

# Inspection report

## Aspire Lothian and Borders Housing and Support Service Housing Support Service

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**Inspected by:** Donald Preston  
**(Care Commission officer)**

**Type of inspection:** Announced

**Inspection completed on:** 12 January 2010

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**Service provided by:**

Aspire Housing & Personal Development Services Ltd

**Service provider number:**

SP2004004485

**Care service number:**

CS2004056483

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## Easy read summary of this inspection report

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We grade all the Quality Statements for a service at each inspection. Each grade describes how well we think the service is doing based on what we inspected.

We can choose from six grades:

 **6**       **5**       **4**       **3**       **2**       **1**  
excellent      very good      good      adequate      weak      unsatisfactory

### 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

This inspection report and grades are our assessment of the quality of how the service is performing in the areas we examined during this inspection.

Grades for this care service may change after this inspection due to other regulatory activity; for example, if we have to take enforcement action to improve the service, or if we investigate and agree with a complaint someone makes about the service.

### What the service does well

The service is provided to a large number of people who have a variety of support needs. This is carried out in different settings which include supported accommodation and in their own tenancies.

## **What the service could do better**

Training is to be provided for the service to be more person centred in some circumstances and to involve service users in providing inputs to staff.

Involvement of service users in the recruitment of staff is to be a meaningful experience for all involved in this. Training is to be given to all service users taking part.

## **What the service has done since the last inspection**

The service has continued to expand, has reviewed many policies and procedures, continued to review and action plan with its services , and increased service user involvement.

## **Conclusion**

The service continues to provide a high standard of support to many people who have a variety of needs.

## **Who did this inspection**

### **Lead Care Commission Officer**

Donald Preston

### **Other Care Commission Officers**

### **Lay Assessor**

**Please read all of this report so that you can understand the full findings of this inspection.**

## About the Care Commission

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We were set up in April 2002 to regulate and improve care services in Scotland.

Regulation involves:

- registering new services
- inspecting services
- investigating complaints
- taking enforcement action, when necessary, to improve care services.

We regulate around 15,000 services each year. Many are childminders, children's daycare services such as nurseries, and care home services. We regulate many other kinds of services, ranging from nurse agencies to independent healthcare such as hospices and private hospitals.

We regulate services for the very young right through to those for the very old. Our work can, therefore, affect the lives of most people in Scotland.

All our work is about improving the quality of care services.

We produce thousands of inspection reports every year; all are published on our website: [www.carecommission.com](http://www.carecommission.com). Reports include any complaints we investigate and improvements that we ask services to make.

The "Care services" area of our website also:

- allows you to search for information, such as reports, about the services we regulate
- has information for the people and organisations who provide care services
- has guidance on looking for and using care services in Scotland.

You can also get in touch with us if you would like more detailed information.

## About the National Care Standards

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The National Care Standards (NCS) set out the standards that people who use care services in Scotland should expect. The aim is to make sure that you receive the same high quality of service no matter where you live.

Different types of service have different National Care Standards. When we inspect a care service we take into account the National Care Standards that the service should provide.

The Scottish Government publishes copies of the National Care Standards online at: [www.scotland.gov.uk](http://www.scotland.gov.uk)

You can get printed copies free from:

Blackwells Bookshop  
53-62 South Bridge Edinburgh  
EH1 1YS  
Telephone: 0131 662 8283  
Email: [Edinburgh@blackwells.co.uk](mailto:Edinburgh@blackwells.co.uk)

## What is inspection?

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Our inspectors, known as Care Commission Officers (CCOs), check care services regularly to make sure that they are meeting the needs of the people in their care.

One of the ways we check on services is to carry out inspections. We may turn up without telling the service's staff in advance. This is so we can see how good the care is on a normal day. We inspect some types of services more often than others.

