

# Care service inspection report

Full inspection

## Redcastle Station Support Service

Redcastle Station  
Muir of Ord



HAPPY TO TRANSLATE

Service provided by: Nansen Highland

Service provider number: SP2003001725

Care service number: CS2003008527

Inspection Visit Type: Unannounced

Care services in Scotland cannot operate unless they are registered with the Care Inspectorate. We inspect, award grades and set out improvements that must be made. We also investigate complaints about care services and take action when things aren't good enough.

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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

Quality of care and support	5	Very Good
Quality of environment	4	Good
Quality of staffing	4	Good
Quality of management and leadership	4	Good

### What the service does well

The service is small and provided a protected and supportive environment for people with disabilities to develop skills to support an independent life. People who used the service could try new experiences and explore their gifts and abilities safely.

Staff have developed good relationships with the young adults who attend the service and people enjoy their time at the service.

The service provides a number of opportunities for people to learn and achieve recognition for their skills through SVQ and Duke of Edinburgh Awards and support people with work placements. Support is provided in a person centred way to help people maintain or develop their independence which helps them to plan for the future

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

Staff needed to improve the accuracy of the records of medication they administer to people they support.

The standard of cleanliness of the premises particularly the toilets could be better. Staff should complete training on infection control to prevent risk of infection and spread of disease.

Action Plans arising from feedback should be more detailed and contain SMART (specific, measurable, achievable, realistic and timed) objectives.

The manager needed to ensure that staff had regular planned 1:1 supervision and opportunities for professional development including opportunities to take on leadership roles.

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

Since the last inspection a number of changes have taken place. A new manager has been appointed and has settled into the post well. Systems and procedures have been reviewed and brought up to date including electronic recording of staff training which has helped the service to ensure that staff training is kept current; and the medication policy which now gave clearer guidance for staff.

The management team have continued to implement systems of quality assurance that involve people who use the service and stakeholders. This has helped them to develop and improve the service for people who use it.

### **Conclusion**

Overall the service provides a very good level of support, stimulation and opportunity for people who use it. However, they need to ensure that the premises were clean and that there were robust procedures in place to prevent the spread of infection. Staff supervision and appraisal needed to be regular and meaningful to provide clear direction for staff in their professional development.

# 1 About the service we inspected

The service is provided by Nansen Highland, a small charitable organisation, based on the Black Isle in the Highlands of Scotland who provide residential and support services for young adults with learning disabilities.

Redcastle Station is located at Tore, on the Black Isle in the Highlands of Scotland. The support service operates Monday - Friday from 10am to 4pm and offers a skills based training programme to support the development of skills for independent living, opportunities to study for educational qualifications and workplace experiences.

The service aimed to: 'train and assist in the training of young persons to develop their physical, mental and spiritual capacities that they may grow to full maturity as individuals and members of society, and to instruct and to assist in instructing young persons in the principles of discipline, loyalty and good citizenship'.

## Recommendations

A recommendation is a statement that sets out actions that a care service provider should take to improve or develop the quality of the service, but where failure to do so would not directly result in enforcement.

Recommendations are based on the National Care Standards, SSSC codes of practice and recognised good practice. These must also be outcomes-based and if the provider meets the recommendation this would improve outcomes for people receiving the service.

## Requirements

A requirement is a statement which sets out what a care service must do to improve outcomes for people who use services and must be linked to a breach in the Public Services Reform (Scotland) Act 2010 (the "Act"), its regulations, or orders made under the Act, or a condition of registration. Requirements are enforceable in law.

We make requirements where (a) there is evidence of poor outcomes for people

using the service or (b) there is the potential for poor outcomes which would affect people's health, safety or welfare.

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 environment - Grade 4 - 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](http://www.careinspectorate.com) or by calling us on 0345 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

We wrote this report following an unannounced inspection that took place on 23 February 2016. Following the inspection we gave feedback to the manager of the service and the project manager for Nansen Highland. A member of the contracts team from NHS-Highland was also present at the feedback meeting.

