

REPORT TO: SCRUTINY COMMITTEE - 9 September 2009

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

REPORT BY: DIRECTOR OF HOUSING

REPORT NO: 389-2009

1. PURPOSE OF REPORT

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

2. RECOMMENDATIONS

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

3. FINANCIAL IMPLICATIONS

- 3.1. None.

4. MAIN TEXT

- 4.1. The Sheltered Housing Warden Service was inspected in May 2009 by the Care Commission. They published a report on their findings on 7 July 2009. This is attached as Appendix 1.

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

- Consultation questionnaires and meetings
- Tenant/Warden meetings
- Dealing with Complaints
- Support given to tenants to exercise choice and meet potential
- Adult Protection Policy and procedure
- Ethos of respect towards service users
- Senior staff meetings
- Improvement planning
- Involvement with the Older Persons Strategic Planning Group

4.3. Evaluations

- 4.3.1. The following were identified as requirements for improvement:

- The provider must ensure that all tenants of the service have a housing support plan written in consultation with them and if appropriate their carers or other representatives.
- The provider must ensure that it individually considers restraint and limits to freedom for all service users.

- The service must at all times ensure the welfare of service users by having an effective and acceptable alarm service.

4.3.2. The following were identified as recommendations for improvement:

- The service should ensure that it regularly asks tenants and where appropriate their carers' views on the quality of support they receive and ideas for improvement as part of the review of their housing support plan and in other forms of consultation.
- The service should ensure that service users' housing support plans include tenants' abilities, their preferences about how support will be carried out and how agreed goals will support tenants to achieve their potential.
- The service should ensure that tenants' risk assessments include how tenants chose to manage identified risks and what the service said it would do to prevent or reduce the risk of harm for tenants.
- The service is recommended to provide staff with training on adult protection.
- The service is recommended to put in place a system of staff supervision for support and to promote, ensure and evidence that wardens are using expected support practices and social services values in their work with tenants.
- The service is recommended to put in place a system of direct observation of wardens' practice of using expected support practices and social services values in their work with tenants.
- The service is recommended to ensure its quality assurance processes result in reviews of personal plans, risk and restraint assessments are carried out and to an improved standard.
- The service is recommended to consult with tenants and staff on the continuing effectiveness of the current warden arrangements and implementation of the modernisation strategy.
- The service is recommended to ensure that prospective tenants of the warden service receive written information about the service and can discuss this with a member of staff.
- The service is recommended to ensure all staff have child protection training appropriate to their role and the service's policy.
- The service should ensure that all meetings are accurately recorded such that all parties are clear about what has been discussed and that the outcomes of these discussions and any necessary actions are understood.

4.4. Grading

4.4.1. Care Commission reports use a six-point scale for reporting performance:

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

4.4.2. The following gradings were awarded:

Theme	Overall Grading
Quality of Care and Support	3 – Adequate
Quality of Staffing	3 – Adequate
Quality of Management and Leadership	3 – Adequate

- 4.5. An Action Plan to meet the requirement and recommendations in the Care Commission's report has been agreed and submitted. The items on the action plan will form part of the Section Action Plan for the service for 2009/2010. The Action Plan is attached as Appendix 2.

5. **POLICY IMPLICATIONS**

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

6. **CONSULTATION**

- 6.1. This report has been subject to consultation with the Chief Executive, Depute Chief Executive (Support Services), Depute Chief Executive (Finance) and Head of Finance.

7. **BACKGROUND PAPERS**

- 7.1. The following Background Papers were relied upon in preparation of this Report:
- Inspection Report, Dundee City Council - Sheltered Housing Warden Service, Scottish Commission for the Regulation of Care, Dundee, 2009.

ELAINE ZWIRLEIN
DIRECTOR OF HOUSING

Inspection report

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

West District Housing Office 3 Sinclair Street
Lochee
Dundee DD2 3DA

Inspected by: Patrick Sweeney
(Care Commission Officer)

Type of inspection: Announced

Inspection completed on: 4 June 2009

Improving care in Scotland

Service Number

CS2006118106

Service name

Dundee City Council - Sheltered Housing Warden's Service

Service addressWest District Housing Office 3 Sinclair Street
Lochee
Dundee DD2 3DA**Provider Number**

SP2003004034

Provider Name

Dundee City Council

Inspected ByPatrick Sweeney
Care Commission Officer**Inspection Type**

Announced

Inspection Completed

4 June 2009

Period since last inspection

23 months - 22 June 2007

Local Office AddressCentral East Region
Compass House
11 Riverside Drive
Dundee
DD1 4NY

Introduction

Dundee City Council - Sheltered Housing Warden Service is registered by the Care Commission since 3 April 2006 to provide a housing support service to tenants of Dundee City Council. The service meets the needs of tenants who are aged 60 or over and other tenants with additional needs including; dementia, physical disabilities, learning disabilities and mental health problems. The service also provides support to tenants in very sheltered housing who require additional support to live independently.

