



**REPORT TO: PERFORMANCE & AUDIT COMMITTEE – 13 FEBRUARY 2018**  
**REPORT ON: OUTCOME OF CARE INSPECTORATE INSPECTION – SUPPORTED LIVING TEAM**  
**REPORT BY: CHIEF FINANCE OFFICER**  
**REPORT NO: PAC2-2018**

**1.0 PURPOSE OF REPORT**

The purpose of this report is to advise the Performance & Audit Committee of the outcome of the recent Care Inspectorate inspection of the Supported Living Team which was undertaken in December 2017.

**2.0 RECOMMENDATIONS**

It is recommended that the Performance & Audit Committee (PAC):

- 2.1 Notes the content of the Inspection Report dated 12 December 2017 (Appendix 1).
- 2.2 Notes the grades awarded to the services, the strengths of the services, and the very positive comments made by service users and carers.

**3.0 FINANCIAL IMPLICATIONS**

None.

**4.0 MAIN TEXT**

- 4.1 The Supported Living Team is a Care at Home/Housing Support service that supports adults with a Learning Disability and/or autism to live in their own tenancies and be part of their local community. The service consists of four staff teams in four community settings and supports 19 individuals. The service aims to meet the needs and outcomes for each person it supports whilst working in partnership with families, carers and other professionals.
- 4.2 The service was inspected over two days in December 2017. This was an unannounced inspection. Two of the four Quality Themes were inspected, which were:
  - Quality of Care and Support
  - Quality of Staffing.
- 4.3 The Care Inspectorate identified a number of strengths within each Quality Theme and graded them as “Excellent”, which is the top grade available:

Theme	Grade
Quality of care and support	6 (excellent)
Quality of staffing	6 (excellent)

- 4.4 This is the 3<sup>rd</sup> year that the service has been awarded these grades.
- 4.5 The report acknowledged that the service had an excellent level of care and support for its service users. The Inspector was impressed with the consistently good feedback, the real

promotion of person centred support and the culture of professionalism and compassion promoted by the staff.

- 4.6 The report noted that support plans used by the service were outcome focused and person centred. There was a high level of detail in relation to specific support, risk assessments and monitoring outcomes via reviews. One service user had a rare medical condition and staff knew all about it and plans were in place for his care in relation to this.
- 4.7 There was evidence of the service working with external health and social work professionals such as community nurses, care managers and psychologists.
- 4.8 Though the people supported all had complex needs they were supported to live as full a life as possible. The inspector saw evidence of trips out, holidays, keep fit classes, attendance at football matches, shopping trips, pub visits, family visits and social events within the service. The inspector was impressed with how staff would encourage people to try new activities.
- 4.9 The service was very well resourced with most service users getting a lot of one to one support. Where there were staff shortages the service had systems in place to fill the gaps effectively.
- 4.10 The report noted that staff practice showed to be confident and compassionate in their relationships with people. Staff spoken with had excellent care values and knew how to promote good practice and challenge poor practice.
- 4.11 Staff were well supported via regular supervision, appraisal, team meetings, training and encouragement to use their particular skills. Staff understood the ethos of the service and felt they were part of a supportive, effective and professional team.
- 4.12 The report noted that the team had identified some of the strengths and areas that they wanted to develop using their annual improvement plan.
- 4.13 The report noted that the inspector observed a review meeting at which the care manager was present. He expressed his satisfaction at the outcomes expressed in the meeting for the service user he represented.
- 4.14 The report concluded that every component of the service from staff support to service user enablement was characterised by a flexible, well-informed, innovative, professional and person centred approach to care. This culture was evident throughout as was its commitment to continual improvement. Even where agency or bank staff were having to be used the pervading culture ensured they fitted in with the way this service liked things to be done.

## **5.0 POLICY IMPLICATIONS**

This report has been screened for any policy implications in respect of Equality Impact Assessment. There are no major issues.

## **6.0 RISK ASSESSMENT**

This report has not been subject to a risk assessment as it relates to the publication of Care Inspectorate information and therefore does not require a policy decision.

## **7.0 CONSULTATIONS**

The Chief Officer and the Clerk were consulted in the preparation of this report.

## **8.0 BACKGROUND PAPERS**

None.

# Appendix 1



## Dundee City Council - Supported Living Team Housing Support Service

Claverhouse Social Work Department  
Jack Martin Way  
Dundee  
DD4 9FF

Telephone: 01382 307527

Type of inspection: Unannounced  
Inspection completed on: 12 December 2017

**Service provided by:**  
Dundee City Council

**Service provider number:**  
SP2003004034

**Care service number:**  
CS2005108069



## About the service

The service is provided by Dundee City Council to people with learning disabilities requiring care and housing support services in their own home. The service aims to meet the needs and development potential of its service users. The service is provided by four staff teams to support people in four community bases.