The inspection was carried out by two inspectors. As part of the inspection, we took account of the information from the provider in the Self-Assessment and Annual documents submitted to us.

During this inspection process, we gathered evidence from various sources, including:

- the participation strategy, this is the service's plan for how they will involve service users
- the reviewed Aims and Objectives for the service
- minutes of meetings involving service user and carers
- the results of surveys
- daily recordings
- individual support plans
- risk assessments
- review records
- the environment and equipment

### 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.firescotland.gov.uk](http://www.firescotland.gov.uk)



## 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.

The Care Inspectorate received a fully completed self-assessment document from the provider. We were satisfied with the way the provider completed this and with the relevant information included for each heading that we grade services under.

The provider identified what it thought the service did well, some areas for improvement and any changes it had planned.

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

We spoke informally with a number of people who used the service. They were generally very positive about the service. They told us that the staff were great and helped them a lot. Overall people who used the service were either happy or very happy about the service they received at Redcastle Station.

## Taking carers' views into account

There were no carers available to speak with at the time of 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

We thought that the service was performing to very good standard in the areas covered by this statement. The 'very good' grade applies where people who use the service and carers were routinely involved in service development and evaluation, using a variety of methods to facilitate their involvement and evidence that the provider has responded positively to their views and this has resulted in an improvement to the quality of care.

Here are some of the strengths we saw:

- There was a suggestion box located at the front reception of the complex. Although in reality, this was rarely used it did provide a means whereby service users or their families could comment on the service anonymously if they chose to.
- There were regular meetings with families. This provided further opportunities for people to give their views and make suggestions for service development. We saw that people were consulted on their food preferences and more recently, those families who used the respite service frequently were consulted on the planned refurbishment of the service.



- It was clear from the support plans sampled that service users could shape and influence the support they got from staff.
- Review records showed that people's needs were being discussed at least six monthly and changes noted. This gave very good opportunities to discuss the support each person needed, the progress they had made in achieving their goals and what changes were required to support continued progress.
- We saw that risk assessments and support plans were updated to reflect changes and people's preferences. This helped the service to prepare an appropriate package of care and support for people coming to the service for a short break.
- The service issued annual questionnaires for service users, families and other professionals involved to get feedback on the issues affecting them and ideas for improvement
- Service users had daily contact with key workers, manager and the management team it was clear from our observations that service users were comfortable with staff including senior management and were confident that their ideas and views would be listened to. Service users had very good opportunities for changing their support arrangements, the activities they were involved with and to try new experiences

### Areas for improvement

The provider should continue to seek engagement with people who use the service, their families and other professionals for their views about the service and suggestions on how the service can improve. However, they needed to review current engagement methodologies and discard any arrangements that were not working.

The service needed to ensure that any action plans arising from the feedback received listed smart objectives within realistic and achievable timescales and detailed what the service will do in order to achieve these.

The provider should consider options for people who use the service and their

families to comment on staff performance. People who use the service should be able to comment and contribute to the training and development of the people who support them and be involved in the annual appraisal for individual staff.

### Grade

5 - Very Good

**Number of requirements - 0**

**Number of recommendations - 0**

## Statement 5

“We respond to service users' care and support needs using person centered values.”

### Service Strengths

We thought the service was performing to a very good standard in the areas covered by this statement. We thought this after we looked at personal support plans, review documents, daily records and comments made by service users and their families. The 'very good' grade here applies to performance that is characterised by major strengths. Some of the strengths we saw included:

- During this inspection we looked at five support plans for people who were using the service. We saw that information was included in plans to describe why people were using the service and what outcomes they wanted to achieve. For most people this was about increasing their independence and their confidence and to help them plan for the future.
- Whilst using the service people were supported to select SQA (Scottish Qualification Association) units to work through that would be assessed by staff and would lead to recognised qualifications. One person we spoke to was hoping to progress through their training programme and be able to work in a care setting helping others. Other people were developing skills that would enable them to feel more confident travelling independently, to help them live safely in their own homes or to improve their communication in reading or writing.
- Plans were reviewed and rewritten generally every six months and we were able to see what progress had been made or how any changes to initial plans were managed.
- Risk assessments linked to support plans and confirmed support that people may require to stay safe whilst developing their skills and knowledge.
- The medication policy had been reviewed since our last inspection and provided clear guidance for staff.