When we inspect a service, typically we:

- talk to people who use the service, their carers and families, staff and managers
- talk to individuals and groups
- have a good look around and check what quality of care is being provided
- look at the activities happening on the day
- examine things like records and files, if we need to
- find out if people get choices, such as food, choosing a key worker and controlling their own spending money.

We also use lay assessors during some inspections. These are volunteers who have used care services or have helped to care for someone who has used care services.

We write out an inspection report after gathering the information. The report describes how things are and whether anything needs to change.

Our work must reflect the following laws and guidelines:

- the Regulation of Care (Scotland) Act 2001
- regulations made under this Act
- the National Care Standards, which set out standards of care that people should be able to expect to receive from a care service.

This means that when we register or inspect a service we make sure it meets the requirements of the 2001 Act. We also take into account the National Care Standards that apply to it.

If we find a service is not meeting these standards, the 2001 Act gives us powers that require the service to improve.

## **Recommendations, requirements and complaints**

If we are concerned about some aspect of a service, or think it could do more to improve its service, we may make a requirement or recommendation.

- A recommendation is a statement that sets out actions the care service provider should take to improve or develop the quality of the service but where failure to do so will not directly result in enforcement.
- A requirement is a statement which sets out what is required of a care service to comply with the Act and Regulations or Orders made under the Act, or a condition of registration. Where there are breaches of the Regulations, Orders or conditions, a requirement must be made. Requirements are legally enforceable at the discretion of the Care Commission.

Complaints: We have a complaints procedure for dealing with any complaint about a registered care service (or about us). Anyone can raise a concern with us - people using the service, their family and friends, carers and staff.

We investigate all complaints. Depending on how complex it is, a complaint may be:

- upheld - where we agree there is a problem to be resolved
- not upheld - where we don't find a problem
- partially upheld - where we agree with some elements of the complaint but not all of them.

# How we decided what to inspect

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## **Why we have different levels of inspection**

We target our inspections. This means we spend less time with services we are satisfied are working hard to provide consistently high standards of care. We call these low-intensity inspections. Services where there is more concern receive more intense inspections. We call these medium or high intensity inspections.

## **How we decide the level of inspection**

When planning an inspection, our inspectors, or Care Commission Officers (CCOs) carefully assess how intensively each service needs to be inspected. They do this by considering issues such as:

- complaints
- changes to how the service provides care
- any notifications the service has given us, such as the absence of a manager
- what action the service has taken in response to requirements we have made.

The CCO will also consider how the service responded to situations and issues: for example how it deals with complaints, or notifies us about incidents such as the death of someone using the service.

Our inspections take account of:

- areas of care that we are particularly interested in (these are called Inspection Focus Areas)
- the National Care Standards that the service should be providing
- recommendations and requirements that we made in earlier inspections
- any complaints and other regulatory activity, such as enforcement actions we have taken to improve the service.

# What is grading?

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We grade each service under Quality Themes which for most services are:

- **Quality of Care and support:** how the service meets the needs of each individual in its care
- **Quality of environment:** the environment within the service (for example, is the service clean, is it set out well, is it easy to access by people who use wheelchairs?);
- **Quality of staffing:** the quality of the care staff, including their qualifications and training
- **Quality of management and leadership:** how the service is managed and how it develops to meet the needs of the people it cares for
- **Quality of information:** this is how the service looks after information and manages record keeping safely.

Each of the Quality Themes has a number of Quality Statements in it, which we grade.

We grade each heading as follows:

<b>6</b>	<b>5</b>	<b>4</b>	<b>3</b>	<b>2</b>	<b>1</b>
excellent	very good	good	adequate	weak	unsatisfactory

We do not give one overall grade.

## How grading works.

Services assess themselves using guidance that we given them. Our inspectors take this into account when they inspect and grade the service. We have the final say on grading.

The Quality Themes for this service type are explained in section 2 The Inspection.

## About the service we inspected

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Aspire Housing and Personal Development Services Limited was set up in 2002 as a provider of community based housing support / care at home services.

