Milnbank Housing Association Ltd
Housing Support Unit
Housing Support Service
53 Ballindalloch Drive
Dennistoun
Glasgow
G31 3DQ
Telephone: 0141 554 6996

Inspected by: Marjorie Bain
Type of inspection: Unannounced
Inspection completed on: 28 February 2013
Contents

Summary 3
1 About the service we inspected 4
2 How we inspected this service 6
3 The inspection 9
4 Other information 21
5 Summary of grades 22
6 Inspection and grading history 22

Service provided by:
Milnbank Housing Association Limited

Service provider number:
SP2003000178

Care service number:
CS2004060651

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Summary

This report and grades represent our assessment of the quality of the areas of performance which were examined during this inspection.

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

We gave the service these grades

<table>
<thead>
<tr>
<th>Area</th>
<th>Grade</th>
<th>Description</th>
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<tbody>
<tr>
<td>Quality of Care and Support</td>
<td>5</td>
<td>Very Good</td>
</tr>
<tr>
<td>Quality of Staffing</td>
<td>4</td>
<td>Good</td>
</tr>
<tr>
<td>Quality of Management and Leadership</td>
<td>4</td>
<td>Good</td>
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</table>

What the service does well

This is a service which operates in a person centred way seeking to provide a range of opportunities for people to provide feedback about the quality of the service being provided.

What the service could do better

The service needs to put in place improved quality assurance systems to help the organisation be able to evidence that it is providing a high quality of service and achieving good outcomes for people who use the service.

What the service has done since the last inspection

The service has not made the progress it had planned due to experiencing periods of staff absence and internal staff restructuring.

Conclusion

This service strives to support the range of people who receive their services to be able to live independently within their own home and community.

Who did this inspection

Marjorie Bain
About the service we inspected

The Care Inspectorate regulates care services in Scotland. Prior to 1 April 2011, this function was carried out by the Care Commission. Information in relation to all care services is available on our website at www.scswis.com.

This service was previously registered with the Care Commission on 31 January 2005 and transferred its registration to the Care Inspectorate on 1 April 2011.

Requirements and recommendations
If we are concerned about some aspect of a service, or think it needs to do more to improve, we may make a recommendation or requirement.
- A recommendation is a statement that sets out actions the care service provider should take to improve or develop the quality of the service based on best practice or the National Care Standards.
- A requirement is a statement which sets out what is required of a care service to comply with the Public Services Reform (Scotland) Act 2010 (“the Act”) and secondary legislation made under the Act, or a condition of registration. Where there are breaches of Regulations, Orders or conditions, a requirement may be made. Requirements are legally enforceable at the discretion of the Care Inspectorate.

Milnbank Housing Association is a Housing Support and Care at Home service. There are two branches, each with two services within each branch. The integrated branch is composed of two services which offer support to vulnerable adults living in supported accommodation.

The Housing with Support branch is composed of two services. One service is sheltered housing which accommodates 30 people. The other provides support to vulnerable people with their own tenancies.

The Objectives state:

‘To develop and continually seek to enhance, direct provision that is of the highest quality coupled with working practices that are generally regarded as the best within the sector’.

The full statement of Aims and Objectives is available.

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

This report and grades represent our assessment of the quality of the areas of performance which were examined during this inspection.

Grades for this care service may change following other regulatory activity. You can find the most up-to-date grades for this service by visiting our website www.careinspectorate.com or by calling us on 0845 600 9527 or visiting one of our offices.
2 How we inspected this service

The level of inspection we carried out
In this service we carried out a 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 we did during the inspection
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.

Marjorie Bain inspector visited the service on 28 February 2013 between the hours of 8:30 and 16:45.

At the last inspection we focused on support for older people. During this visit we focused on the children and families Walpole Project.

We issued 20 Quality Standards Questionnaires to service users and 10 (50%) were returned prior to the inspection. We issued 5 Quality Standards Questionnaires to staff and 4 (80%) were returned prior to the inspection.

In this inspection we gathered evidence from various sources, including the relevant sections of policies, procedures, records and other documents, including:

- Annual Return
- Self Assessment
- Tenant Participation Strategy (2011)
- Walpole Newsletter (2)
- Sheltered Tenants Newsletter
- Analysis of Tenants Views of Service (2012-2013)
- Walpole Project - figures & outcome (01-01-12 to 31-12-2012)
- Staff shift task list
- Staff Training Record
- Minutes of Team Meetings (2)
- Minute of Senior Team Meeting (16 October 2012)
- Service Delivery Meeting (1 November 2012)
- Support Plans for people using the service (4)
- Met with people using the service (1)
- Staff supervision and appraisal files (2)
Grading the service against quality themes and statements
We inspect and grade elements of care that we call ‘quality themes’. For example, one of the quality themes we might look at is ‘Quality of care and support’. Under each quality theme are ‘quality statements’ which describe what a service should be doing well for that theme. We grade how the service performs against the quality themes and statements.