- A timetable of activities was produced weekly and copies given to people who used the service. We saw that there were a range of activities and opportunities including swimming, art, photography and baking. During this inspection some people were enjoying line dancing at a local leisure centre. We were able to confirm with people that activities happened as planned and agreed with them. People were also aware of any changes to their timetable and the reasons for this.

- Time was set aside each day for 'social time'. This was an opportunity for people to sit down at the end of the day and chat with staff and with other people who used the service. This time was used to reflect on the day and on activities, to discuss any developments in the service or just time to catch up with friends.

### Areas for improvement

Information within support plans described the support that people required to manage their medication. We saw from medication records that staff were administering homely remedies (over the counter medication) for pain relief. In one record the dose of medication varied from one tablet to two tablets with no explanation for the variance. Information within support plans needs to be expanded to provide clear protocols for the use medication and the dose to be given. This would help to ensure that medication is administered consistently.

### Grade

5 - Very Good

**Number of requirements - 0**

**Number of recommendations - 0**

## Quality Theme 2: Quality of Environment

Grade awarded for this theme: 4 - Good

### Statement 1

"We ensure that service users and carers participate in assessing and improving the quality of the environment within the service."

#### Service Strengths

We thought that the service was performing to a good standard in the areas covered by this statement. The methods used by the service to involve service users and their relatives or representatives in assessing and improving all areas of the service, including the quality of the environment, are detailed in Quality Theme 1 Statement . The 'good' grade here applies where there is some evidence to show that the service is likely to respond to views expressed by service users and carers however, opportunities to be involved and effect changes are more limited.

#### Areas for improvement

The areas for improvement identified in Quality Theme 1 Statement 1 are also relevant to this statement.

#### Grade

4 - Good

**Number of requirements - 0**

**Number of recommendations - 0**



### Statement 3

“The environment allows service users to have as positive a quality of life as possible.”

#### Service Strengths

We thought that the service was performing to a good standard in the areas covered by this statement. We thought this after we spoke to people using the service and staff and toured the premises. The 'good' grade applies to performance characterised by important strengths which have a significant positive impact.

There was some good spaces for people who use the service and good use of space around the building. People had room to engage in individual and group activities as their planner directed.

There were facilities to support groups to enjoy several community based activities such as swimming, line dancing and supported employment or community events. This helped people who used the service to enjoy a varied range of activity and experiences.

People were learning new skills; developing their social skills and building social networks. This helps people supported to improve their physical health and emotional wellbeing. The experience of volunteering or their involvement in community projects helped people to feel connected to their communities and develops an ethos of good citizenship for people.

There were good opportunities for outdoor experiences in the grounds of the service where people were involved in planting and growing attractive flowering plants, vegetables and fruit. Once established this will provide good opportunities for people to use the produce they grow in the snacks and meals that they cook in the cooking and baking groups. This is great educationally and helps people develop a sense of healthy eating and the natural life cycle.

The service is an accredited Centre for SQA ( Scottish Qualification Association) and offered opportunities for people to study for qualifications that will help to

improve their opportunities for employment. Staff actively supported people in work placements and if this was successful, supported them to study for any required qualification. One example of this would be where a service user had enjoyed a successful placement with a local veterinary practice and wanted to become a kennel maid. The service put together a study programme to enable them to attain the required qualification for this job.

