

Gateway Housing Support Service

David Whyte House
57 Church Street
Inverness
IV1 1DR

Telephone: 01463 718 693

Type of inspection:
Unannounced

Completed on:
30 May 2023

Service provided by:
Highland Homeless Trust

Service provider number:
SP2004006662

Service no:
CS2004073164

About the service

Gateway is registered with the Care Inspectorate to provide a combined housing support and care at home service for people living in their own homes in the community. The provider of the service is Highland Homeless Trust.

The service inspected, provides outreach housing and care support to people living in the community, and offers supportive housing support services within various accommodations in the Inverness and Invergordon areas. This includes support to young people transitioning from children's services, and unaccompanied asylum seeking children or young people.

About the inspection

This was an unannounced which took place between 16 and 24 May 2023. The inspection was carried out by one inspector from the Care Inspectorate.

To prepare for the inspection we reviewed information about this service. This included previous inspection findings, registration information, information submitted by the service and intelligence gathered since the last inspection.

In making our evaluations of the service we:

- spoke with eight people using the service and five of their family representatives;
- spoke with fifteen staff and management;
- observed practice and daily life;
- reviewed documents;
- spoke with seven visiting professionals.

Key messages

The service was well led.

Leaders and staff demonstrated good values in their work with people.

People experienced compassion, dignity and respect.

Where people accepted the support provided by the service they made progress.

People received support to improve their health outcomes.

People were being supported to get the most out of life.

Staff and management worked well with their health and social care partners to help people access the right support.

From this inspection we evaluated this service as:

In evaluating quality, we use a six point scale where 1 is unsatisfactory and 6 is excellent

How well do we support people's wellbeing?	5 - Very Good
How good is our leadership?	5 - Very Good

Further details on the particular areas inspected are provided at the end of this report.

How well do we support people's wellbeing?

5 - Very Good

We found significant strengths in the care and support provided by Gateway and how this supported positive outcomes for people. We therefore evaluated this key question as very good.

We found that people experienced warm and compassionate support from staff. People were encouraged to establish professional relationships with their staff teams, that then enabled individuals to benefit from their support.

The people we spoke with felt respected and listened to. One person told us "the staff are brilliant" and "they properly listen to me", and described how this had made a big difference to his own progress and what he had been able to achieve. Everybody we spoke with told us that staff were supportive, approachable and were responsive to any requests they made for assistance. People felt that staff treated them well, and engaged with them in a professional, friendly manner. People were being positively encouraged to accept support, and to direct how their individual support time would be used. Staff worked supportively to engage with people who were not accepting of their need for support and who as a consequence were vulnerable or be at risk of harm. Although the service had experienced staff turnover, people did experience service delivery from distinct support teams. This supported people by ensuring that staff understood their needs, and were knowledgeable about their wishes and preferences.

People got the most out of life. Staff engaged with people in a way that encouraged independence and individual responsibility. Individualised support was focussed on supporting people towards better outcomes, i.e. housing, but also in terms of developing independent living skills, budgeting, and supporting activities and interests which promote skill development. This meant that the care and support being offered considered people's holistic needs rather than just their need for accommodation. The opportunity to take part in activities, both indoors and within the community meant that people were being encouraged to live an active life. Recently the provider had increased their focus on how activities could be encouraged throughout their range of services. This has enabled opportunities for involvement in enjoying the local countryside, participating in walks, as well as accessing ordinary places in the community, to benefit wellbeing and social engagement.

People living in the supported housing units spoke positively about the environment within their supported accommodation. People told me that they felt safe and relaxed in their private space and could access assistance if they needed to do so. In the units with communal areas some people told me that they appreciated being able to spend some time with others, including staff, for companionship or conversation. We observed that communal areas in the supported living accommodation were being kept clean, tidy and maintained which reflected provision in line with people's rights and expected standards. Environmental cleanliness was being supported by cleaning schedules and records, which were being reviewed as part of service oversight. Throughout the Covid-19 pandemic staff were given training in infection prevention and control, about Covid and in the use of PPE.

People's health and wellbeing was benefitting from their support. Management and staff at Gateway engaged well with the multi agency team who commission their services on behalf of people, or who have statutory responsibilities to monitor individual service provision. We heard that the service take appropriate cognisance of statutory decision-making powers, and defer any decisions appropriately. The service has good arrangements in place to support people who need help with managing their money. There are clear

procedures in place, with good checks and balances along the way to keep people safe. It was also evident that the service would advocate for a person's rights, and speak out on their behalf, if this was required.