The organisation aims to ' work with people - both individually and collectively to create solutions for each unique situation; to assist individuals of all ages, families, groups and communities to pursue and achieve their aspiration's

The support that Aspire provides in Midlothian is as follows :

Four temporary supported accommodation based services for people who have been homeless who may require assistance to increase their skills and confidence with a view to them moving on to more independent living situations.

An outreach service which provides community based support to individuals living in their own homes with the aim to enable them to sustain their own tenancies or living situations.

A Tenancy Support Service which was established in December 2007. This is in conjunction with Midlothian Housing Department with the aim to provide support to individuals who are at risk of losing their tenancy.

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

<b>Quality of Care and Support</b>	<b>5 - Very Good</b>
<b>Quality of Staffing</b>	<b>5 - Very Good</b>
<b>Quality of Management and Leadership</b>	<b>5 - Very Good</b>

This inspection report and grades are our assessment of the quality of how the service is performing in the areas we examined during this inspection.

Grades for this care service may change after this inspection due to other regulatory activity; for example, if we have to take enforcement action to improve the service, or if we investigate and agree with a complaint someone makes about the service.

You can use the "Care services" area of our website ([www.carecommission.com](http://www.carecommission.com)) to find the most up-to-date grades for this service.

## How we inspected this service

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### **What level of inspection did we make this service**

In this service we carried out a low intensity inspection. We carry out these inspections when we are satisfied that services are working hard to provide consistently high standards of care.

### **What activities did we undertake during the inspection**

During the inspection the Care Commission Officer met with the manager, team leaders, and a group of staff from different parts of the service and gained their views on the support being provided.

Questionnaires were returned from service users and comments received from relatives along with meeting two individuals in one of the supported accommodation houses.

The documentation that was observed during the inspection included eight Support and Development Agreements which were from across the different types of services ; incidents and accident reports, minutes of service user meetings and staff meetings. Also service reviews and action plans and information about quality assurance was looked at.

### **Inspection Focus Areas (IFAs)**

Each year we identify an area, or areas, we want to focus on during our inspections. We still inspect all the normal areas of a care service; these are extra checks we make for a specific reason.

For 2009/10 we will focus on:

- Meaningful activity for all adult services
- How care services assess the health of people with learning disabilities
- Involving parents for children's services
- Medication for looked after children for residential accommodation for children
- How care services make sure they have safe recruitment procedures for staff for all services except childminders.

You can find out more about these from our website [www.carecommission.com](http://www.carecommission.com).

### **Fire safety issues**

The Care Commission no longer reports on matters of fire safety as part of its regulatory function. Where significant fire safety issues become apparent, we will alert the relevant Fire and Rescue service to their existence in order that it may act as it considers appropriate. Care service providers can find more information about their legal responsibilities in this area at: [www.infoscotland.com/firelaw](http://www.infoscotland.com/firelaw)

## **The annual return**

We use annual returns (ARs) to:

- make sure we have up-to-date, accurate information about care services; and
- decide how we will inspect services.

By law every registered care service must send us an annual return and provide us with the information we have requested. The relevant law is the Regulation of Care Act (Scotland) 2001, Section 25(1). These forms must be returned to us between 6 January and 28 February 2009.

## **Annual Return Received**

No

## **Comments on Self Assessment**

The service submitted a self-assessment form as requested by the Care Commission. It highlighted many strengths and some areas for improvement.

## **Taking the views of people using the care service into account**

There were 21 questionnaires returned from people receiving support from Aspire. The vast majority are extremely satisfied with the support being provided.

Some people did not know about personal plans but this may have been the fact they are called support plans or Support and Development Agreements.

Also several were unaware that if the need arose they could make a complaint to the Care Commission or that the service had a complaints procedure.