The service is available to just over 2,500 tenants in 37 sheltered housing complexes. The accommodation provided by the Council is not regulated by the Care Commission. Tenants have the use of laundry facilities and a communal lounge in each development.

A housing support service provides support, assistance, advice or counselling to people with a particular need to enable them to occupy their accommodation.

The housing support service is provided by the manager, a senior housing officer, eight senior wardens and about 90 wardens.

The wardens are on duty in each development every day of the week, usually between 8.00am and 2.30pm 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, such as once every two or four weeks.

Wardens also assist tenants with filling in forms, dealing with correspondence, contacting health and support agencies, and other anything that can 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.

Based on the findings of this inspection the service has been awarded the following grades:

Quality of Care and Support - 3 - Adequate

Quality of Staffing - 3 - Adequate

Quality of Management and Leadership - 3 - Adequate

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) for the most up-to-date grades for this service.

Basis of Report

This report was compiled following an announced inspection that took place on 29 May, 1 and 2 June 2009 by Patrick Sweeney, Care Commission Officer and Winnie Whyte, Lay Assessor. There was a feedback meeting with the manager and external manager of the

service on 4 June 2009.

Before the Inspection

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 tenants

Questionnaires completed by 75 tenants.

Phone call to 18 tenants.

Meetings with 16 tenants in two developments and interviews with two tenants in one development.

Questionnaires completed by 18 carers or relatives of tenants.

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 low RSA score and so a low intensity inspection was required as a result. The inspection was based upon the relevant Inspection Focus Area (IFA) and associated National Care Standards - Support Services, recommendations and requirements from previous inspections and complaints or other regulatory activity.

Evidence at inspection

Examination of 6 housing support plans.

Questionnaires returned by 48 staff members.

Interviews with four wardens, two senior wardens, the sheltered housing officer and the manager of the service.

Examination of a sample of supporting evidence identified in the service's Self Assessment.

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

Details of the Inspection Focus Area 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

Action taken on requirements since last inspection

There were three requirements and five recommendations for the service to take action on since the last inspection report. Information about complaints that have been upheld or partially upheld can be found on the Care Commission website.

Requirement 1

The provider must; develop a policy and procedure on restraint; ensure individualised risk assessments consider restraint and limits to tenants' freedom; and ensure The wardens receive appropriate training on the implementation of the policy and procedure. This is in order to comply with The Regulation of Care (Requirements as to Care Services) (Scotland) Regulations 2002 (SSI 2002/114) regulation 4(1)(a)(c), regulation 13 - a requirement that a provider shall make proper provision for the health and welfare of tenants and ensure that no service user is subject to restraint unless it is the only practicable means of securing the welfare of that or any other service user and there are exceptional circumstances and ensure that persons employed in the provision of the care service receive training appropriate to the work they are to perform. Timescale for implementation: 31 March 2008.

This requirement had been partially met. See strengths and areas for development under Quality of Care and Support, Statement 1.2. A revised requirement is made. (Requirement 2)

Requirement 2

The service must develop and implement an adult protection policy. This is in order to comply with SSI 114/2002 regulation 4(1)(a) - a requirement that a provider shall make proper provision for the health and welfare of tenants. Timescale for implementation: 31 March 2008.

This requirement was met. See strengths and areas for development under Quality of Staffing, Statement 3.4. No further requirement was made at this inspection. A new recommendation is made. (Recommendation 4)

Requirement 2

The service must at all times ensure the welfare of service users. In order to achieve this, the service must

- a) ensure they provide the safety equipment detailed in their information leaflet and/or
- b) agree with all service users an appropriate level of alarm service.

This is in order to comply with SSI 2002/114 Regulation 4 - a regulation aimed at ensuring the health and welfare of service users. Timescale: The service should meet this within 6 months of the date of this report.

This requirement had been partially met. The service had installed a new wireless alarm in one sheltered housing development to address this requirement. This system ensured tenants welfare was being monitored through a motion detection sensor as with all other tenants. However tenants were unhappy that the new system disturbed them with unwanted alarms. The staff were concerned they could only speak to tenants by phone, and not through a speaker box, as is usual, particularly as tenants had difficulty getting to the phone. The service acknowledged the new system disturbed tenants and reduced staff confidence in its effectiveness. The service has either to ensure the operation of the alarm is acceptable and effective or consider a replacement system. A revised requirement is made until this matter is resolved under Quality of Care and Support, Statement 1.2. (Requirement 3)

Recommendation 1

The service is recommended to implement its child protection policy by; ensuring staff are aware of the contents of the policy; providing all staff with training appropriate to their role; and carrying out regular reviews of the policy. National Care Standards, Housing Support Services, Standard 3, Management and The staffing.

