

# Nansen Highland Housing Support Service Housing Support Service

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**Service provided by:**  
Nansen Highland

**Service provider number:**  
SP2003001725

**Care service number:**  
CS2011299270

## 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)

The service is operated by Nansen Highland, a small charitable organisation based in Ross-shire. Nansen Highland Housing Support Service provides both housing support and care at home services to adults with learning disabilities within their own homes. This is one of several different services offered by Nansen Highland for people with learning disabilities.

The service supports people with their own tenancy to live independently and safely in their community. The support offered is flexible and tailored to meet the needs of individual service users and their different circumstances. Support can range from a few hours weekly to significantly larger periods on a daily basis. Support is based on the assessed needs of individuals. This could include a 'sleep in' arrangement if there was an identified need.

The housing support service was registered on 1 May 2012. In response to the needs of supported people, the care at home service was registered on 6 July 2015. The service operates as a combined service that enables seamless service delivery.

## What people told us

People told us that they were very happy with the service that they received. They said that their carers were supportive and had come to know their needs and abilities very well. They described positive relationships with staff and said the senior management team were very approachable. People were aware of how to contact support in an emergency and were confident that a worker would be available to them very quickly. People told us that they loved their living arrangements and very much valued the independence this promoted. They said that the support from Nansen enabled them to develop a positive lifestyle.

We received three completed questionnaires from people who used the service. They told us that people were very happy with the care and support they received from the service.

## Self assessment

The Care Inspectorate received a self assessment document from the provider. We were satisfied with the way this was completed. The provider gave good information about what they thought they did well and they had identified the work they thought they needed to do to improve particular areas.

## From this inspection we graded this service as:

Quality of care and support	5 - Very Good
Quality of staffing	5 - Very Good
Quality of management and leadership	not assessed

## Quality of care and support

## Findings from the inspection

We looked at this quality theme as it allows us to consider how well the service meets the health and wellbeing needs of people who use the service. We thought that the service performance in this area was very good demonstrating major strengths in the service.

People were well supported by this service. People who used the service were involved in developing their support arrangements. This took account of their daily routines and work or educational commitments so they could access support from staff when they needed it. People told us they had developed trusting relationships with their keyworkers. This was reassuring for people and helped to promote a sense of safety for them.

Support plans were well written and demonstrated collaboration between staff and supported people. These were linked to outcomes used to help people identify their needs and discuss issues of concern to them. Progress was reviewed regularly so that support could be flexible to suit people's choice and specific needs. This helped people see where things had changed and promoted a sense of achievement and confidence for people.

We could see that people's support arrangements had been reviewed however, it was difficult to evidence how regular reviews were occurring. The service needed to clearly record the dates of review meetings, the substance of the discussion, the decisions made as a result of the review and who was involved or consulted. **(See Recommendations)**

Risk assessments were completed for each individual. These helped to identify areas where people may be vulnerable. However, these documents could be recorded better to highlight the protective factors or control measures already in place to manage these effectively. Staff that we spoke with demonstrated good knowledge of risks for people and how to support them and manage these well. However, the risk assessment documents could be further developed to improve clarity and support consistency for people.

The documents we sampled and the people we spoke with gave a good sense that people were getting the right level of support when they required it. People's development towards greater independence was supported well and their choices respected. However, this could be strengthened by greater detail in risk assessment and review documents.

## Requirements

**Number of requirements:** 0

## Recommendations

**Number of recommendations:** 1

1. The service needed to clearly record the review meetings held. The record should include who was involved or consulted, the dates when the review occurred, the substance of the discussion and the decisions made as a result.

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

National Care Standards for Care at Home Services: Standard 3 - Your Personal Plan.

**Grade:** 5 - very good

## Quality of staffing

### Findings from the inspection

We looked at this theme as it allows us to consider how well the staffing arrangements meet the needs of people who use the service. We thought that the service was performing to a very good standard.

Training records were maintained and supported ongoing learning and development for staff. We saw a range of training opportunities for staff and different delivery methods including online training, classroom based and peer-to-peer discussion. Additional support and advice was available through partner agencies such as the community learning disability nurses, social work and healthcare agencies. This blended approach to training and development supported different learning styles and helped to maximise learning for staff.

The service had developed a comprehensive induction for new staff and all staff were expected to complete core essential training. This helped staff to carry out their roles and responsibilities in meeting the health, welfare and safety needs of people who use the service. Some of this training was updated at regular intervals. The service kept electronic records and there was a system to flag up when staff needed to update specific training. This helped to ensure that mandatory training was up to date for all staff.

Records of supervision meetings showed that training needs were discussed with individual staff. This helped to inform the training plan for the service and ensure that staff were informed and knowledgeable about the issues affecting the people they supported. Informal supervision was readily available and the manager made time to talk to staff on most days. Formal 1:1 supervision with staff was regular and well recorded. There was some evidence of reflective practice, however, this could be recorded more fully. This will assist staff in maintaining their post registration training and learning record.

The manager for the service had appropriate qualifications and was registered with the Scottish Social Services Council however, the service need to be mindful of the date on which registration with Scottish Social Services Council is required for care at home and housing support workers.

### Requirements

**Number of requirements:** 0

### Recommendations

**Number of recommendations:** 0

**Grade:** 5 - very good

## Quality of management and leadership

This quality theme was not assessed.

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

### Previous requirements

#### Requirement 1

The provider must adhere to the conditions under which the registration for this service was granted. In order to do this they should review the support provided to service users to ensure that it continues to reflect the type of support agreed under the conditions under which the registration was granted or make application to register a care at home service.

This is in order to comply with SSI 2011/29 Regulation 3(2).

Timescale for implementation - two months from receipt of this report.

**This requirement was made on 10 January 2014.**

#### Action taken on previous requirement

Since the last inspection the provider made an application to the Care Inspectorate to register a care at home service which would operate in conjunction with the housing support service. The service was subsequently registered on 6 July 2015.

**Met - outwith timescales**

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

### Previous recommendations

#### Recommendation 1

The provider should continue to develop and implement regular quality audits for the service and show how the quality assurance system ensures that the service:

- acts on feedback
- uses measures to ensure that a good culture was being cultivated
- shows how feedback and the above measures contributes to plans for continuous improvement.

National Care Standards for Housing Support Services: Standard 3 - Management and Staffing Arrangements and Standard 8 - Expressing Your Views.

**This recommendation was made on 10 January 2014.**

## Action taken on previous recommendation

The service continue to seek feedback on a formal and informal basis. Results of annual questionnaires were published on Nansen website and a printed version is available to anyone who wishes it. People who use the service told us that they were involved in the development of their own support arrangements and this was flexible to accommodate any changes they wanted. The service had developed a routine for checking the strength of their systems and procedures annually. Action points had been identified and progressed. This helps the service to ensure continued improvements.

## 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
10 Dec 2014	Unannounced	Care and support 5 - Very good Environment Not assessed Staffing 4 - Good Management and leadership 4 - Good
15 Jan 2014	Unannounced	Care and support 5 - Very good Environment Not assessed Staffing 4 - Good Management and leadership 3 - Adequate

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