Some of the comments made were as follows :

' I have had support from other organisations which have not been good but overall I am happy with the support I get from Aspire'

' I have had great support from my worker it has really helped me'

Two service users were met in one of the supported accommodation houses, they stated that

' the staff are a good help and they have got me involved in things which I wouldn't have done without their encouragement' and ' my circumstances changed recently and I hadn't heard of Aspire but the support I have been given I can not fault - a place to stay and support if I need it - just what I needed at the time'

One person did say that

' when you have a support worker over a period of time you form a good relationship and they do a good job in supporting you .... but when workers change a lot and do not come with good knowledge of your situation this can be frustrating and not helpful.'

**Taking carers' views into account**

All carers spoken to were very complimentary about the support that their relatives had received from Aspire.

## 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

The service has formalised a Participation Strategy / Policy which includes individual support reviews, involvement in yearly service plans and invitations to participate in three yearly Corporate Plan.

They recruited a former service user to review how well Aspire involves and actively includes people receiving support in the running of the service.

The service as part of the quality review and planning process sent questionnaires out to all people who are supported by Aspire. The information from this was observed at the time of the inspection.

The service involves users in yearly service reviews and forward planning. Also individuals have opportunities to become involved in corporate planning days.

The service held reviews involving users throughout its services in 2009 with action plans going to senior management in the organisation.

There are resident meetings in the services where shared living occurs and minutes of these meetings were observed with issues being raised and outcomes being achieved for individuals in these situations.

The service has shown that it can respond flexibly to individual need, adjusting times or the nature of support as required.

The service has a comprehensive Suggestion and Complaints Policy and a leaflet which is included as part of the information pack given to new service users.

#### Areas for Improvement

The service is characterised by major strengths in this area with a lot of consultation occurring with service users. The service requires to evidence that it is maintaining this quality of service on an ongoing basis to further improve on it's grades.

#### Grade awarded for this statement

5 - Very Good

**Number of Requirements**

0

**Number of Recommendations**

0

## **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 provider has a clear approach to support planning, delivery and review. They have posts of Support Co-ordinators who are responsible for Support and Development Agreements / Plans which are agreed with service users and any significant others involved in their support.

The service has policies on Core Values, Rights, and Risk Taking which are covered in staff training inputs.

The service has Weekly Action Plans and Weekly Support Summaries which the Support Co-ordinator and Developer have responsibility for keeping up-to-date.

Included in the information pack are safeguards / commitments from Aspire which covers the following four areas: confidentiality, suggestions and complaints, managing risks and accidents, and cover for staff sickness and absences.

Each individual has a Support and Development Agreement which has been reviewed to ensure individual approaches are in place depending on what peoples needs are at a specific time.

### **Areas for Improvement**

The service has met all aspects of this quality theme and is operating at a high standard in supporting people to realise their potential through enabling them to make informed choices in their lives.

### **Grade awarded for this statement**

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

Participation and Involvement Strategy refers to being involved in the recruitment of staff.

Individual service users reviews ask about staff as do the service reviews.

Recruitment and selection procedures refer to service user involvement and this occurs in some situations.

The service is looking to formalise and monitor peoples involvement in this area of the service. There has been some involvement in recruitment by service users.

Some individuals receiving support are involved in appraisals of staff members.

#### Areas for Improvement

The service should look to evaluate the involvement of service users in the recruitment of staff.

The service aims to provide training for people they support to take a meaningful role in the recruitment process.

The service recognises the need to develop involvement of people in the appraisal process

#### Grade awarded for this statement

5 - Very Good

#### Number of Requirements

0

#### Number of Recommendations

0

## **Statement 2**

We are confident that our staff have been recruited, and inducted, in a safe and robust manner to protect service users and staff.

### **Service Strengths**

As well as a clearly set out recruitment policy, the provider has separate guidance notes outlining the responsibilities of managers in the recruitment process. Arrangements were in place for separate application forms for front-line workers and for managers. Two references were secured for each new employee, with one being the candidate's most recent employer.