This recommendation had been met. The service had provided about a quarter of staff with child protection training linked to its child protection policy. A revised recommendation is made again under Quality of Management and Leadership, Statement 4.4. (Recommendation 10)

Recommendation 2

The service is recommended to ensure the content of each support plan reflected the agreement between the tenant and their service about how the tenant's individual needs and preferences would be met. Standard 4, Housing Support Planning.

This recommendation had not been met. See areas for development under Quality of Care and Support, Statement 1.2. A revised recommendation is made. (Recommendation 2)

Recommendation 3

The service is recommended to ensure tenants have information on any service developments from the management of the service and are aware of how the service is managed. Standard 3, Management and The staffing arrangements.

This recommendation had been met. See strengths and areas for development under Quality of Management and Leadership, Statements 4.1 and 4.4. A new recommendation is made. (Recommendation 8)

Recommendation 4

The service is recommended to ensure that prospective tenants of the warden service receive written information about the service and can discuss this with a member of staff. Standard 1, Informing and deciding.

This recommendation had been partially met. The service had requested the Housing Department provide prospective tenants with leaflets about the service and to involve the wardens in viewing of properties. In most instances this system had worked. There was comment that sometimes wardens were informed about viewings only when tenants were visiting. Wardens commented that prospective tenants often did not understand the purpose of sheltered housing and the range of services offered until informed in person. It was suggested that the service have a shared performance measure with the Housing Department to monitor whether wardens are involved in all viewings on a planned basis. The recommendation is made again under Quality of Management and Leadership, Statement 4.4 to ensure this practice is embedded and measurable at the next inspection. (Recommendation 9)

Recommendations 5

The service should ensure that all meetings are accurately recorded such that all parties are clear about what has been discussed and that outcomes of these discussions and any necessary actions are understood. Standard 3, Management and staffing.

There have been no further management meetings with tenants since this recommendation was made. This recommendation is made again under Quality of Management and

Leadership, Statement 4.4, until practice can be evidenced at inspection. (Recommendation 11)

Comments on Self Assessment

A Self Assessment document was submitted by the service. This was completed to a very good standard within the required timescale. The Self Assessment gave relevant information for each Quality Theme and Statement. The service had identified areas it did well. The service had planned areas for future development.

View of Service Users

The views of tenants were obtained in 75 questionnaires returned directly to the Care Commission. The responses included;
Most (88%) said they were satisfied or very satisfied that the wardens treated them with respect and some (12%) were dissatisfied or very dissatisfied. Similarly most (81%) said they were satisfied or very satisfied that they got the support that had been agreed and some (9%) were dissatisfied or very dissatisfied. 10% of tenants said that they did not know if they got the support agreed. Again most (84%) said they were satisfied or very satisfied with the service overall and some (16%) were dissatisfied or very dissatisfied.

While there are high satisfaction rates with the service the management should consider how it will identify and address where tenants are dissatisfied as evidenced above.

The views of 18 tenants were obtained by a Lay Assessor. A Lay Assessor is a member of the public who volunteers to work alongside Care Commission Officers during the Inspection process. Lay Assessors have a unique experience of either being a service user themselves or being a carer for someone who uses or has used services. The Lay Assessors role is to speak with people using the service being inspected and gathering their views. Most of the tenants were aware of the Care Commission and had completed and returned questionnaires.

The Lay Assessor asked tenants about the quality of care and support. Comments made included;

"We have activities on throughout the week in our complex they can be; bingo, Sunday brunch, afternoon teas, craft, ti-chi, manicure and bowls.

"We plan days out with the warden's assistance."

"Our support plans are kept in our houses and copies in the warden's office."

"If I had a complaint I would speak to the wardens first and see if we could resolve it, if not then talk to the next one up that ladder."

"The wardens are approachable providing a supporting listening ear. They are around if we need them and in emergencies. Nothing is too much bother. They assist me to socialise just by being there."

"The wardens are very helpful and put a lot of work into arranging our activities."

"The warden buzzes me every morning to make sure I am safe and everything is alright with me. If I have a long lie and not up by a certain time they will pop up and make sure I am alright."

"My warden must have sixth sense. If I say I'm fine they always seem to know when I'm not and will come up to make sure I am O.K."

The Lay Assessor asked tenants about the quality of staffing. Comments made included;

"I have not been involved in training recruiting, appointment of the wardens as I have not

been asked to."

