

## Sheltered Housing - Orkney Housing Support Service

Council Offices  
School Place  
Kirkwall  
KW15 1NY

Telephone: 01856 850770

Type of inspection: Announced (short notice)  
Inspection completed on: 14 December 2017

**Service provided by:**  
Orkney Islands Council

**Service provider number:**  
SP2003001951

**Care service number:**  
CS2004077253

## About the service

The Care Inspectorate regulates care services in Scotland. Information about all care services is available on our website at [www.careinspectorate.com](http://www.careinspectorate.com)

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

The sheltered housing service is provided at locations in Kirkwall and in Stromness.

Site wardens provide support to vulnerable tenants. A range of housing management welfare services are offered to tenants including daily welfare checks.

Tenants are accommodated in purpose-built houses which were rented from Orkney Council Housing Services. There were also community rooms at Lambaness and Stromness which could be used for social get-togethers.

The aim of the service was to deliver comprehensive, responsive, person-centred supports which were efficient and effective.

## What people told us

During the inspection we spoke with five service users, mostly in small group settings, and received mainly favourable feedbacks.

However when we carried out a sample of five interviews by telephone to speak individually with tenants the feedback was very mixed. Comments included:

"[The service] was very good before. But now there is no proper cover. We don't know who to contact. There has been a breakdown of communication. We feel we are being pushed to one side. There is no weekend cover. Our warden does the best she can. I don't think she gets the support she deserves. And we are definitely not."

"I think Orkney Islands Council is telling tales. There is a lack of wardens and these posts should have been advertised. It used to be good. It's a shame."

"I'm very happy."

"I'm quite happy. The wardens do so much. It's a great service. They go above and beyond."

"The warden is first class. Willing to do anything to help. Manager's keep themselves at a distance. Communication is not great. It's not easy to contact them. I'm comfortable here. I like it. The tenants are apprehensive about council plans to withdraw wardens. They are trying to 'de-warden' us!"

We also issued 10 Care Standards Questionnaires (CSQs) to service users and received six responses. The following comments were offered:

100% either 'strongly agreed' or 'agreed' that, overall, they were happy with the care and support provided.

One respondent 'disagreed' that the service regularly checked with them that their needs were being met.

One 'strongly disagreed' that staff had enough time to carry out the agreed support and care.

The following comments were offered:

"Severe warden shortage. Need to hire more people to full time cover. Relief warden does sterling work, but manager's need to try and locate new people."

"I am very worried about the wardens as one is about to leave and the other warden only does mornings, so this is a big worry."

## Self assessment

The service have not been asked to complete a self assessment in advance of the inspection. We looked at their own improvement plan and quality assurance paperwork. These demonstrated their priorities for development and how they were monitoring of the quality of the provision within the service.

## From this inspection we graded this service as:

<b>Quality of care and support</b>	3 - Adequate
<b>Quality of staffing</b>	3 - Adequate
<b>Quality of management and leadership</b>	3 - Adequate

## Quality of care and support

### Findings from the inspection

We found the service was performing to an adequate level in respect of this quality theme.

The adequate grade applies to performance at a basic but adequate level.

We visited the sheltered housing schemes at Rae's Close, Stromness and at Lambaness, Kirkwall. Where we had previously raised serious concerns about the shortcomings within the support planning arrangements across the service we noted, during the current inspection, that newly devised support plans were being put in place.

Together with up-to-date risk assessments and written agreements, outlining the service that would be provided to meet tenants' needs, we were more assured that progress was being made to put in place appropriate housing supports. However, we advised that written agreements needed to more explicitly outline the days when warden staff would be available to individual tenants. (See Recommendation 1)

New recording templates had also been implemented to evidence the contacts with tenants and the progress being made to meet their individualised support needs. Future inspections will expect to see clear evidence in the support recordings of the outcomes being achieved to support people who experience care at Lambaness and Rae's Close sheltered housing schemes.

We noted, too, that Sheltered Housing - Orkney was deploying managers from within their wider Housing and Homelessness service to assist warden staff to address concerns within the service. This was being done positively and constructively.

During the inspection feedback session we advised that the provider would need to review the current practices to ensure that they were effective and enhancing the performance of the service and, more specifically, ensuring that tenants' support needs were being appropriately responded to. (See Recommendation 2)

As we have reported in the 'What people told us' section of this report feedback from people who experience care is mixed. Indeed we have reported on tenants' anxieties about their perceptions about a lack of staffing and, also, communication difficulties within the service.

Taking all of the above into account - and the views of service users - we concluded that the standard of care and support was adequate.

## Requirements

**Number of requirements:** 0

## Recommendations

**Number of recommendations:** 2

1. The provider should ensure that written agreements more clearly outline the days and duration of housing supports provided by wardens to tenants.

National Care Standards, Housing Support Services: Standard 2 - Your Legal Rights.

2. The provider should ensure that service users are fully involved in developing support plans and in their ongoing reviews.

