

C-Change Scotland Housing Support Service

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Type of inspection:

Unannounced

Completed on:

16 January 2019

Service provided by:

C-Change Scotland

Service provider number:

SP2004006578

Service no:

CS2004070912

About the service

The Care Inspectorate regulates care services in Scotland. Information about all care services can be found on our website at www.careinspectorate.com

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

C-Change Scotland provides a housing support and care at home service to adults and young people (aged 5-16) with learning disabilities and/or physical disabilities or mental health issues. The service is managed by C-Change Scotland which is a registered Scottish charity. The organisation's head office is based in Glasgow.

C-Change provides individualised support to people who may live in their own home or live within the family home. Support provided to people ranged from a few hours a week to 24 hours a day. At the time of the inspection the service was provided to 18 people in Glasgow, 28 people in North Lanarkshire and five people in Falkirk/West Lothian. At the time of the inspection, only adults were receiving the service.

The registered manager and practice and development leader co-ordinate the overall running of the service with support from area leads. Support advisors work alongside the people who use the service while locally managing the staff team of personal development workers who provide direct support to people.

The aim of the service is: "to offer creative and flexible support, enabling people who use the service to have a good quality of life, while maximising the life opportunities".

What people told us

We gathered feedback from people who were using the service and their families or representative. Overall feedback was very positive - comments included:

"They help me cook dinner, write a list, go shopping. It's made a big difference - I feel happier, I wouldn't change anything."

"I always know who's coming, it's never someone I don't know."

"I wouldn't make any changes. It's not broken so don't try to fix it."

"I'm still interviewing staff from my service. I get involved - see if there's a match."

"I think it's excellent. Staff are great."

"It's always been a consistent team. They build relationships with individuals which means more security. He was anxious and insecure but now has a routine and is getting out to age appropriate activities. He is very much at the centre of everything."

Self assessment

Services were not required to complete a self assessment this year.

From this inspection we graded this service as:

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

What the service does well

People have the right to experience warmth, kindness and compassion in the way they are supported and cared for. People spoke highly of the Personal Development Workers (PDWs) providing their support. We observed warm, respectful interactions between people and their workers. Each person had their own team recruited to match their needs and wishes that worked in partnership with them to ensure as many positive experiences as possible. A family carer we spoke to told us how they as a family had benefitted from the flexible approach taken by their relative's team.

People experiencing care should be able to choose to have an active life and participate in a range of activities. People were supported to participate in their local community in the way they wanted and to become a valued part of it, known by neighbours and at local shops. We heard of many examples of good outcomes as a result such as a person's increased confidence from attending clubs and making friends, a person feeling happier and more independent because their living skills had improved, increased health and wellbeing by getting out and about to places of interest both near home and further afield. One person told us they "wouldn't still be here if it wasn't for C-Change". Some people have been able to reduce the level of support they require because they have become more independent and confident.

Care plans are right for people if they set out how a person's needs will be met, as well as their wishes and choices. The working policies (care plans) we looked at contained person centred information and it was clear that there had been involvement with each person and/or their representatives to produce them. There was a good level of detail regarding supports and how these should be delivered to promote levels of independence and to achieve positive outcomes.

We found good evidence of partnership working with professionals and staff being proactive when they noticed changes in a person's health. We heard of very good health outcomes for one person through staff advocating on their behalf to ensure they received the right health intervention which has resulted in a greatly improved quality of life for the person.

People experiencing care should be supported by a service and organisation that are well-led and managed. Management and leadership in this service were very good. Area Leads and Support Advisors were very positive about their role and the support they received to do it. People receiving support knew and liked managers. PDWs demonstrated a very good value base and were proud to be associated with the organisation and said they felt valued by managers.

There were very good quality assurance systems to continually monitor the quality of the service to ensure the best possible outcomes for people experiencing care. A good range of quality audits was being carried out including a 'peer type review' of colleagues' work in other locations. Quality assurance systems also meant that

staff were supported to be competent in their role. Planned staff support and development sessions were used constructively to improve practice and therefore outcomes for people.

People should benefit from a culture of continuous improvement. Support Advisors said they were given good scope for developing aspects of their own role and the service. The organisation was working towards self managing teams - already accountability was evident, for example, teams compiling their own rotas and additional responsibilities given to individual staff. A positive development was the appointment of a new service development coordinator who had a role in improving quality which included ensuring that people's teams continued to meet their needs and created enough opportunities to connect with their community.

A development plan had been drawn up that had a focus on the support people received and the mechanisms that influenced this. Local plans showed that a considerable amount of work had been done to support people's aspirations and achievements.

What the service could do better

We discussed with managers ways in which working policies (care plans) and other records could be improved to avoid duplication and to capture outcomes and what was being achieved or the impact on the person. We have also asked that a copy of recent review minutes are held in each person's file.

Some support advisors told us they occasionally carried out spot checks on teams as a quality assurance measure. However direct observations of staff practice tended to be during the probationary period for new staff or if there had been an issue, rather than in a systematic way. It was encouraging to hear that the new service development coordinator would be addressing this as part of her role in quality assurance.

We found that not all PDWs we spoke to were familiar with the new Health and Social Care Standards. Although staff had been issued with a copy, they had not specifically been used to shape staff development or team meetings. We were pleased to hear that this is something managers will address, possibly through a practice learning session.

During the inspection it was difficult to ascertain how managers had an overview of some areas such as the frequency of reviews, support and development sessions and training but acknowledge that a new electronic system is currently being developed that will provide reports to appropriate managers. We will look at the impact of this at the next inspection.

We discussed with managers the need for development plans to be continuous and to include timescales for actions to be completed so that success can be measured or the need to make decisions if further changes are needed.

Requirements

Number of requirements: 0

Recommendations

Number of recommendations: 0

Complaints

There have been no complaints upheld since the last inspection. Details of any older upheld complaints are published at www.careinspectorate.com.

Inspection and grading history

Date	Type	Gradings
16 Mar 2018	Unannounced	Care and support 5 - Very good Environment Not assessed Staffing 5 - Very good Management and leadership Not assessed
1 Mar 2017	Announced (short notice)	Care and support 5 - Very good Environment Not assessed Staffing Not assessed Management and leadership 5 - Very good
17 Mar 2015	Unannounced	Care and support 4 - Good Environment Not assessed Staffing 5 - Very good Management and leadership 4 - Good
12 Mar 2014	Unannounced	Care and support 5 - Very good Environment Not assessed Staffing 5 - Very good Management and leadership 5 - Very good
26 Sep 2012	Unannounced	Care and support 5 - Very good Environment Not assessed Staffing 5 - Very good Management and leadership 5 - Very good
6 Oct 2011	Unannounced	Care and support 5 - Very good Environment Not assessed Staffing 5 - Very good Management and leadership Not assessed

Date	Type	Gradings	
1 Dec 2010	Announced	Care and support Environment Staffing Management and leadership	5 - Very good Not assessed Not assessed Not assessed
22 Dec 2009	Announced	Care and support Environment Staffing Management and leadership	5 - Very good Not assessed 2 - Weak Not assessed
10 Feb 2009	Announced	Care and support Environment Staffing Management and leadership	5 - Very good Not assessed 5 - Very good 5 - Very good

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