"They definitely treat me with respect and are always caring."

"If I have a problem I've no fears about speaking to any of my wardens."

"Somebody listening and understanding means a lot to me."

"The wardens always treat me with respect and couldn't treat me better."

"The wardens know their work role and are very respectful and confidential."

"This complex could do with more wardens as if one is called away to another complex."

The Lay Assessor asked tenants about the quality of management and leadership.

Comments made included;

"I don't know who the management are. I never see them."

"I've never been asked to fill in a survey or questionnaire about the warden service from the council."

"I would hate the service to change I like it the way it is."

"Change of wardens has meant the service has changed and I don't like it."

"We could do with more The wardens as sometimes we don't have near enough to cover what is expected of the wardens."

The Lay Assessor commented that tenants were happy with the service they are receiving at present. However some tenants are concerned for the future of the service owing to changes taking place.

View of Carers

No carers were spoken to directly in this inspection.

The views of carers or relatives were obtained in 17 questionnaires returned directly to the Care Commission. All said they were satisfied or very satisfied that the wardens treated their relative or friend with respect. One person did not know. Similarly All said they were satisfied or very satisfied that their relative or friend got the support that had been agreed. One person did not know. Again all said they were satisfied or very satisfied with the service for their relative or friend.

Quality Theme 1: Quality of Care and Support

Overall CCO Theme Grading: 3 - Adequate

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 adequate practice of involving tenants and care in assessing and improving the quality of care and support provided. The good practice demonstrated by the service in its consultation questionnaires and consultation meetings was balanced against its adequate practice of involving tenants in reviews of their individual service and the warden tenant meetings.

The service evidenced good practice when it issued consultation questionnaires to all tenants to ask their views on the quality of communication between the service and tenants. These had been returned by tenants to be collated and analysed by the service. The service was willing to make improvements in response to feedback from tenants.

The service evidenced commendable practice when senior managers met with tenants in each development in summer 2008 to inform them of future changes to the warden service and sheltered housing provision and to discuss tenants' concerns.

Warden tenant meetings are used to plan social events and other activities for tenants in the communal lounge. These activities and events are valued highly by almost all tenants spoken to during the inspection. The service is encouraging tenants to plan and run these activities and social events, particularly outwith the core hours of the service.

There was good practice evidenced in how the service responded to complaints from tenants. The service had investigated concerns and had reported its findings back to the tenants to ensure that the matter had been resolved to their satisfaction.

Areas for Development

The service had recently started to prepare housing support plans for all tenants. At the time of the inspection the service had not reviewed these plans with tenants but had set up a review twelve months after the plan had been written. The service evidenced acceptable practice in the annual tenant warden meetings in each development. A meeting in one development had raised an issue about the timing of the first call in the morning which the wardens had changed as a result. Other tenant warden meetings did not evidence that tenants and their carers were given an opportunity to comment on the quality of the support provided by the service. A recommendation is made. (Recommendation 1)

The service planned that the Tenant's Participation Officer, who is independent of the service, will run focus groups with tenants who have expressed an interest in the Tenants' Involvement consultation.

For better practice the service should consider providing tenants with information about what had improved as a result of consultations, offering carers separate opportunities for consultation, supporting tenants with additional needs, and communication needs to take part in consultations.

CCO Grading

3 - Adequate

Number of Requirements

0

Number of Recommendations

1

Statement 2: We enable service users to make individual choices and ensure that every service user can be supported to achieve their potential

Service Strengths

The service evidenced adequate practice overall for supporting tenants to make individual choices and realise their potential. The evidence of very good practice of how wardens supported tenants to make choices and realise their potential was balanced by the adequate performance in housing support planning and restraint and risk assessments.

From the Care Commission Officer's interviews with wardens it was evident that they had a very strong ethos of respecting tenants' choices about the goals for their support and assisting tenants to realise their potential to remain in their own homes and to improve the quality of their lives. From the Lay Assessor's and Care Commission Officer's interviews with tenants there was very good testimony that they felt the wardens respected their choices and made a very significant improvement to the quality of their lives.

In response to a requirement made at the last inspection the service had included its restraint policy in its adult protection policy. The policy confirms restraint is a last resort, recognised a range of interventions as restraint and the risks associated with using restraint but also that there can be benefits from properly agreed and reasonable restraint.

In response to a requirement from the last inspection the service had put in place a very good policy and procedure for adult protection. The service had evidenced practice at a good level to identify and act on concerns about the welfare of adults at risk of harm using its adult protection procedures.