Overall support plans were of a good standard and would inform staff as to how to deliver support. Person centred risk assessments were also in place. The provider made use of outcome and support star tools to involve people in assessing and planning their own support plans, and subsequently in reviewing their progress. Plans were generally good, and up to date, and some were of a very good standard. However, in a small number of plans there were some examples of inconsistencies in the information. These needed review, to avoid any confusion in how support should be delivered. There was also an example where the service support plan had not been completed, with instead use being made of the overarching plan prepared by the lead agencies. The provider should use their quality assurance processes to embed consistency in support plans. (See key question 2 area for improvement 1).

People were getting a range of supports to help them manage their own health care needs. Staff provided individualised support to enable people to appropriately access health care professionals. People were also supported with managing their medication needs and appropriate systems and records were being used to ensure safe practice. While for most people this was by way of a prompt, we have suggested that the service should check to make sure that assessed needs, individual support plans, and medication policy and guidance regarding levels of support all correlate.

Management and staff supported people to make choices and there was a pragmatic understanding of people's situation. Staff did not place unreasonable expectations on people, and while there were consequences of certain actions, staff also displayed empathy and acceptance, within appropriate parameters. There was, however, a positive emphasis on responding appropriately to any concerns and implementing protocols, that then kept people, including staff safe.

How good is our leadership?

5 - Very Good

We made an overall evaluation of very good in relation to leadership in the service, and how this supported positive outcomes for people.

This service benefits from effective management and strong leadership. Staff were well led. There were clearly understood roles, responsibilities and accountability. Staff had access to support and guidance at all times when they were working. Staff we spoke with told us that they were being well supported by the senior leadership and management in the service. There was a positive ethos of care and compassion in the service and this underpinned their service delivery. While recruitment and turnover remained a challenge, the service was currently fully staffed, and able to reliably fully cover their current commitments.

Service leaders understood people's needs and were well informed about changes in people's needs or circumstances. This meant that they were well placed to escalate concerns, or adjust support accordingly. There was a thoughtful and detailed approach to progressing new referrals, to be sure that they had an appreciation of each person's support needs, and could evaluate how this fitted with their own provision. This enabled a positive approach to making sure that people using the service were provided with the right care and support.

Quality assurance and improvement was being well led in this service. Where issues were identified, actions were planned, and followed through. A new compliance role will undoubtedly strengthen how they internally check all aspects of service delivery to make sure that they are meeting the required standards,

and that people are having the best outcomes. These processes should be used to their full effect to further strengthen support planning and ensure that the very good standards observed in most support plans were consistently maintained throughout the service. (See area for improvement 1).

There were very good systems in place to support governance. We observed a number of processes such as regular supervisions and appraisals, staff meetings, training analysis, review of accidents and incidents, external engagement with other organisations, all contributing to this overall arching managerial oversight. The provider was making good use of core assurance audits to comprehensively check compliance across service provision.

Staff surveys were used to hear feedback from staff about their experience of working in the organisation. It was evident that the information received was then used to inform improvements.

The service has a generally good training plan in place, and that there was an effective approach to ensuring that mandatory training was being completed. We concluded that given some changes to service provision, and to the staff team because of ongoing recruitment, that this would be a good time to review staff training needs, so as to ensure that all staff had access to the relevant training.

We had some discussion with service management regarding the use of CCTV technology in the 24 supported accommodation units. It would be good practice for the service provider, in conjunction with partner organisations, to review its use. This would be to ensure that practice was informed by clear guidance, and by a proportionate approach as to when it was considered beneficial.

Areas for improvement

1. The provider should continue to develop strong leadership and staff competency by embedding regular use of quality assurance processes around support planning documents. This should include checking that support plans are prepared within the relevant timescales, and that any identified outstanding actions, are timeously addressed.

This is to ensure care and support is consistent with the Health and Social Care Standards (HSCS) which state that,

"I experience high quality care and support based on relevant evidence, guidance and best practice." (HSCS 4.11).

What the service has done to meet any areas for improvement we made at or since the last inspection

Areas for improvement

Previous area for improvement 1

The service should review and improve weekly service managers' reports to ensure accurate and concise information is recorded. The review should examine the language used in said reports to prevent

disparaging comments and pessimistic views. All incidents should be timeously escalated to appropriate bodies.

This area for improvement was made on 2 August 2021.

Action taken since then

The provider had recognised the need to ensure quality assurance processes were used to improve the standard of some reports used to monitor and oversee people's support. Additional processes, which remain ongoing, were implemented, and these have successfully addressed the issue. Feedback from partner organisations confirm that issues are escalated, and notifications made as they require, and as appropriate to their statutory role and function.

