

## Highland Council Housing Service

**Service name**

Highland Council Housing Service

**Service address**

21-23 Church Street

Inverness IV1 1DY

**Type of care service**

Housing Support Service

**Provider name**

Highland Council

**Service number**

CS2004075197

**Date of inspection**

6 December 2006

**Type of inspection**

Announced

**Care Commission Office**

39-41 Harbour Road, Inverness IV1 1UF

**Period since last inspection**

8 months

## **Introduction**

Highland Council Housing Support Service Inverness was first registered with the Care Commission on 30/08/2004. The service was managed by the Local Authority and provided a Housing Support Service for service users living in sheltered housing in Inverness and part of Beaully.

## **Basis of Report**

The manager completed an Annual Return prior to the inspection. This report was compiled following an announced inspection which took place over the period from 6/12/06 to 18/12//06. The CCO spoke with the manager, and 3 Sheltered Housing Wardens. A number of service users were consulted by telephone and one service user interview was conducted face to face. The inspection was based on the service's compliance with the Regulation of Care (Scotland) Act 2001, the additional themes of Safe Recruitment and SSSC Codes of Practice, as well as taking account of the following National Care Standards for Housing support-

Standard 2 Your Legal Rights

Standard 3 Management and Staffing

Standard 4 Housing Support Planning

Standard 6 Choice and communication

## **Action taken on requirements in last Inspection Reports**

There were no requirements made as a result of the last inspection.

## **Comment on Self-Evaluation**

The Self-evaluation had not been completed due to technical difficulties.

## **View of Service Users**

A sample of service users across the Sheltered Housing areas were provided with questionnaires. The responses were very positive regarding the service and the wardens in particular. Some comments have been included -

"the staff are very helpful and capable"

"everyone is super"

"I appreciate all my warden does for me"

"I feel safe and happy here"

"I find the warden very helpful, professional and respectful"

"I'm very happy"

"the warden service is excellent"

"wish we had a full-time warden service"

A concern was raised as to the 'out of hours' service by one service user. This was discussed with the manager and noted in the main body of the report.

### **View of Carers**

There were no carers interviewed as part of the inspection.

## **Regulations / Principles**

### **National Care Standards**

#### **National Care Standard Number 2: Housing Support Services - Your Legal Rights**

##### **Strengths**

There was a Sheltered Housing Tenancy Agreement which included the charges and arrangements to end the service. A copy was given to service users and a copy was held in the files. There was also comprehensive information within the Sheltered Housing Handbook which outlined the support service.

##### **Areas for Development**

#### **National Care Standard Number 3: Housing Support Services - Management and Staffing Arrangements**

##### **Strengths**

The service was inspected against this standard last year therefore this inspection focused mainly on the areas for development from the last inspection as well as monitoring record keeping and accident and incident recording.

A record of all contacts and significant information including accidents and incidents was maintained by the sheltered housing wardens.

The sheltered housing wardens had the opportunity to meet and to discuss new developments, guidance and practice issues.

The wardens were provided with a system of regular and responsive informal support and supervision and those who were interviewed advised that they felt they were provided with good support from the manager and assistant manager.

There was a training plan in place for the wardens.

The manager was aware of the SSSC requirements for registration and wardens had been provided with the Codes of Practice.

At the last inspection it had been identified that there was a need to develop aims and objectives which were specific to the sheltered housing service. An appropriate statement of aims and objectives had been developed.

An audit of the Service's Recruitment and Selection Policies and Procedures had been carried out by the Care Commission resulting in one requirement.

## **Areas for Development**

The provider to ensure the safe recruitment of staff, by obtaining two references from appropriate referees for each applicant; in accordance with their Recruitment Guidance and as part of a robust recruitment system.

It was agreed that the service providers should provide appropriate additional training for sheltered housing wardens in relation to mental health, alcohol, death and dying issues.

The service providers had developed a Personal Development Programme and formal programme of supervision and appraisal. This had not been implemented. The service should ensure that the Personal Development Programme is put in place.

It had been identified during the inspection and by the manager that there needed to be a rigorous system in place to ensure that wardens were informed of a service users return from hospital in order to ensure that the service user received their agreed housing support on their return to their home. The manager advised that this was currently being negotiated with NHS.

It had also been identified that wardens did not always receive information as to when a new service user moved in to a tenancy, resulting in service users experiencing delays in receiving a housing support service. The manager advised that new written procedures had now been developed which should ensure that this issue would be addressed.

A concern was raised by a service user in relation to the length of time it had taken for the 'out of hours' service to respond to calls.

The manager advised that this had been monitored previously and had been found to be satisfactory. However it was agreed that this should be monitored again to ensure that the 'out of hours' service was responsive to service user's needs.

## **National Care Standard Number 4: Housing Support Services - Housing Support Planning**

### **Strengths**

All Housing Support Plans had generally been completed by the wardens and in conjunction with the service users. All service users had or were to be provided with their plan. The sheltered Housing wardens who were interviewed demonstrated an awareness and sensitivity to service users in gathering information especially around sensitive issues.

A review of service users' details had been completed and information updated.

**Areas for Development**

The service intended to put a system of 6 monthly review in place.

**National Care Standard Number 6: Housing Support Services - Choice and Communication****Strengths**

Service users were provided with a comprehensive Housing Support Handbook which was clearly written. The wardens took time to go over this information with new service users. There was Housing Support Plans in place which recorded the service users' wishes in relation to the housing support service. Service users spoken with were satisfied with the information provided.

**Areas for Development**

**Enforcement**

None

**Other Information****Requirements**

1. The provider to ensure the safe recruitment of staff, by obtaining two references from appropriate referees for each applicant; in accordance with their Recruitment Guidance and as part of a robust recruitment system.

This is in order to comply with:

SSI 2002/114 Regulation 9 - a requirement to ensure the fitness of persons employed in a care service.

Timescale for implementation: Immediate on receipt of this report.

**Recommendations**

1. Additional training for sheltered housing wardens should be provided in relation to mental health, alcohol, death and dying issues.

2. The service should ensure that a rigorous system is agreed and implemented in relation to wardens being notified of service users return from hospital.

3. The 'out of hours' service should be monitored again to ensure that it is responsive to service user's needs.

Standard 3 Management and Staffing Arrangements

**Janice Fleming**

**Care Commission Officer**