



East Ayrshire
COUNCIL

SOCIAL WORK INSPECTION UNIT

INSPECTION REPORT AND SUMMARY REPORT

KEY HOUSING KILMARNOCK

**Date of Inspection:
17th February, 2000**

W.J. Duncan
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INSPECTION INFORMATION

NAME OF ESTABLISHMENT: Key Housing

LOCATION OF ESTABLISHMENT: Kilmarnock

MANAGING ORGANISATION: Key Housing Association Ltd

CATEGORY (as per Registration): Adults with Learning Disabilities
some of whom also have physical disabilities

**MAXIMUM NUMBER OF RESIDENTS
TO BE ACCOMMODATED (as per Registration):** 16

**NUMBER RESIDENTS/ATTENDING
AT TIME OF VISIT:** 16

NATURE OF INSPECTION Short, focussed, unannounced

INSPECTOR(S) PARTICIPATING: Mina Cassidy
George Stewart

DATE(S) OF INSPECTION: 17th February 2000

DATE OF LAST INSPECTION REPORT: 23rd March 1999

**FOR FURTHER INFORMATION ON
THIS ESTABLISHMENT CONTACT** Liz Sneddon
Key Housing
Kilmarnock
01563 532930

QUALITY OF RECORDS

1. Sampled Case Files

(a) Recommendations in last report

None

(b) Findings at this Inspection - Progress

None

(c) Additional Inspectors observations at this Inspection

Four case files examined including that of the most recent tenant. As found in previous inspections case files provided good quality information which was well laid out. There is evidence of tenants' participation in compiling information such as 'Who I am'. However although support plans are very clearly focused on what the tenants perceive as their need for support in specific areas they do not, in the main, include aims or goals. It is therefore difficult to understand how tenants support plans can be reviewed effectively without measuring the tenants personal development. **It is recommended that all support plans should include clearly defined objectives/goals.**

2. Sampled Financial Records

(a) Recommendations in last report

None

(b) Findings at this Inspection - Progress

(c) Additional Inspectors observations at this Inspection

Not inspected on this occasion.

3. Other records including specific comment on Fire Safety records and Medication records

(a) Recommendations in last report

It is recommended that the next action plan give a proposed timescale for the completion of a complaints procedure which is accessible to people with learning disabilities.

It is recommended that the Unit take steps to address the gaps identified in Health and Safety practice.

It is recommended that a maintenance recording system be developed that allows accessibility by staff and for the time taken to deal with outstanding repairs to be easily tracked.

(b) Findings at this Inspection - Progress

Complaints Procedure – The Depute unit Manager informed inspectors that the development of a “non-literate” version was still being processed by the organisation’s Tenants Advisory Group which is a national organisation.

The previous recommendations regarding the implementation of a form of the complaints procedure adapted to resident needs are re-iterated.

Health and Safety Records – The Depute Unit Manager informed Inspectors that there has been no progress made in the development of risk assessments for areas of activity and general hazards which are specific to the Unit. **It is recommended that risk assessments are carried out as a matter of priority.**

COSHH Assessments – The Depute Unit Manager informed Inspectors that the recommendation regarding the undertaking of COSHH assessments has not been progressed. **It is recommended that COSHH assessments are undertaken for all potentially hazardous chemicals and the results shared with staff and those tenants who use materials.**

Building Maintenance Record – The Inspectors noted that an appropriate system for recording and tracking maintenance and repair issues is now in place.

(c) Additional Inspectors observations at this Inspection

The unit has failed to make reasonable progress on three issues identified in previous reports under this heading. This is despite an action plan outlining proposed timescales for completion. **This level of action is unacceptable and the unit is urged to make progress on all issues identified as a matter of urgency.**

QUALITY OF MANAGEMENT AND STAFFING

1. Communication systems within the staff group

(a) Recommendations in last report

None

(b) Findings at this Inspection - Progress

(c) Additional Inspectors observations at this Inspection

The minutes or schedules of staff meetings were not examined in this inspection. The three members of staff interviewed stated that regular meetings did take place. However, during these interviews it became clear that the Unit worked in two distinct teams and that each team met on a regular basis but not as one full staff group. In addition it is apparent that each team does not possess all the information about the care needs of tenants normally cared for by the other team. On a few occasions according to staff their interventions when working in a different team might have been improved had they been more aware of such information. There was no indication that any serious difficulties had arisen due to this but managers are nevertheless advised to review current communication arrangements between the staff teams.

The term 'support' is used extensively throughout the residents case files and also features prominently in both written and verbal communication. However, there is an absence of detail of the specific level of support given or required by residents which results in lack of clarity. **It is recommended that staff interventions are recorded in more detail.**

2. Staffing Levels

(a) Recommendations in last report

None

(b) Findings at this Inspection - Progress

(c) Additional Inspectors observations at this Inspection

Inspectors noted that there are two full time staff vacancies. Cover for these positions has been provided predominately from the core staff group. This additional expectation appears to have come at a time when there has been high incidence of staff sickness.

It is recommended that additional resources are used to fill existing vacancies while recruitment process is ongoing.

3. Staff Training and Qualifications

(a) Recommendations in last report

None

(b) Findings at this Inspection - Progress

(c) Additional Inspectors observations at this Inspection

Not examined at this inspection.