Details of what we found are in Section 3: The inspection

Inspection Focus Areas (IFAs)
In any year we may decide on specific aspects of care to focus on during our inspections. These are extra checks we make on top of all the normal ones we make during inspection. We do this to gather information about the quality of these aspects of care on a national basis. Where we have examined an inspection focus area we will clearly identify it under the relevant quality statement.

Fire safety issues
We do not regulate fire safety. Local fire and rescue services are responsible for checking services. However, where significant fire safety issues become apparent, we will alert the relevant fire and rescue services so they may consider what action to take. You can find out more about care services’ responsibilities for fire safety at www.firelawscotland.org
What the service has done to meet any recommendations we made at our last inspection

There were no requirements or recommendations made at the last inspection.

The annual return

Every year all care services must complete an ‘annual return’ form to make sure the information we hold is up to date. We also use annual returns to decide how we will inspect the service.

Annual Return Received: Yes - Electronic

Comments on Self Assessment

Every year all care services must complete a ‘self assessment’ form telling us how their service is performing. We check to make sure this assessment is accurate.

We received a fully completed self assessment document from the service provider. We were satisfied with the way the service provider had completed this and with the relevant information they had given us for each of the headings that we grade them under.

Taking the views of people using the care service into account

The views of people have been included under the relevant Quality Statement in this inspection report. Of the nine people who responded, 6 came from people in the homeless service, 3 came from older people receiving floating support, and one came from a person using the children & families unit.

People who responded to our Care Standards Questionnaire told us they strongly agreed (9) or agreed (1) that they were happy with the overall quality of the service they received. One person said they did not know how to make a complaint to the service and two people did not know how to make a complaint to the Care Inspectorate. The manager indicated that they would continue to remind people how to make a complaint.

Taking carers’ views into account

We did not speak to any relatives of people using the service during our inspection.
3 The inspection

We looked at how the service performs against the following quality themes and statements. Here are the details of what we found.

Quality Theme 1: Quality of Care and Support

Grade awarded for this theme: 5 - Very Good

Statement 1

We ensure that service users and carers participate in assessing and improving the quality of the care and support provided by the service.

Service strengths

The service was found to be operating at a very good level for this quality statement.

The service receives referrals from a variety of sources, local authority homeless, social work, NHS and other care organisations. Each person is provided with information about what the service can offer and how they will work to support people to live independently. Information is supplied about how to make complaints if not satisfied.

The service has a tenant participation policy and procedure and from the outset people are encouraged to provide their views and opinions about how the service could improve. Opportunities are also given for people to contribute to service submissions on national consultations.

A ‘Talking Wall’ keeps people up-to-date with events, activities and consultations in addition to the regular service surveys. All survey results are fed back to people using the service so they can assess progress being achieved. Local tenant and support service group meetings are advertised and participation encouraged.

Regular newsletters provide information about local events and activities and where required transport is provided to enable people to participate. In the children & families unit transport can be provided for anyone wishing to visit their family over Christmas & New Year when local transport availability is restricted. Regular recipes are included in the newsletters to help improve the cooking skills particularly of young people.

Focus group meetings are organised to obtain feedback from people using the service
and the manager and senior staff make themselves readily available for anyone wishing to contact them. Service survey results indicate high levels of satisfaction.

**Areas for improvement**

The service should continue to provide a variety of opportunities for people to provide feedback and comment about the quality of service being delivered.

**Grade awarded for this statement:** 5 - Very Good

**Number of requirements:** 0

**Number of recommendations:** 0
Statement 3
We ensure that service users’ health and wellbeing needs are met.

Service strengths
The service was found to be operating at a very good level for this quality statement.

Staff work closely with social work and health staff to ensure that the support provided to young people and their children is meeting their needs and that people are developing the skills required for independent living.

We examined four support plans for people using the service.

Each service user agrees with their key worker the areas in which they require support and progress is monitored and evaluated through regular reviews. Each plan for young mothers with children assess whether support is required with: household management; budgeting; self care; and family relationships. Desired outcomes are then identified and support provided to achieve these. In many instances there is close liaison with social work to ensure that adequate support is being provided to keep children safe. Regular attendance at a local parent and child group is encouraged.