Previous area for improvement 2

The service should review and improve quality assurance systems to ensure concerns and complaints are adequately investigated and resolved to the satisfaction of the complainant. The service should fully investigate and identify where procedures have not been adhered to and implement measures to ensure staff awareness of specific processes.

This area for improvement was made on 2 August 2021.

Action taken since then

The provider has strengthened their quality assurance processes. This included appointing a compliance officer to carry out regular audits across all areas of service provision. This has enhanced the frequency and regularity within which checks can be carried out.

We checked that the service took appropriate action in situations where any concern had been expressed. While these were very infrequent, we were confident that staff with responsibility in these areas understood the steps they should take, and followed good practice.

Complaints

Please see Care Inspectorate website (www.careinspectorate.com) for details of complaints about the service which have been upheld.

Detailed evaluations

How well do we support people's wellbeing?	5 - Very Good
1.1 People experience compassion, dignity and respect	5 - Very Good
1.2 People get the most out of life	5 - Very Good
1.3 People's health and wellbeing benefits from their care and support	5 - Very Good

How good is our leadership?	5 - Very Good
2.2 Quality assurance and improvement is led well	5 - Very Good

To find out more

This inspection report is published by the Care Inspectorate. You can download this report and others from our website.

Care services in Scotland cannot operate unless they are registered with the Care Inspectorate. We inspect, award grades and help services to improve. We also investigate complaints about care services and can take action when things aren't good enough.

Please get in touch with us if you would like more information or have any concerns about a care service.

You can also read more about our work online at www.careinspectorate.com

Contact us

Care Inspectorate
Compass House
11 Riverside Drive
Dundee
DD1 4NY

enquiries@careinspectorate.com

0345 600 9527

Find us on Facebook

Twitter: @careinspect

Other languages and formats

This report is available in other languages and formats on request.

Tha am foillseachadh seo ri fhaighinn ann an cruthannan is cànan eile ma nithear iartras.

অনুরোধসাপেক্ষে এই প্রকাশনাটি অন্য ফরম্যাট এবং অন্যান্য ভাষায় পাওয়া যায়।

یہ اشاعت درخواست کرنے پر دیگر شکلوں اور دیگر زبانوں میں فراہم کی جاسکتی ہے۔

ਬੇਨਤੀ 'ਤੇ ਇਹ ਪ੍ਰਕਾਸ਼ਨ ਹੋਰ ਰੂਪਾਂ ਅਤੇ ਹੋਰਨਾਂ ਭਾਸ਼ਾਵਾਂ ਵਿਚ ਉਪਲਬਧ ਹੈ।

هذه الوثيقة متوفرة بلغات ونماذج أخرى عند الطلب

本出版品有其他格式和其他語言備索。

Na życzenie niniejsza publikacja dostępna jest także w innych formatach oraz językach.

Gateway Housing Support Service and Care at Home Service Housing Support Service

57 Church Street
Inverness
IV1 1DR

Telephone: 01463 718 693

Type of inspection:
Unannounced

Completed on:
22 June 2023

Service provided by:
Highland Homeless Trust

Service provider number:
SP2004006662

Service no:
CS2017361506

About the service

Gateway Housing Support and Care at Home Service currently provides supported housing and care at home to people with additional support needs living in three shared houses in Inverness.

They also provide housing support and care at home to people living in their own homes in Inverness and Gairloch.

The provider of the service is Highland Homeless Trust.

About the inspection

This was an unannounced inspection which took place from 12-20 June 2023. The inspection was carried out by one inspector from the Care Inspectorate.

To prepare for the inspection we reviewed information about this service. This included previous inspection findings, registration information, information submitted by the service and intelligence gathered since the last inspection.

In making our evaluations of the service we:

- spoke with 17 people using the service and ten of their family representatives;
- spoke with 20 staff and management;
- observed practice and daily life;
- reviewed documents;
- spoke with four visiting professionals;
- observed staff practice as well as daily life in shared accommodation.

Key messages

- The service benefited from effective leadership and management who maintained good oversight of people's support.
- There were warm and caring interactions between staff and people experiencing care.
- People receiving services experienced reliable support and enjoyed good relationships with their carers.
- People living in supported accommodation were being supported to get the most out of life.
- Families were happy with the care and support their loved ones received.
- Communication within the service, and with other agencies and individuals, was generally very good.
- The provider has a responsive approach to service development and improvement, including when things have not gone well.