Evidence was seen of systems for on-going appraisal of staff as well as learning and development opportunities. Staff were given written tasks to assess their understanding of materials seen.

Arrangements for recording outcomes of Disclosure Scotland checks was in place in a computerized system & Disclosure Scotland guidance regarding the storage of disclosure data was observed. Specific policies on the recruitment of ex-offenders and retention of disclosure information was seen.

An audit exercise sampling the implementation of procedures found that these were implemented effectively on a consistent basis.

Staff induction is available to all staff and is related to the post and this is through a learning and development portfolio.

The service has Individual Learning and Development Policy which has been developed to meet best practice in relation to the National Care Standards, SVQ's and the delivering of support to individuals.

### **Areas for Improvement**

The provider should follow up on plans to further expand questions relating to medical fitness on the job application form.

Consideration could be given to further development of recruitment materials reflecting the aims and objectives of the provider.

### **Grade awarded for this statement**

5 - Very Good

### **Number of Requirements**

0

## **Number of Recommendations**

0

## **Safer Recruitment - Inspection Focus Area (IFA) outcome**

The requirements and/or recommendations below reflect our view of the providers performance in meeting its legal responsibilities when recruiting staff and its compliance with best practice. This is as a result of an audit of the providers recruitment files.

## **Recommendation**

0.

SSSC Code of Practice - Employer

Make sure people are suitable to enter the workplace

1.1 Using rigorous & thorough recruitment & selection processes etc

Safer Recruitment through Better Recruitment-Scottish Executive (2007)

## 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

Evidence of strengths in this area have been documented previously in this report in quality statements 1.1 and 3.1 which include the quality survey / questionnaires , recruitment involvement, service reviews, and support reviews.

In all these areas there are opportunities for people who receive support to comment on the management and leadership of the service in the feedback that they give.

Quality Assurance audits are carried out covering Support and Development Agreements - Support Plans / Service Reviews and Management Audit.

The service has two Quality Assurance staff members who will do 'at arms length' audits of the service.

All services have been reviewed with input from people being supported , reports and action plans have been completed.

#### Areas for Improvement

This area of the service is characterised by major strengths.

#### Grade awarded for this statement

5 - Very Good

#### Number of Requirements

0

#### Number of Recommendations

0

## **Statement 2**

We involve our workforce in determining the direction and future objectives of the service.

### **Service Strengths**

Staff training records were available at the time of the inspection.

All staff spoken to were involved in regular team meetings and were clear on the aims and objectives of the service.

Team meeting discussions can lead to input to the staff newsletters, suggestions for improvements and discuss issues concerning the corporate plan.

The service provider also has a staff council which meets every three months. The staff council ensures that employees are involved in a partnership approach which reviews both the current operation and future strategic direction of the organisation. In current year staff consultation around certain changes in terms and conditions.

The organisation also has a health and safety group consisting of managers and staff which meets every three months.

Staff members spoken to all said that management were very supportive and approachable.

The service has structures in place for all staff to have supervision/appraisals in line with the organisational policies.

Service reviews and action plans involve all staff in being able to give their views on all aspects of the service being provided.

All managers and co-ordinator's have achieved an SVQ3 equivalent or above.

The service has recently introduced a one day course on how staff members are an integral part of the establishment and maintenance of quality care standards.

Staff members have been involved in consultation over the Care Commission Self Assessment Form

### **Areas for Improvement**

The evidence for this quality statement show a range of methods which involve staff members and a high level of performance which should be sustainable which will result in an improvement to the current grade.

**Grade awarded for this statement**

5 - Very Good

**Number of Requirements**

0

**Number of Recommendations**

0

## Other Information

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### **Complaints**

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

### **Enforcements**

We have taken no enforcement action against this care service since the last inspection.

### **Additional Information**

#### **Action Plan**

Failure to submit an appropriate action plan within the required timescale, including any agreed extension, where requirements and recommendations have been made, will result in the Care Commission re-grading the Quality Statement within the Management and Leadership Theme as unsatisfactory (1). This will result in the Quality Theme for Management and Leadership being re-graded as Unsatisfactory (1).