QUALITY OF PHYSICAL ENVIRONMENT

1. Compliance with space standards

- (a) Recommendations in last report
None
- (b) Findings at this Inspection - Progress
- (c) Additional Inspectors observations at this Inspection
Not examined at this inspection.

2. Heating levels (including water temperature control)

- (a) Recommendations in last report
It is recommended that appropriate action is taken to ensure that variations in hot water temperature is addressed.
- (b) Findings at this Inspection - Progress
Variations in water temperature have been noted as still occurring, monitoring of water temp should continue.
- (c) Additional Inspectors observations at this Inspection

3. Hygiene and cleanliness

- (a) Recommendations in last report
None
- (b) Findings at this Inspection - Progress
- (c) Additional Inspectors observations at this Inspection
Communal areas inspected appeared to be clean and hygienic.

4. Safety of the environment

- (a) Recommendations in last report
None
- (b) Findings at this Inspection - Progress

- (c) **Additional Inspectors observations at this Inspection**
The recommendations made in section 3(b) Other records including specific comment on Fire Safety records and Medication records are reiterated.

5. Fabric and decor standards

- (a) **Recommendations in last report**
None
- (b) **Findings at this Inspection - Progress**
- (c) **Additional Inspectors observations at this Inspection**
Not examined at this inspection.

6. Standards of building maintenance

- (a) **Recommendations in last report**
None
- (b) **Findings at this Inspection - Progress**
- (c) **Additional Inspectors observations at this Inspection**
Not examined at this inspection.

QUALITY OF CARE ARRANGEMENTS

1. Care System: Methods for Individual Care Planning and Review

- (a) **Recommendations in last report**
None
- (b) **Findings at this Inspection - Progress**
- (c) **Additional Inspectors observations at this Inspection**
The recommendations made in 1c Sampled Case Files are reiterated.

2. Quality of Menus and Catering arrangements

(a) Recommendations in last report

None

(b) Findings at this Inspection - Progress

(c) Additional Inspectors observations at this Inspection

Tenants both within the group of living situations and individual tenancies participate in choosing, shopping and preparation of meals as part of their support plans.

3. Quality of activity programmes

(a) Recommendations in last report

None

(b) Findings at this Inspection - Progress

(c) Additional Inspectors observations at this Inspection

Additional programmes continue to be comprehensive and flexible and tailored to meet individual need.

INSPECTORS FINDINGS ON OTHER VIEWS

1. Staff views expressed

(a) Recommendations in last report

None

(b) Findings at this Inspection - Progress

(c) Additional Inspectors observations at this Inspection

Three members of staff were interviewed, each of whom were positive about their experience of working with Key Housing Association. However Inspectors noted that staff seemed not entirely clear about how their role linked to the role of other professionals involved with tenants.

3. User/Carer views

(a) Recommendations in last report

None

(b) Findings at this Inspection - Progress

(c) Additional Inspectors observations at this Inspection

The Inspectors had the opportunity to speak to two tenants in the privacy of their own homes.

EAST AYRSHIRE COUNCIL - SOCIAL WORK INSPECTION UNIT

SUMMARY INSPECTION REPORT

**Key Housing
17th February 2000**

Summary of Inspection

Key Housing Kilmarnock is a purpose built unit which provides residential accommodation to 16 adults with learning disabilities. The aim of the organisation is to “provide Good Quality Accommodation” with “Appropriate Support from Workers” and “Local Community Links”, to provide tenants with the opportunities for “Personal development, Real Integration, Relationships, Real Choices and Participation.”

Tenants live in small self-contained units of four people. There are, in addition, four individual tenancies. The tenants are supported by staff within their own homes, operating on a key worker system.

Inspectors examined a number of documents as part of this inspection. The quality varied from one document to another. Information used to assist in planning the care of residents is good to a point.

The Tenancies continue to be maintained to a high standard. Fabric and décor standards are high without creating the impression that the flats have not been lived in.

Inspectors noted that staff work within two district teams. Discussion with staff indicated that benefits might be gained by reviewing the frequency and nature of dialogue between the two staff groups.

Previous recommendations carried forward:

Unit Name

Inspection Reference

10

1. It is recommended that a maintenance recording system be developed that allows accessibility by staff and for the time taken to deal with outstanding repairs to be easily tracked.

Further recommendations

- It is recommended that all support plans should include clearly defined objectives/goals.
- The previous recommendations regarding the implementation of a complaints procedure suitable adapted to the needs of residents is reiterated.
- It is recommended that risk assessments are carried out as a matter of priority.
- It is recommended that COSHH assessments are undertaken for all potentially hazardous chemicals and the results shared with staff and those tenants who use the materials.
- It is recommended that staff interventions are recorded in more detail.
- It is recommended that additional resources are used to fill existing vacancies while recruitment process is ongoing.

Commendations

Head of Inspection Unit: Additional Comments

It is noted that following the inspection it is reported that training for Managers on Health and Safety was undertaken and that specific risk assessments were undertaken for individual clients. Work on COSHH assessments is also reported as being completed.

LEAD INSPECTOR:

SIGNATURE: _____ **Date** _____

COUNTERSIGNED BY HEAD OF UNIT: W J Duncan

SIGNATURE: _____ **Date** _____

AGENDA