From this inspection we evaluated this service as:

In evaluating quality, we use a six point scale where 1 is unsatisfactory and 6 is excellent

How well do we support people's wellbeing?	5 - Very Good
How good is our leadership?	4 - Good

Further details on the particular areas inspected are provided at the end of this report.

How well do we support people's wellbeing?

5 - Very Good

We found significant strengths in the care and support provided by Gateway and how this supported positive outcomes for people. We therefore evaluated this key question as very good.

Gateway demonstrated care and compassion in their service delivery, and in how they engaged with people .

People told us that staff interacted warmly and respectfully with them. Staff had encouraging conversations with people, and people enjoyed their company. People did not feel rushed by staff when being supported. Care and support was carried out in a dignified way, with personal preferences respected. Staff teams across the service knew people well thereby offering continuity and consistency of support. New staff were carefully inducted, so that people could get to know them, and feel confident that their needs were understood.

People we spoke to were satisfied with the quality of the care and support received. The service was described as being reliable, and late or missed visits were not an issue. Individuals experiencing visiting support said their visits were planned to take place at times that best suited their needs, and fitted in with their routines. People told us that the service were flexible, and tried to accommodate any changes requested. People were usually advised if care staff occasionally ran late. It was also evident that trusting professional relationships had been established with staff, and that people's views and wishes were taken account of in planning their support. These strengths meant that people were confident in the organisation, and their support delivery.

People were very well supported with their health and wellbeing. Staff were well informed about people's health needs and responded appropriately to any changes observed. The service worked very well with their health and social care colleagues, making referrals timeously, and being proactive in requesting additional support when necessary. People living in supported accommodation received the assistance they needed to attend medical appointments, and to follow any health related guidance received. The service had suitable and safe systems in place for medication support, and appropriate records were kept detailing the support provided. This enabled people to get the right support or intervention, and to maintain their health and well being as far as was possible.

Communication was generally described as being good by people experiencing care, their relatives and other professionals. Having identified where this could be further improved, the service were taking steps to address this.

People's support was informed and directed by very good support plans. These were detailed and easy to follow. Plans clearly explained how support should be delivered. Care reviews were regularly carried out, and people were appropriately involved in these, and given an opportunity to share their views. Multi-disciplinary colleagues who were part of people's support circle were involved in reviews, and any guidance received was incorporated into the support plan. While most reviews had been carried out, there were a small number that were overdue and needed to be completed.

People were supported to get the most out of life, and were centrally involved in their own support planning. People's abilities and confidence was encouraged and supported by the staff. Staff had a good understanding of people's rights, and of people's ability to make decisions regarding their own health and welfare. Within the supported accommodation people's confidence in themselves was boosted through

developing skills such as independent travel, cooking, managing money, as well as getting on with the day to day matters of life, for example, shopping, looking after their home and socialising. People living in supported accommodation benefitted from being able to use their support to enjoy trips and holidays. This enabled people to broaden their horizons, and enjoy the ordinary pleasures of visiting new places and attending special events.

The service had effective measures in place to support infection prevention and control (IPC) and minimise the chances of transmission. Staff had received guidance and training on IPC. They understood when it was necessary to wear personal protective equipment and they were kept up to date with any changes in guidance. People living in supported accommodation benefitted from good quality housing which was well looked after, and where there was the necessary support to help maintain good standards of environmental cleanliness.

How good is our leadership?

4 - Good

We made an overall evaluation of good in relation to leadership in the service, and how this supported positive outcomes for people. We evaluated this key question as good where strengths impacted positively and clearly outweighed areas for improvement.

This service benefits from effective management and strong leadership. Staff were well led across the different teams and geographical areas that the service were operating in. There were clearly understood roles, responsibilities and accountability. Staff had access to support and guidance at all times when they were working. Staff told us that they were well supported by the senior leadership and management in the service. There was a positive ethos of care and compassion in the service and this underpinned their service delivery. While recruitment and turnover remained a challenge, the service was currently fully staffed, and able to fully cover their current commitments.

Service leaders understood people's needs. They were kept informed about changes in people's needs or circumstances. This meant that they were well placed to escalate concerns, or adjust support accordingly. There was a thoughtful and detailed approach to progressing new referrals, to be sure that they had an appreciation of each person's support needs, and could evaluate how this fitted with their own provision. This enabled a positive approach to making sure that people using the service were provided with the right care and support.

There were very good systems in place to support governance. There were a number of processes such as staff meetings, training analysis, review of accidents and incidents, engagement with statutory organisations, all contributing to managerial oversight. Although some catch up was required, good use was made of supervisions and appraisals to support this process.