Areas for Development

In response to a requirement made at the last inspection the service had recently started to prepare housing support plans for all tenants. The service had existing written record systems to briefly record tenants' known needs and the service provided by the wardens to each tenant. The service had ensured all new tenants had a housing support plan written with their involvement in the first few days of starting their service. The housing support plans were written to an overall adequate standard. There were some good summaries of tenants' background information and their personal usage of the service. However the plans lacked good detail about tenants' abilities, confirmation of their choices about how support should be provided, and agreed goals for supporting tenants to achieve their potential. A requirement and a recommendation in made. (Requirement 1 and Recommendation 2)

In response to a requirement from the last inspection the service had not evidenced that restraint had been considered for all tenants. The restraint procedure did not guide wardens how to write these assessments. A revised requirement is made. (Requirement 2)

In response to a recommendation from the last inspection the service had not assessed risk for all tenants. For improved practice the service should ensure that it writes risk assessments with each tenant detailing how they chose to manage identified risks and what the service said it would do to prevent or reduce the risk of harm for tenants. A revised recommendation is made. (Recommendation 3)

In relation to a requirement from the last inspection to implement an adult protection procedure the service had provided some staff with training on adult protection issues through the Social Work Department and was planning to complete this training for all staff through an in-house programme. No further requirement was made at this inspection. A new recommendation is made. (Recommendation 4)

CCO Grading

3 - Adequate

Number of Requirements

3

Number of Recommendations

3

Quality Theme 2: Quality of Environment

Overall CCO Theme Grading:

Quality Theme 3: Quality of Staffing

Overall CCO Theme Grading: 3 - Adequate

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

Service Strengths

The service had adequate practice of involving tenants and carers in assessing and improving the quality of staffing of the service. The good practice demonstrated by the service in using consultation questionnaires and holding consultation meetings was balanced against its adequate practice in asking all tenants their views about the quality of the service and ideas for improvement in reviews of their housing support plan and warden tenant meetings. The service was willing to make improvements in response to feedback from tenants.

Areas for Development

For improved practice in involving tenants and carers in assessing and improving the quality of staffing the service should ensure tenants have an opportunity to comment on the quality of the staffing in the reviews of some or all of the following opportunities; reviews of the housing support plan, warden tenant meetings, consultation questionnaires. See recommendation 1.

The service planned that the Tenant's Participation Officer, who is independent of the service, will run focus groups with tenants who have expressed an interest in the Tenants' Involvement consultation.

For better practice the service should consider providing tenants with information about what had improved as a result of consultations, offering carers separate opportunities for consultation, supporting tenants with additional needs, and communication needs to take part in consultations.

CCO Grading

3 - Adequate

Number of Requirements

0

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

There was evidence of a good ethos of respect towards service users and between staff in

the service. The evidence of very good practice of how staff supported service users with an ethos of respect, and the very good ethos within the service was counteracted by the adequate quality of the outcomes of supervisions and lack of direct observation of staff performance.

From the Care Commission Officer's interviews with wardens and examination of written records made by them about tenants it was evident that wardens had a very good ethos of respect towards tenants, respecting them as individuals. From the Care Commission Officer's interviews with tenants there was very good testimony that they felt the wardens respected them. Tenants said they felt supported by the manner and attitude of the wardens and that this increased their self-confidence.

The service supported warden's practice and promoted these outcomes through an induction programme for new wardens. The wardens were aware of the National Care Standards and SSSC Codes of Conduct and the service's own policies on conduct, confidentiality and user involvement. The wardens were aware of using social services values in their work with tenants.

The wardens confirmed they were supported to work positively with tenants through ready access to training which met essential training needs and support to obtain essential vocational qualifications. The wardens also confirmed that there was a very good work culture where they were respected and supported by their colleagues and line managers.

The service stated it aimed to keep to a minimum the number of different wardens used to support tenants. Where possible the service used wardens or relief warden the service user already knew in the absence of their usual warden.

Areas for Development

There was a lack of detailed evaluation of how wardens used expected support practices and demonstrated social services values in their work. A staff supervision system would promote, ensure and further evidence the service's ethos of respect for tenants and within the service. A recommendation is made. (Recommendation 5)

There was acceptable practice in the service's management monitoring visits to housing developments. The sheltered housing officer visited developments in response to concerns, resolve problems and support staff. Some senior wardens visited their developments to monitor warden's use of office systems and paperwork, to resolve concerns and to support wardens. However this was not the case for all senior wardens. There were no planned opportunities for senior staff to directly observe wardens working with tenants and to obtain tenants' views about the how they were supported by wardens. Tenants commented that they did not see the visiting management and they did not enquire about their views. A recommendation is made. (Recommendation 6)

For better outcomes the service needs to demonstrate how it has evaluated its performance from feedback from tenants and carers and can evidence the outcomes of its performance.