### Areas for improvement

The provider needed to ensure that the premises were kept clean and free from potential sources of infection. During the inspection, we saw some areas that would have benefitted from thorough cleaning and there were some issues which gave us some concern. For example, there was a nail brush located on the wash hand basin which was for everyone to use. This would have harboured potentially harmful bacteria which posed a risk for the spread of infection. **See Recommendations**

### Grade

4 - Good

**Number of requirements - 0**

### Recommendations

**Number of recommendations - 1**

1. The provider should ensure that all staff completed training on infection control. They needed to develop and implement robust procedures to ensure all areas were clean and free from sources of infection. They should consider appointing a staff champion for infection control who would be responsible for ensuring that staff complied with best practice guidance and kept their knowledge and practice updated so that everyone in the service was protected.

**In making this recommendation the following National Care Standards for Support Services have been taken into account; Standard 5 - Your Environment and Standard 2 - Management and Staffing Arrangements**

## 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

We thought that the service was performing to an adequate standard in the areas covered by this statement. The 'adequate' grade here applies where there were some opportunities for involvement, however, these were more limited. The methods used by the service to involve service users and their relatives or representatives in assessing and improving all areas of the service, including the quality of the environment, are detailed in Quality Theme 1 Statement 1. We saw that people had good relationships with staff. There had been some movement by the provider on involving service users and families in the recruitment of new staff, however as there had been no new staff appointments made, we could not assess how this worked in practice.

#### Areas for improvement

The areas for improvement identified in Quality Theme 1 Statement 1 are also relevant to this statement.

The service could improve involvement of service users and families in assessing the quality of staff through inviting them to comment on the staff performance and demonstrate how this impacted on supervision, training objectives and annual appraisals for staff.

#### Grade

3 - Adequate

**Number of requirements - 0**

**Number of recommendations - 0**

## Statement 4

“We ensure that everyone working in the service has an ethos of respect towards service users and each other.”

### Service Strengths

We thought the service was performing to a very good standard in the areas covered by this statement. We thought this after we sampled staff recruitment files, supervision and training records and annual appraisals for staff. We also took account of the very positive interactions we saw demonstrated between staff and service users.

Staff demonstrated genuine warmth in their interactions towards service users. We saw people having fun and sharing jokes. This helped to engender a feeling of belonging for people who used the service and inspired confidence that they would be listened to and accepted.

A sample of the personal plans and daily notes showed that there were written in respectful language and also showed that there were serious discussions with people about their views on a number of issues including the groups they were involved in, local politics and their hopes and aspirations for their future.

Staff records showed that training was delivered in a number of key issues such as adult support and protection, food hygiene, first aid and support to study for professional qualifications through SVQ training. Staff that we spoke with told us that they enjoyed their job and felt that they had good opportunities to learn and progress in their professional development. From our discussion with the manager and the project leader, we learned that training for staff was under regular review to support staff development and improvement in their practice, for example to promote communication or healthier life choices or managing medication.

Overall we found the staff to be skilled, experienced and they worked well together. Staff demonstrated a good value base and were very much appreciated by people who used the service and their relatives and carers.

## Areas for improvement

We thought that some of the language in written records could be improved. Staff needed to be aware of the need to demonstrate professional standards in all their communications including written reports and records.

Although informal supervision of staff was readily available, opportunities for formal 1:1 direct discussion with the manager was not delivered in a planned or meaningful way and the frequency of formal supervision and team meetings was not being met as expected. These communication and support networks were thought to be helpful for communication and on-going development. This is an issue that needs to be addressed. **See Recommendations.**

## Grade

5 - Very Good

**Number of requirements - 0**

## Recommendations

**Number of recommendations - 1**

1. The provider should ensure that staff were provided with regular planned supervision as directed in the service's policy document. Supervision should provide staff with opportunities for reflection on practice and include discussion about current best practice guidance that is relevant to the needs of service users and their own training needs.

**In making this recommendation the following National Care Standards for Support Services have been taken into account; Standard 2: Management and Staffing Arrangements**

## Quality Theme 4: Quality of Management and Leadership

Grade awarded for this theme: 4 - 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

We thought that the service was performing to a good standard in the areas covered by this statement. The methods used by the service to involve service users and their relatives or representatives in assessing and improving all areas of the service, including the management and leadership of the service, are detailed in Quality Theme 1 Statement 1.