National Care Standards, Housing Support Services: Standard 4 - Housing Support Planning.

**Grade:** 3 - adequate

## Quality of staffing

### Findings from the inspection

We found the service was performing to an adequate level in respect of this quality theme.

The adequate grade applies to performance at a basic but adequate level.

The Sheltered Housing - Orkney service has experienced a period of staffing changes and issues which has impacted on the overall running of the service. Following our previous inspection report of March 2017 - which identified weaknesses which caused concern about the performance of the service - the provider requested a review of sheltered housing for older people to, amongst other elements, scope the 'ability of the service to provide a comprehensive housing support service'. This review was undertaken by a senior officer of Orkney

Health and Care. It raised a series of recommendations based on best practice and bench marking when it reported in July 2017.

From our interviews with members of staff we ascertained that there had been a lack of formal supervisory supports and training. This was compounded by IT difficulties which had hindered their connectivity with the wider housing support service and, indeed, the council.

The internal review report highlighted some confusion about the role of the warden service and the range of supports it could provide.

When staff members responded to our Care Standards Questionnaires (CSQs) - we had replies from three respondents - some indicated that they 'disagreed' that they had had regular individual supervision with their manager or that the service had asked their opinions about how it could improve. One 'strongly disagreed' that they had been given opportunities to meet up with other staff and talk about their day-to-day work. We were told "they tend to forget about us."

Concerns about the lack of staff at the Lambaness sheltered housing scheme were voiced.

We noted the recent very positive supports to assist the effective running of the service by two senior carers from an allied service.

We noted, too, that all members of staff had recently been supported with their individual employee review and development (ERD) forms. These had identified a series of staff development issues in relation to training in IT skills, accessing iLearn website and completing training logs.

From our interviews with tenants it was clear that they held members of staff in high regard. Indeed, we were told, "they go above and beyond."

It is clear that the service had experienced the impact of extenuating circumstances. We were encouraged by the positive steps being made to address these outstanding issues. A new line manager was in the process of assuming responsibilities for both the Stromness and Kirkwall schemes.

We concluded the provider needed to fully embed a range of staff development practices, including supervision, appraisal and observation assessments of staff competencies. These practices will be expected to evidence how, as part of an overall service improvement plan, the experience and outcomes for people who experience care is being improved. (See Recommendation 1)

Taking all of the above into account we concluded that the quality of the staffing was adequate.

## Requirements

**Number of requirements:** 0

## Recommendations

**Number of recommendations:** 1

1. The provider to fully embed a range of staff development practices, including supervision, appraisal and observation assessments of staff competencies. These practices will be expected to evidence how, as part of an

overall service improvement plan, the experience and outcomes for people who experience care is being improved.

National Care Standards, Housing Support Services: Standard 3 - Management and Staffing.

**Grade:** 3 - adequate

## Quality of management and leadership

### Findings from the inspection

We found the service was performing to an adequate level in respect of this quality theme.

The adequate grade applies to performance at a basic but adequate level.

Our previous report of March 2017 concluded that the management and leadership arrangements within the service needed to be made more robust to ensure standards were improved, maintained, and, indeed, embedded. It was clear that since then the service had experienced the impact of extenuating circumstances.

We were encouraged by the recent management supports to help drive up standards within the service.

Equally the new line management arrangements, once fully embedded, should also ensure consistency and lead to improving standards of support.

The provider had accepted the contents of a review carried out by a senior officer of Orkney Health and Care which had raised a series of recommendations and was acting to address the wide ranging issues.

We were reassured that there was recognition of the need to drive up housing support standards within the service. We noted the positive measures being implemented to address these issues.

The provider needed to devise a detailed service improvement plan based on the recommendations contained in the internal review, the contents of this inspection report as well as the views, opinions and suggestions of the service's stakeholders about how it could be improved.

The implementation of embedded and robust quality audits should be used to evaluate and evidence how the support practices of the service were leading to improved person-centred outcomes for tenants. (See Recommendation 1)

The role of the registered manager and the supervisory structure should be reviewed to ensure that ongoing day-to-day management supports were readily available to the service.

Taking all of the above into account we concluded that the standard of management and leadership was adequate.

### Requirements

**Number of requirements:** 0

## Recommendations

### Number of recommendations: 1

1. The provider to devise a detailed service improvement plan based on the recommendations contained in the internal review, the contents of this inspection report as well as the views, opinions and suggestions of the service's stakeholders about how it could be improved.

Part of the service improvement plan should contain the implementation of robust quality audits which should be used to evaluate and evidence how the overall support practices of the service were leading to improved person-centred outcomes for tenants.

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

**Grade:** 3 - adequate

## What the service has done to meet any requirements we made at or since the last inspection

### Previous requirements

There are no outstanding requirements.

## What the service has done to meet any recommendations we made at or since the last inspection

### Previous recommendations

#### Recommendation 1

The provider must ensure that each service user has a current support plan.