CCO Grading

4 - Good

Number of Requirements

0

Number of Recommendations

2

Quality Theme 4: Quality of Management and Leadership

Overall CCO Theme Grading: 3 - Adequate

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

The service had adequate practice of involving tenants and carers in assessing and improving the quality of the management and leadership of the service. The good practice demonstrated by the service in using consultation questionnaires and holding consultation meetings in most developments was balanced against its adequate practice in reviews of tenants' housing support plans and warden tenant meetings. The service was willing to make improvements in response to feedback from tenants.

Areas for Development

For improved practice in involving tenants and carers in assessing and improving the quality of staffing the service should ensure tenants have an opportunity to comment on the quality of the staffing in the reviews of some or all of the following opportunities; reviews of the housing support plan, warden tenant meetings, consultation questionnaires. See recommendation 1.

The service planned that the Tenant's Participation Officer, who is independent of the service, will run focus groups with tenants who have expressed an interest in the Tenants' Involvement consultation.

For better practice the service should consider providing tenants with information about what had improved as a result of consultations, offering carers separate opportunities for consultation, supporting tenants with additional needs, and communication needs to take part in consultations.

CCO Grading

3 - Adequate

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 adequate practice of involving tenants, carers, wardens and other stakeholders in its quality assurance processes. There were examples of good practice but

these were balanced against adequate practice in other areas of the service's use of quality assurance processes.

There was good practice in involving tenants in quality assurance processes of consultation questionnaires and consultation meetings and adequate practice of using warden tenant meetings.

There was acceptable practice in the supervision of individual wardens and observation of warden work practices and use of social service values in their work with tenants. There was good practice demonstrated in the new approach to management visits to developments by senior wardens, but this had not been put into place for all developments at the time of the inspection.

There was good practice in the service's use of senior wardens meetings, since late 2008, to put into this new staffing structure. The meetings had been an opportunity for senior wardens and management to ensure consistent and new practice was being put into practice, to resolve problems and identify areas for development.

The service evidenced very good practice in its use of an improvement plan, with relevant and measurable goals, and reports to the senior management of the service its progress to meeting these goals over the past year.

The service had showed good practice in informing tenants of its modernisation strategy. The service had written a letter to all tenants summarising the strategy in point form and senior management had held meetings with tenants in most developments about their concerns about the future of the service, especially about changes to the staffing of each development and future closures of developments. The management had written a report about the key findings from these meetings. The management had also held a good consultation exercise with staff before the implementation of the modernisation strategy and provided them detailed responses about the implications for them and tenants.

There was good practice in the service's involvement in the Dundee Older People Strategy Action Plan, along with the Social Work Social Work Department and National Health Service, which required all services to jointly plan and co-ordinate improvements.

The Inspection Focus Area of Notifications to the Care Commission and Scottish Social Services Council (SSSC) is reported under this quality statement. The manager was aware of the provider's responsibility to report to the Care Commission any instances of staff misconduct, including theft. The service had reported an instance of staff misconduct to the Care Commission as a matter of good practice. The manager was aware of the provider's responsibility to report to the SSSC instances of staff dismissal or occasions when a staff member resigns prior to dismissal and had reported a staff member to the SSSC as a result.

Areas for Development

The service's quality assurance processes had not ensured reviews of personal plans and restraint assessments were carried out and to a good or better standard. A recommendation is made. (Recommendation 7)

As part of the modernisation strategy the service had re-structured the allocation of wardens to each development according to judgements about the relative needs of tenants, the area the development covered and the number of tenants. The changes, and anticipated future

changes, to the warden service remained a concern for a significant proportion of tenants. A recommendation is made. (Recommendation 8)

There was a lack of opportunity for wardens to meet as a team of colleagues. The service planned to introduce wardens' meetings as part of the clusters of developments overseen by the senior warden and to use the same format as the senior wardens' meetings.

The service had acceptable practice in using measurable performance indicators about the use of its work processes to monitor and report upon its basic and essential work processes to its senior management. For improved practice the service should consider developing its performance indicators to cover new processes, such as housing support plans, and quality outcome measures which have been agreed with tenants. The service should also consider how tenants and carers can be involved in setting goals for the service improvement plan and writing these goals.

CCO Grading

3 - Adequate

Number of Requirements

0

Number of Recommendations

5

Regulations / Principles

National Care Standards

Enforcement

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

Other Information

There was no other information to report at this inspection.

Requirements

Requirement 1

The provider must ensure that all tenants of the service have a housing support plan written in consultation with them, and if appropriate their carers, or other representatives. This is in order to comply with The Regulation of Care (Requirements as to Care Services) (Scotland) (SSI 2002/114) Regulation 5(1) - a requirement that providers shall prepare a written plan. Timescale for implementation: 31 December 2009.