Staff has a strong advocacy role to support people to obtain their own tenancies in areas which have nursery and crèche facilities. Support is also provided to help re-establish relationships with family and often with support service users are reunited with family members and return home.

We met one service user who told us that they had learned to become more independent as when they had lived at home everything had been done for them. On occasions staff will child mind to give the service user an opportunity to carry out household tasks such as cleaning, preparing meals or have private time to have a bath. Staff supports people to attend pre natal classes and support them to prepare for the arrival of their baby. Support is provided for service users to attend health visitor appointments and have their children immunised.

We noted correspondence from a social worker advising the service that their contribution at a child protection conference had been much appreciated.

The whole focus of the support provided is to help service users experience a sense of achievement as their new found skills develop.

‘Since being with Milnbank my life has rapidly improved, the support and advocacy I have been given has worked so well on my behalf’
Areas for improvement

The content of the support plans examined suggested that key workers assessed service user support needs and then asked the person to agree these, rather than undertaking assessment jointly and noting any differences of opinion. Some staff recordings could have been more person centred. The service should review their assessment and recording practices to ensure that all work undertaken is person centred.

Support provided seemed household task focused and it was less clear from the examination of support plans as to what levels of emotional and social support was being provided. The service should consider whether sufficient emotional and social support is being provided.

None of the plans examined contained a robust risk assessment. (See Recommendation 1)

Grade awarded for this statement: 5 - Very Good

Number of requirements: 0

Number of recommendations: 1

Recommendations

1. The service should ensure that support plans contain robust risk assessments which are regularly reviewed and that staff receive refresher training in person centred recordings.

   National Care Standards - Housing Support Services - Standard 3 - Management and staffing arrangements - and - Standard 4 - Housing support planning
Quality Theme 3: Quality of Staffing
Grade awarded for this theme: 4 - Good

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

Service strengths
The service was found to be operating at a very good level for this quality statement.

We did not look at this Quality Statement in depth during this inspection.

The service had not recruited any new staff since the last inspection in March 2012.

When the service does recruit then service users are invited to provide candidates with information about the service and provide feedback to management for them to take into account during the formal interview process.

The service is in the process of discussing how service users could be involved in staff appraisals and hope to have this in place by July 2013.

The service provides service users with regular monthly opportunities to comment on the quality of staffing via surveys and support plan reviews. The manager’s contact information is made available to all people who use the service and they can be contacted at any time to discuss any concerns.

People who completed our Care Standards Questionnaire told us:

‘(Name of support worker) has done so much for myself and am glad she is my support worker’

‘The staff treat me well I get along with them all as they are really helpful. They make sure that I am getting the best care available so I am really pleased with the service’

‘I think the staff are respectful’

Areas for improvement
The service should seek feedback about quality of staffing from service users and their families on a regular basis and include their views in staff appraisals.
Grade awarded for this statement: 5 - Very Good

Number of requirements: 0

Number of recommendations: 0
Statement 3
We have a professional, trained and motivated workforce which operates to National Care Standards, legislation and best practice.

Service strengths
The service was found to be operating at a good level for this quality statement.

All staff is appropriately qualified. Senior staff is embarking on management training.

Since the last inspection staff had been trained in food hygiene and personal safety. New Continued Professional Development Plans were being put in place for all staff.

The service has been undertaking a review of their staffing structure and management responsibilities. They were in the process of developing a more responsible role for support staff and to share management responsibilities more evenly between the manager and senior support staff. Some of the changes they were considering arose from changes to the local authority commissioning authority’s contract compliance requirements.

Senior staff were having appraisal of performance undertaken with the remainder of staff having their appraisals later in the year.

Apart from meeting with the manager we met four members of their staff. They confirmed that the service had been reviewing their activities and that staff roles were in the process of changing. They advised that much of staff training had been related to the proposed changes.

One member of staff who had completed our Care Standards Questionnaire told us:

‘The service provides opportunities for all staff to enhance their skills and knowledge by providing access to relevant training’

Areas for improvement
Based on our discussions with staff and examination of supervision records it appears that formal supervision sessions to monitor staff performance were not routinely being undertaken, were often informal or irregular. One file indicated a member of staff had only one supervision session since being employed. The manager advised that following the completion of their staffing review that senior support staff would supervise and appraise their own staff. Previously the manager had been trying to undertake this task. The provider’s HR staff when undertaking a performance management check had identified a need to improve staff training and development records. (See Recommendation 1)

Very little staff training had been provided since the last inspection due to the internal management review being undertaken. The manager advised that they expected to
have their training programme back on target shortly with each member of staff having their own Individual Learning Log.