#### Areas for improvement

The areas for improvement identified in Quality Theme 1 Statement 1 are also relevant to this statement.

#### Grade

4 - Good

**Number of requirements - 0**

**Number of recommendations - 0**

### Statement 3

“To encourage good quality care, we promote leadership values throughout the workforce.”

#### Service Strengths

We thought that the service was performing to a good standard in the areas covered by this statement. We concluded this after we considered a range of

evidence presented in relation to this statement, including the self-assessment document submitted by the manager, supervision and training records. We also spoke with people using the service, the manager, project leader and some staff. Some of the strengths we saw included:

- Staff had access to a range of training to support them in their roles and were supported to achieve professional qualifications through the SVQ awards. Managers and some senior staff were registered with a relevant professional body. This meant that they were required to keep their learning and knowledge updated and ensure their practice met appropriate standards
- Staff that we spoke with confirmed that they had some opportunities to develop leadership skills through arranging and leading groups and key working. These roles carried responsibilities which could be assessed and contribute to the performance appraisals for staff.
- The provider had a good induction procedure in place for new staff and there were opportunities to work across other services in the group. This provided some opportunities for staff to take on additional responsibilities and develop confidence in various areas of practice.
- We saw that the service supported people to move into senior posts for those who show aptitude and are keen to progress professionally within the organisation. For example the current manager had moved into the post from a team leaders post and was supported by the provider to achieve the required management qualification for the post.

### Areas for improvement

In discussion, the project leader for the organisation described some very good examples of how leadership skills were supported within the service, however they needed to evidence how this worked within the service and improved staff knowledge and practice. We thought the service could do a number of things that would demonstrate their commitment to developing leadership skills for the staff group and for the people who use the service. One example might be in developing 'championship' roles for staff and service users. This would support people to improve their knowledge in specific areas of practice such as dementia, infection control or protecting people and offer opportunities for

them to demonstrate their knowledge and skills through guiding the practice of others.

We thought that the appraisals for staff were inadequate. The written records were very brief and mainly consisted of a note of appreciation from the provider of each staff member. There was no information in the records that indicated an analysis of staff skills, abilities or suggestions for on-going professional development had been discussed. These were key components for supporting staff development and in identifying and nurturing leadership skills for the staff group. Performance appraisals are one of the factors that contribute to staff training needs analysis and inform annual training plans for the service which helps the management to improve practice. **See Recommendations**

### Grade

4 - Good

**Number of requirements - 0**

### Recommendations

**Number of recommendations - 1**

1. The provider needed to ensure that annual performance appraisals for staff were completed on time and were meaningful for staff. These documents should record objective evaluation of individual performance which may highlight professional development needs. Implemented properly, regular performance reviews can raise individual self-esteem and can be an effective tool for improving employee performance.

**In making this recommendation the following National Care Standards for Support Services have been taken into account; Standard 2 - Management and Staffing Arrangements**



## 4 What the service has done to meet any requirements we made at our last inspection

### Previous requirements

There are no outstanding requirements.

## 5 What the service has done to meet any recommendations we made at our last inspection

### Previous recommendations

There are no outstanding recommendations.

## 6 Complaints

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

## 7 Enforcements

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

## 8 Additional Information

There is no additional information.

## 9 Inspection and grading history

Date	Type	Gradings	
15 Aug 2012	Unannounced	Care and support Environment Staffing Management and Leadership	5 - Very Good 6 - Excellent 6 - Excellent 6 - Excellent
15 Oct 2010	Announced	Care and support Environment Staffing Management and Leadership	5 - Very Good Not Assessed Not Assessed Not Assessed
7 Dec 2009	Announced	Care and support Environment Staffing Management and Leadership	5 - Very Good Not Assessed 5 - Very Good Not Assessed
31 Oct 2008	Announced	Care and support Environment Staffing Management and Leadership	5 - Very Good 5 - Very Good 4 - Good 5 - Very Good

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