Requirement 2

The provider must ensure that it individually considers restraint and limits to freedom for all tenants.

This is in order to comply with SSI 2002/114 regulation 4(1)(a)(c) and regulation 13 - a requirement that a provider shall make proper provision for the health and welfare of tenants and ensure that no service user is subject to restraint unless it is the only practicable means of securing the welfare of that or any other service user and there are exceptional circumstances and ensure that persons employed in the provision of the care service receive training appropriate to the work they are to perform. Timescale for implementation: 31 March 2010.

Requirement 3

The service must at all times ensure the welfare of service users by having an effective and acceptable alarm service. This is in order to comply with SSI 2002/114 Regulation 4 - a regulation aimed at ensuring the health and welfare of service users. Timescale for implementation: 31 December 2009.

Recommendations

Recommendation 1

The service should ensure that it regularly asks tenants', and where appropriate their carers', views on the quality of the support they receive and ideas for improvement as part of the review of their housing support plan and in other forms of consultation. National Care Standards, Housing Support Services, Standard 4, Housing support planning and Standard 8, Expressing your views.

Recommendation 2

The service should ensure that tenants' housing support plans include their abilities, their preferences about how support will be carried out and agreed goals for supporting tenants to achieve their potential. Standard 4, Housing support planning.

Recommendation 3

The service should ensure that tenants' risk assessment include how tenants chose to manage identified risks and what the service said it would do to prevent or reduce the risk of harm for tenants. Standard 3, Management and staffing arrangements.

Recommendation 4

¹ Please note the Timescale for Implementation of Requirement 1 should be 31 March 2010. The Care Commission have been notified of this error and have agreed to issue an amended report.

The service is recommended to provide staff with training on adult protection. Standard 3, Management and staffing arrangements.

Recommendation 5

The service is recommended to put in place a system of staff supervision for support and to promote, ensure and evidence that wardens are using expected support practices and social services values in their work with tenants. Standard 3 Management and staffing arrangements.

Recommendation 6

The service is recommended to put in place a system of direct observation of wardens' practice of using expected support practices and social services values in their work with tenants. Standard 3 Management and staffing arrangements.

Recommendation 7

The service is recommended to ensure its quality assurance processes results in reviews of personal plans, risk and restraint assessments are carried out and to an improved standard. Standard 4, Management and staffing arrangements.

Recommendation 8

The service is recommended to consult with tenants and staff on the continuing effectiveness of the current warden arrangements and implementation of the modernisation strategy. Standard 3, Management and staffing arrangements.

Recommendation 9

The service is recommended to ensure that prospective tenants of the warden service receive written information about the service and can discuss this with a member of staff. Standard 1, Informing and deciding.

Recommendation 10

The service is recommended to ensure all staff have child protection training appropriate to their role and the service's policy. Standard 3, Management and The staffing.

Recommendations 11

The service should ensure that all meetings are accurately recorded such that all parties are clear about what has been discussed and that the outcomes of these discussions and any necessary actions are understood. Standard 3, Management and staffing.

Patrick Sweeney
Care Commission Officer

ACTION PLAN - CARE COMMISSION INSPECTION 2009 - SHELTERED HOUSING WARDEN SERVICE

<i>Requirements and Recommendations</i>	<i>Action Planned</i>	<i>Timescale</i>	<i>Responsible person</i>
Requirements			
<p>Requirement 1</p> <p>The provider must ensure that all tenants of the service have a housing support plan written in consultation with them and if appropriate their carers or other representatives. This is in order to comply with The Regulation of Care (Requirements as to Care Services) (Scotland) (SSI 2002/114) Regulation 5(1) - a requirement that providers shall prepare a written plan. Timescale for implementation: 31 March 2009</p>	Continued roll-out of Housing Support Plans. Monthly PI in place to monitor progress	by 31/3/2010	Gary McKenzie
<p>Requirement 2</p> <p>The provider must ensure that it individually considers restraint and limits to freedom for all tenants. This is in order to comply with SSI 2002/114 regulation 4(1)(a)(c) and regulation 13 - a requirement that a provider shall make proper provision for the health and welfare of that or any other service user and there are exceptional circumstances and ensure that persons employed in the provision of the care service receive training appropriate to the work they are to perform. Timescale for implementation: 31 March 2010</p>	Following guidance from Care Commission Officer in August, carry out restraint assessments as part of routine tenant visits	by 31/3/2010	Gary McKenzie
<p>Requirement 3</p> <p>The service must at all times ensure the welfare of service users by having an effective and acceptable alarm service. This is in order to comply with SSI 2002/114 Regulation 4 - a regulation aimed at ensuring the health and welfare of service users. Timescale for implementation: 31 December 2009.</p>	<p>Ensure alarm system is configured, as far as is possible, to tenants' individual requirements</p> <p>Review alarm implementation with tenants following reconfiguration</p>	<p>by 30/9/2009</p> <p>by 31/10/2009</p>	Jim Fenton/Gary McKenzie