## What people told us

Six service users, one visiting relative and one care manager were spoken with during this inspection. They all spoke and/or communicated very positively about the service. Here are some of the comments they made:-

Service users:

- The staff are nice - they help me in my home.
- I like to go for bus trips.
- I am in a walking group and staff take me out for lunch.
- I have two keyworkers.
- I like living here.
- The staff are great.
- This is a really good service.
- I feel safe here.
- Yes they help me to cook my own food.
- We go shopping for my food.
- Yes I went on holiday this year.

Visiting relative:

- Without this place we'd be lost.
- Always made to feel welcome when we visit.
- It's just like family we can share our feelings with them.
- Any issues are sorted out immediately.

Care Manager:

- The inspector observed a review meeting at which the care manager was present. He expressed his satisfaction at the outcomes expressed in the meeting for the service user he represented.

## Self assessment

A self assessment was not required to be completed at this inspection; however the service spoke about their goals and aspirations for the forthcoming year. The team had identified some of the strengths and areas that they wanted to develop using their annual improvement plan.

## From this inspection we graded this service as:

Quality of care and support	6 - Excellent
Quality of staffing	6 - Excellent
Quality of management and leadership	not assessed

## What the service does well

The service had an excellent level of care and support for its customers and its quality of staffing was also excellent. We were impressed with the consistently good feedback, the real promotion of person centred support and culture of professionalism and compassion promoted by staff. Here are some examples of the strengths:-

- Support plans used by the service were outcome focussed and person centred. There was a high level of detail in relation to specific support, risk assessments and monitoring outcomes via reviews. One service user had a rare medical condition and staff knew all about it and plans were in place for his care in relation to this.
- There was evidence of the service working with external health and social work professionals such as community nurses, care managers and psychologists. A review meeting was observed with care manager present on one of the inspection days.
- Though the people supported all had complex needs they were supported to live as full a life as possible. The inspector saw evidence of trips out, holidays, keep fit classes, attendance at football matches, shopping trips, pub visits, family visits and social events within the services. The inspector was impressed with how staff would encourage people to try new activities.
- The service was very well resourced with most service users getting a lot of one-one attention. Where there were staff shortages the service had systems in place to fill the gaps effectively.
- Observation of staff practice showed them to be confident and compassionate in their relationships with people. Staff spoken with had excellent care values and knew how to promote good practice and challenge poor practice.
- Staff were well supported via regular supervision, appraisal, team meetings, training and encouragement to use their particular skills. Staff spoken with understood the ethos of the service and felt they were part of a supportive, effective and professional team.

Every component of this service, from staff support to service user enablement was characterised by a flexible, well-informed, innovative, professional and person centred approach to care. This culture was evident throughout as was its commitment to continual improvement. Even where agency or bank staff were having to be used the pervading culture ensured they fitted in with the way this service liked things to be done. This is why a grade of excellent has been given here.

## What the service could do better

Some discussion was held with the manager of the service around use of improvement projects whereby a service could identify areas for improvement and set up a project to address them. We signposted her to some work being done in the Care Inspectorate around physical activity which used this approach <http://hub.careinspectorate.com/improvement/care-about-physical-activity/>

The inspector noted that though support plans were outcome focussed they did not use explicit outcomes wording (which their review minutes did). This was something to look at by way of fine tuning the administration of care plans.

## Requirements

Number of requirements: 0

## Recommendations

Number of recommendations: 0

## Complaints

There have been no complaints upheld since the last inspection. Details of any older upheld complaints are published at [www.careinspectorate.com](http://www.careinspectorate.com).

**Inspection and grading history**

Date	Type	Gradings	
22 Dec 2016	Announced (short notice)	Care and support	6 - Excellent
		Environment	Not assessed
		Staffing	6 - Excellent
		Management and leadership	Not assessed
29 Jan 2016	Unannounced	Care and support	6 - Excellent
		Environment	Not assessed
		Staffing	6 - Excellent
		Management and leadership	6 - Excellent
9 Jan 2015	Unannounced	Care and support	5 - Very good
		Environment	Not assessed
		Staffing	5 - Very good
		Management and leadership	5 - Very good
17 Jan 2014	Announced (short notice)	Care and support	5 - Very good
		Environment	Not assessed
		Staffing	5 - Very good
		Management and leadership	5 - Very good
28 Feb 2013	Announced (short notice)	Care and support	5 - Very good
		Environment	Not assessed
		Staffing	5 - Very good
		Management and leadership	4 - Good
25 Aug 2010	Announced	Care and support	4 - Good
		Environment	Not assessed
		Staffing	4 - Good
		Management and leadership	Not assessed
8 May 2009	Announced	Care and support	4 - Good
		Environment	Not assessed
		Staffing	4 - Good
		Management and leadership	4 - Good

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