Grade awarded for this statement: 4 - Good

Number of requirements: 0

Number of recommendations: 1

Recommendations

1. The service should ensure that a programme of formal staff supervision and appraisal in put in place with agreed timescales and minutes of these meetings recorded signed by both parties.

National Care Standards - Housing Support Services - Standard 3 - Management and staffing arrangements
Quality Theme 4: Quality of Management and Leadership
Grade awarded for this theme: 4 - Good

Statement 3
To encourage good quality care, we promote leadership values throughout the workforce.

Service strengths
The service was found to be operating at a good level for this quality statement.

Senior staff are embarking on management training to enhance their leadership skills and help them further develop their performance in providing support services.

There had been few staff meetings since the last inspection and those that had taken place had focused on the new role for senior staff, the development of small service specific teams of staff, and on the introduction of Individual Learning Logs. The service was piloting each senior meeting with their staff group on a six weekly basis to strengthen team working and provide more consistent staff contacts for people using the service.

The service was looking to enhance its organisational capabilities, particularly in developing senior staff who they wished to be: engaged; established; accomplished; and exemplary in all their undertakings.

The service can offer shadowing opportunities for support staff who may be considering taking on a more senior role within the service.

The service hoped that once senior staff are embedded in their new role that they could offer apprenticeships to people looking to develop a career in care.

One member of staff who completed our staff questionnaire told us:

‘MHA is a great employer to work for all staff are treated with same respect and are all included’

Areas for improvement
The service should seek to enable all staff to develop their leadership values and skills to help the service further improve.
Grade awarded for this statement: 4 - Good

Number of requirements: 0

Number of recommendations: 0
Statement 4

We use quality assurance systems and processes which involve service users, carers, staff and stakeholders to assess the quality of service we provide.

Service strengths

The service was found to be operating at a good level for this quality statement.

The service provides regular opportunities for service users and their families to provide feedback about the quality of the service being provided. Service users are issued with the manager’s contact details so they can be contacted at any time.

A recent survey of the Walpole Project (Children & Families Unit) received feedback from two service users indicating their high level of satisfaction with the service being provided.

Visits by service users to other services such as the furniture resource had been evaluated by service users and found to have been very useful.

Since the last inspection the service had issued social work care managers with a questionnaire to obtain feedback:

‘Excellent resource’

‘Communication has been excellent and I can contact a member of staff at any time’

‘Very impressed by support and guidance provided’

‘She speaks highly of support she has received there and she was made to feel welcome and valued’

Areas for improvement

The provider has few quality assurance systems in place, the one that we did see related to staff training and development and areas for improvement had been identified and were being acted upon.

It is recognised that periods of staff absence have resulted in some proposed developments not progressing at the pace intended. The focus of the service’s efforts to better align staff responsibilities particularly to senior staff and change how they operate appears to have overshadowed other service activities. Where monitoring had taken place it was largely housing management task focused and not focused on the emotional needs of people receiving a care service.

There is a lack of provider and service internal monitoring and audits being undertaken which makes it difficult to evidence delivering good outcomes for service users. (See Recommendation 1)
Recommendations

1. The service should put in place quality assurance systems which monitor and evaluate the quality of service being provided; reflect up-to-date knowledge and best practice guidance; evidence that they are continuously striving to improve practice; and demonstrate that they are delivering good outcomes for people who use the service.

National Care Standards - Housing Support Services - Management and staffing arrangements
4 Other information

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
Activities and events for older people have improved since our last visit in that the service is accessible to a wider group of people and participation in organised activities and outings has increased.

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 SCWSI 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).
5 Summary of grades

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<thead>
<tr>
<th>Quality of Care and Support - 5 - Very Good</th>
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<tr>
<td>Statement 1</td>
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<td>Statement 3</td>
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<th>Quality of Staffing - 4 - Good</th>
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<tr>
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<tr>
<td>Statement 3</td>
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<td>Statement 4</td>
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6 Inspection and grading history

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<thead>
<tr>
<th>Date</th>
<th>Type</th>
<th>Gradings</th>
</tr>
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</table>
| 28 Mar 2012     | Unannounced   | Care and support 5 - Very Good
                              |               | Staffing Not Assessed
                              |               | Management and Leadership 6 - Excellent |
| 26 Aug 2010     | Announced     | Care and support 6 - Excellent
                              |               | Staffing 5 - Very Good
                              |               | Management and Leadership Not Assessed |
| 19 Nov 2009     | Announced     | Care and support 5 - Very Good
                              |               | Staffing 5 - Very Good
                              |               | Management and Leadership Not Assessed |

All inspections and grades before 1 April 2011 are those reported by the former regulator of care services, the Care Commission.
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