was evidenced in its annual service plan which fed into and was informed by the provider's wider business plan. This outlined how the service was going to develop and who was responsible for achieving this. The current plan included: a review of support agreements, tenants forums and quality assurance checks by senior wardens.
- The service gathers a lot of performance information on each complex to ensure quality is maintained. Evidence was seen of senior wardens monitoring things such as home visits, support agreements and engagement.
- There was evidence of quality assurance visits made regularly to all complexes. These checked register, support agreements, key safes, cash held, and notice boards among other things.

This service had very good quality assurance systems in place which were part of the production of a highly valued service. Both staff and service users spoken with were happy with the service. This is why a grade of very good has been given here.

Areas for improvement

It was noted that senior warden had not received supervision recently and that this was due to the manager being off work. The service was reminded of the importance of supervision and stated that they would address this forthwith.

Although staff interviewed knew the protocol for what they should do if they discovered that a tenant had died when they visited their home there was no written protocol for this. The inspector recommended that a protocol be written and incorporated into staff policies and procedures and into the induction programme. See recommendation 1.

Grade

5 - Very Good

Number of requirements - 0

Recommendations

Number of recommendations - 1

1. The service should have a written protocol for what they should do if they discovered that a tenant had died when they visited their home.

National Care Standards 3 Housing Support Services - Management and Staffing Arrangements.

1. You can be assured that the provider has policies and procedures which cover all legal requirements, including:

- staffing and training;
- whistle-blowing;
- managing risk; and
- proper record-keeping, including recording incidents and complaints.

2. You can be confident that staff know how to put these policies and procedures into practice. They have regular training to review this and to learn about new guidance.

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

1. A recommendation on keeping support plans demonstrably up-to-date was made.

This recommendation was made on 03 February 2015

Met.

2. A recommendation on I.T. training for staff was made.

This recommendation was made on 03 February 2015

Met

3. A recommendation on an support staff member for new staff to liaise with during induction.

This recommendation was made on 03 February 2015

Met

4. A recommendation on reminding staff of their responsibilities to uphold the public's trust in social services was made.

This recommendation was made on 03 February 2015

Met.

6 Complaints

No complaints have been upheld, or partially upheld, since the last inspection.

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	
5 Mar 2015	Announced (Short Notice)	Care and support	4 - Good
		Environment	Not Assessed
		Staffing	4 - Good
		Management and Leadership	4 - Good
21 Feb 2014	Announced (Short Notice)	Care and support	3 - Adequate
		Environment	Not Assessed
		Staffing	3 - Adequate
		Management and Leadership	2 - Weak

Inspection report

30 Jan 2013	Announced (Short Notice)	Care and support Environment Staffing Management and Leadership	4 - Good Not Assessed 3 - Adequate 4 - Good
17 Jun 2011	Unannounced	Care and support Environment Staffing Management and Leadership	3 - Adequate Not Assessed 3 - Adequate 3 - Adequate
7 May 2010	Announced	Care and support Environment Staffing Management and Leadership	4 - Good Not Assessed 4 - Good 3 - Adequate
4 Jun 2009	Announced	Care and support Environment Staffing Management and Leadership	3 - Adequate Not Assessed 3 - Adequate 3 - Adequate

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This report is available in other languages and formats on request.

Tha am foillseachadh seo ri fhaighinn ann an cruthannan is c?nain eile ma nithear iarrtas.

অনুরোধসাপেক্ষে এই প্রকাশনাটি অন্য ফরম্যাট এবং অন্যান্য ভাষায় পাওয়া যায়।

یہ اشاعت درخواست کرنے پر دیگر شکلوں اور دیگر زبانوں میں فراہم کی جاسکتی ہے۔

ਬੇਨਤੀ 'ਤੇ ਇਹ ਪ੍ਰਕਾਸ਼ਨ ਹੋਰ ਰੂਪਾਂ ਅਤੇ ਹੋਰਨਾਂ ਭਾਸ਼ਾਵਾਂ ਵਿਚ ਉਪਲਬਧ ਹੈ।

هذه الوثيقة متوفرة بلغات ونماذج أخرى عند الطلب

本出版品有其他格式和其他語言備索。

Na życzenie niniejsza publikacja dostępna jest także w innych formatach oraz językach.

Service Name:	Dundee City Council - Sheltered Housing Warden Service		
CS Number:	2006118106		
Service Provider:	Dundee City Council		
Address:	West District Housing Office, 3 Sinclair Street, Lochee, Dundee, Dundee DD2 3DA		
Care Inspectorate Inspection Officer:	Timothy Taylor		
Date Inspection Concluded:	11 December 2015		
Requirements and Recommendations	Action Planned	Timescale	Responsible Person
<p>Quality Theme 3, Statement 3</p> <p>Recommendations</p> <ul style="list-style-type: none"> - The service should ensure safe recruitment 	<ul style="list-style-type: none"> - The service will produce a written process for recruitment. This will include a realistic timeline and a risk assessment process regarding PVG checks - The service will amend our induction process to include a confirmation that PVG checks are in place prior to any lone working 	- January 2016	Housing Services Team Leader / Senior Sheltered Wardens.
<p>Quality Theme 4, Statement 4</p> <p>Recommendations</p> <ul style="list-style-type: none"> - The service should have a written protocol for what they should do if they discovered that a tenant had died when they visited their home 	<ul style="list-style-type: none"> - Existing protocol is outdated. Document will be redrafted to make it current and relevant and will include the Critical Incident Debrief process 	- January 2016	Housing Services Team Leader / Senior Sheltered Wardens.