Recommendations			
<p>Recommendation 1 The service should ensure that it regularly asks tenants and where appropriate their carers' views on the quality of support they receive and ideas for improvement as part of the review of their housing support plan and in other forms of consultation.</p> <p>National Care Standards, Housing Support Services, Standard 4, Housing support planning and Standard 8, Expressing your views.</p>	<p>Involvement Strategy will consider the range of methods to be used to obtain views on quality of support received and ideas for improvements, including at Housing Support Plan review and tenant/warden meetings</p>	<p>by 30/9/2009</p>	<p>Gary McKenzie</p>
<p>Recommendation 2 The service should ensure that tenants' housing support plans include their abilities, their preferences about how support will be carried out and agreed goals for supporting tenants to achieve their potential</p> <p>Standard 4, Housing Support Planning</p>	<p>Improvements will be made to Housing Support Plans to ensure these aspects are covered</p>	<p>by 31/3/2010</p>	<p>Gary McKenzie</p>
<p>Recommendation 3 The service should ensure that tenants' risk assessment include how tenants chose to manage identified risks and what they service said it would do to prevent or reduce the risk of harm for tenants</p> <p>Standard 3, Management and staffing arrangements.</p>	<p>Risk assessment developed and implemented</p>	<p>by 31/3/2010</p>	<p>Gary McKenzie</p>
<p>Recommendation 4 The service is recommended to provide staff with training on adult protection</p> <p>Standard 3, Management and staffing arrangements</p>	<p>The service will ensure that those staff not yet trained fully in adult protection will receive in house training on this area</p>	<p>by 31/12/2009</p>	<p>Gary McKenzie/Alison Grimmond</p>
<p>Recommendation 5 The service is recommended to put in place a system of staff supervision for support and to promote, ensure and evidence that wardens are using expected support practices and social services values in their work with tenants.</p>	<p>Support and Supervision available to all staff in the service</p>	<p>by 31/3/2010</p>	<p>Gary McKenzie/Ron Whyte</p>

Standard 3, Management and staffing arrangements			
<p>Recommendation 6</p> <p>The service is recommended to put in place a system of direct observation of wardens' practice of using expected support practices and social services values in their work with tenants.</p> <p>Standard 3, Management and staffing arrangements</p>	Observation included in Support and Supervision system for warden staff (see above)	by 31/3/2010	Gary McKenzie/Ron Whyte
<p>Recommendation 7</p> <p>The service is recommended to ensure its quality assurance processes result in reviews of personal plans, risk and restraint assessments are carried out and to an improved standard.</p> <p>Standard 4, Management and staffing arrangements</p>	Quality assurance rolled out to all groups	by 31/3/2010	Ron Whyte
<p>Recommendation 8</p> <p>The service is recommended to consult with tenants and staff on the continuing effectiveness of the current warden arrangements and implementation of the modernisation strategy.</p> <p>Standard 3, Management and staffing arrangements</p>	<p>Review meetings to take place between July and October 2009</p> <p>Report on review to Scrutiny Committee, then Housing Committee</p>	<p>by 31/10/2009</p> <p>by 30/11/2009</p>	<p>Jim Fenton/Gary McKenzie</p> <p>Jim Fenton</p>
<p>Recommendation 9</p> <p>The service is recommended to ensure that prospective tenants of the warden service receive written information about the service and can discuss this with a member of staff.</p> <p>Standard 1, Informing and deciding.</p>	Ensure service information is available to prospective tenants at viewings by implementing performance indicator to monitor	by 30/9/09	Gary McKenzie/Veronica Gray
<p>Recommendation 10</p> <p>The service is recommended to ensure all staff have child protection training appropriate to their role and the service's policy</p> <p>Standard 3, Management and staffing arrangements.</p>	Child Protection awareness training to be delivered to warden staff as a Departmental priority	by 30/9/09	Gary McKenzie/Robert Moodie

<p>Recommendation 11 The service should ensure that all meetings are accurately recorded such that all parties are clear about what has been discussed and that the outcomes of these discussions and any necessary actions are understood. Standard 3, Management and staffing arrangements.</p>	<p>All meetings will be minuted and fed back to those who have attended.</p>	<p>Ongoing</p>	<p>Gary McKenzie</p>
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