Each support plan should set out the way the service is shaped to meet the needs of individual tenants.

Support plans should be routinely reviewed on a six monthly basis, or sooner if individual circumstance necessitate this.

Up-to-date, person-centred risk assessments should be compiled which detail how any risks or hazards are to be minimised and managed.

A more evaluative outcome-focus recording format is needed to more clearly highlight how service users' preferred outcomes are being progressed.

National Care Standards, Housing Support Services: Standard 4 - Housing Support Planning.

**This recommendation was made on 22 March 2017.**

### Action taken on previous recommendation

New support planning arrangements were being implemented across the service's two sheltered housing schemes. These included up-to-date risk assessments.

In addition a new recording format had also been introduced to the service.

We noted the positive steps being made to address this previous recommendation. The current report includes a recommendation about the need to carry out a review of the new arrangements and of the individual support plans.

## Recommendation 2

The provider must ensure that each service user has a written agreement which clearly defines the service that will be provided to meet their needs. These should set out the terms and conditions for receiving the service, and arrangements for changing or ending the agreement.

National Care Standards, Housing Support Services: Standard 2 - Your Legal Rights.

**This recommendation was made on 22 March 2017.**

### Action taken on previous recommendation

Individual written agreements had been put in place for each service user. We have recommended in this current inspection report that they should be more explicit in detailing the days and times when warden support will be provided.

## Recommendation 3

The provider needed to review its staff development arrangements to ensure internal practices including staff supervision, appraisal and training are kept up-to-date and, indeed, fully embedded within the service.

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

**This recommendation was made on 22 March 2017.**

### Action taken on previous recommendation

Annual staff appraisals had been completed and, with interim support from managers from the wider Housing and Homelessness service, additional guidance provided to the warden staff. A new line manager was in the process of assuming responsibility for both services. We have raised an amended recommendation that staff development practices needed to be fully embedded across the service.

## Recommendation 4

The provider needed to review its quality assurance arrangements to ensure robust auditing measures are fully embedded within the running and evaluation of the service to ensure standards are maintained and improvements actioned.



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

**This recommendation was made on 22 March 2017.**

### Action taken on previous recommendation

We note the extenuating circumstances which have impacted on the running of the service in 2017 and have continued this recommendation in the current inspection report.

## 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).

## Enforcement

No enforcement action has been taken against this care service since the last inspection.

## Inspection and grading history

Date	Type	Gradings								
22 Mar 2017	Announced (short notice)	<table> <tr> <td>Care and support</td> <td>3 - Adequate</td> </tr> <tr> <td>Environment</td> <td>Not assessed</td> </tr> <tr> <td>Staffing</td> <td>Not assessed</td> </tr> <tr> <td>Management and leadership</td> <td>3 - Adequate</td> </tr> </table>	Care and support	3 - Adequate	Environment	Not assessed	Staffing	Not assessed	Management and leadership	3 - Adequate
Care and support	3 - Adequate									
Environment	Not assessed									
Staffing	Not assessed									
Management and leadership	3 - Adequate									
5 Nov 2014	Unannounced	<table> <tr> <td>Care and support</td> <td>5 - Very good</td> </tr> <tr> <td>Environment</td> <td>Not assessed</td> </tr> <tr> <td>Staffing</td> <td>5 - Very good</td> </tr> <tr> <td>Management and leadership</td> <td>5 - Very good</td> </tr> </table>	Care and support	5 - Very good	Environment	Not assessed	Staffing	5 - Very good	Management and leadership	5 - Very good
Care and support	5 - Very good									
Environment	Not assessed									
Staffing	5 - Very good									
Management and leadership	5 - Very good									
29 Aug 2013	Announced (short notice)	<table> <tr> <td>Care and support</td> <td>4 - Good</td> </tr> <tr> <td>Environment</td> <td>Not assessed</td> </tr> <tr> <td>Staffing</td> <td>4 - Good</td> </tr> <tr> <td>Management and leadership</td> <td>4 - Good</td> </tr> </table>	Care and support	4 - Good	Environment	Not assessed	Staffing	4 - Good	Management and leadership	4 - Good
Care and support	4 - Good									
Environment	Not assessed									
Staffing	4 - Good									
Management and leadership	4 - Good									
13 Sep 2011	Announced	<table> <tr> <td>Care and support</td> <td>4 - Good</td> </tr> </table>	Care and support	4 - Good						
Care and support	4 - Good									

Date	Type	Gradings	
		Environment Staffing Management and leadership	Not assessed 4 - Good Not assessed
8 Dec 2010	Announced	Care and support Environment Staffing Management and leadership	4 - Good Not assessed Not assessed 4 - Good
18 Mar 2010	Announced	Care and support Environment Staffing Management and leadership	3 - Adequate Not assessed 3 - Adequate 2 - Weak
20 Mar 2009	Announced (short notice)	Care and support Environment Staffing Management and leadership	4 - Good Not assessed 3 - Adequate 3 - Adequate

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