## Summary of Grades

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<b>Quality of Care and Support - 5 - Very Good</b>	
Statement 1	5 - Very Good
Statement 2	5 - Very Good
<b>Quality of Staffing - 5 - Very Good</b>	
Statement 1	5 - Very Good
Statement 2	5 - Very Good
<b>Quality of Management and Leadership - 5 - Very Good</b>	
Statement 1	5 - Very Good
Statement 2	5 - Very Good

## Inspection and Grading History

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Date	Type	Gradings
3 Jun 2008	Announced	Care and support      5 - Very Good Staffing                    5 - Very Good Management and Leadership      4 - Good

## Terms we use in our report and what they mean

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**Action Plan** - When we inspect a service, or investigate a complaint and the inspection report highlights an area for improvement; either through recommendations or requirements, the action plan sets out the actions the service will take in response.

**Best practice statements/guidelines** - This describes practices that have been shown to work best and to be achievable in specific areas of care. They are intended to guide practice and promote a consistent and cohesive approach to care.

**Care Service** - A service that provides care and is registered with us.

**Complaints** - We have a complaints procedure for dealing with any complaint about a registered care service or about us. Anyone can raise a concern with us - people using the service, their family and friends, carers and staff.

We investigate all complaints which can have more than one outcome. Depending on how complex the complaint is, the outcomes can be:

- upheld - where we agree there is a problem to be resolved
- not upheld - where we don't find a problem
- partially upheld - where we agree with some elements of the complaint but not all of them.

**Enforcement** - To protect people who use care services, the Regulation of Care (Scotland) Act 2001 gives the Care Commission powers to enforce the law. This means we can vary or impose new conditions of registration, which may restrict how a service operates. We can also serve an improvement notice on a service provider to make them improve their service within a set timescale. If they do not make these improvements we could issue a cancellation notice and cancel their registration.

**Disclosure Scotland**- Disclosure Scotland provides an accurate and responsive disclosure service to enhance security, public safety and protect the vulnerable in society. There are three types or levels of disclosure (i.e. criminal record check) available from Disclosure Scotland; basic, standard and enhanced. An enhanced check is required for people whose work regularly involves caring for, training, supervising or being in sole charge of children or adults at risk; or to register for child minding, day care and to act as foster parents or carers.

**Participation** - This describes processes that allow individuals and groups to develop and agree programmes, policy and procedures.

**Personal Plan** - This is a plan of how support and care will be provided. The plan is agreed between the person using the service (or their representative, or both of them) and the service provider. It is sometimes called a care plan mostly by local authorities or health boards when they commission care for people.

## How you can use this report

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Our inspection reports give care services detailed information about what they are doing well and not so well. We want them to use our reports to improve the services they provide if they need to.

Care services should share our inspection reports with the people who use their service, their families and carers. They can do this in many ways, for example by discussing with them what they plan to do next or by making sure our report is easily available.

## People who use care services, their relatives and carers

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We encourage you to read this report and hope that you find the information helpful when making a decision on whether or not to use the care service we have inspected. If you, or a family member or friend, are already using a care service, it is important that you know we have inspected that service and what we found. You may find it helpful to read previous inspection reports about his service.

## The Care Commission

We use the information we gather from all our inspections to report to Scottish Ministers on how well Scotland's care services are performing. This information helps us to influence important changes they may make about how care services are provided.

## Reader Information

This inspection report is published by the Care Commission. It is for use by the general public. You can get more copies of this report and others by downloading it from our website [www.carecommission.com](http://www.carecommission.com) or by telephoning 0845 603 0890.

## Translations and alternative formats

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

Tha am foillseachadh seo ri fhaighinn ann an cruthannan is cànan eile ma nithear iarrtas.

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