Staff surveys were used to hear feedback from staff about their experience of working in the organisation. It was evident that the information received was then used to inform improvements.

The service has a generally good training plan in place, and that there was an effective approach to ensuring that mandatory training was being completed. We observed that there was a proactive approach to accessing training from other specialists, relevant to the needs of those they support. There could be some benefit from auditing staff training to ensure that all necessary training refreshers have been achieved within the relevant timescales.

Quality assurance and improvement was being well led in this service. A new compliance position has been established and this will undoubtedly strengthen their ability to regularly check all aspects of service delivery. The provider was making good use of core assurance audits to comprehensively check compliance across service provision. All this will support them to make sure that they are meeting the required standards, and that people are having the best outcomes.

Where issues had been identified, actions were planned, and followed through on. This included where things had not gone well. We were satisfied that the service had implemented a lessons learnt approach to help them identify where they needed to strengthen the systems and processes that enable people to enjoy holidays and trips away. They have shared a comprehensive action plan with us which they should continue to progress and fully embed the changes into standard practice. **(See area for improvement 1).**

Areas for improvement

1. To ensure people have consistently positive experiences, the provider should implement and use their action plan to enhance and inform how they plan and oversee holidays and trips.

This is to ensure that care and support is consistent with the Health and Social Care standards which state that;

'My care and support is provided in a planned and safe way, including if there is an emergency or unexpected event'. (HSCS 4.14).

What the service has done to meet any areas for improvement we made at or since the last inspection

Areas for improvement

Previous area for improvement 1

The provider should develop a quality assurance process to ensure that all staff meet the legal requirements for recording care. This should include signing care records when a topical medication is applied. The use of body maps would assist staff with such documentation.

Where people are receiving medication on an 'as and when' basis, staff should document the reason for administering the medication and the effectiveness of the treatment.

This is to ensure care and support is consistent with the Health and Social Care Standards (HSCS) which state that

"I experience high quality care and support based on relevant evidence, guidance and best practice" (HSCS 4.3) and

"Any treatment or intervention that I experience is safe and effective." (HSCS 1.24).

This area for improvement was made on 13 January 2020.

Action taken since then

Record keeping was overall of a good standard .

There was a low usage of any "as required" medication. Therefore the service should continue to apply their own quality assurance audits to continually check practice with record keeping.

People using topical medication benefitted from staff having access to clear directions as to what preparations the person used, when these should be applied, and the frequency of use. Body maps were in place to support this process. Appropriate records were being maintained to evidence use. This was also seen in the context of good practice around medications.

This area of improvement has therefore been met.

Complaints

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

Detailed evaluations

How well do we support people's wellbeing?	5 - Very Good
1.1 People experience compassion, dignity and respect	5 - Very Good
1.2 People get the most out of life	5 - Very Good
1.3 People's health and wellbeing benefits from their care and support	5 - Very Good

How good is our leadership?	4 - Good
2.2 Quality assurance and improvement is led well	4 - Good

To find out more

This inspection report is published by the Care Inspectorate. You can download this report and others from our website.

Care services in Scotland cannot operate unless they are registered with the Care Inspectorate. We inspect, award grades and help services to improve. We also investigate complaints about care services and can take action when things aren't good enough.

Please get in touch with us if you would like more information or have any concerns about a care service.

You can also read more about our work online at www.careinspectorate.com

Contact us

Care Inspectorate
Compass House
11 Riverside Drive
Dundee
DD1 4NY

enquiries@careinspectorate.com

0345 600 9527

Find us on Facebook

Twitter: @careinspect

Other languages and formats

This report is available in other languages and formats on request.

Tha am foillseachadh seo ri fhaighinn ann an cruthannan is cànan eile ma nithear iartras.

অনুরোধসাপেক্ষে এই প্রকাশনাটি অন্য ফরম্যাট এবং অন্যান্য ভাষায় পাওয়া যায়।

یہ اشاعت درخواست کرنے پر دیگر شکلوں اور دیگر زبانوں میں فراہم کی جاسکتی ہے۔

ਬੇਨਤੀ 'ਤੇ ਇਹ ਪ੍ਰਕਾਸ਼ਨ ਹੋਰ ਰੂਪਾਂ ਅਤੇ ਹੋਰਨਾਂ ਭਾਸ਼ਾਵਾਂ ਵਿਚ ਉਪਲਬਧ ਹੈ।

هذه الوثيقة متوفرة بلغات ونماذج أخرى عند الطلب

本出版品有其他格式和其他語言備索。

Na życzenie niniejsza publikacja dostępna jest także w innych formatach oraz językach.