

Penumbra Aberdeen Mental Health Service Housing Support Service

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Telephone: 01224 640351

Type of inspection:

Unannounced

Completed on:

6 February 2019

Service provided by:

Penumbra

Service provider number:

SP2003002595

Service no:

CS2014329157

About the service

The Penumbra Aberdeen Mental Health Service was registered with the Care Inspectorate in September 2014. It is registered to provide a service to adults with mental health problems who may be dealing with other issues.

The strategy of the organisation included that Penumbra will focus on wellbeing and recovery and that this remains the central theme in all that they do. They do this through delivering services, raising awareness or contributing to national policy discussions. Their work aims to ensure that they remain hopeful and focused on positive outcomes for people with mental health problems.

What people told us

We received feedback from people prior to our inspection through questionnaires that were sent to them. We also spoke with people during the inspection.

People told us:

"All staff are so nice. Help me with anything, help me with letters and forms. They are also helping me with my low moods and anxiety."

"I am fairly new to getting support so finding it good so far."

"I really trust my support workers. They work hard to help me as at times my life feels a muddle. Staff help me sort it out with patience and kindness."

"If it wasn't for Penumbra I don't know where I would be as they really do help a lot."

"I was able to increase my support when I needed it."

"I am doing so much better, I am doing courses at college."

"Staff are really good, there has been a bit of a high turnover recently, they are kind, thoughtful, and respect my autonomy."

"They work well with Psychiatrist and Care Manager and work as a team."

"I don't think there is anything that could make it better."

"It's been a bit of a voyage of discovery, I am now able to understand what help I need, by letting them help it gave me the strength to be independent."

"The support is definitely what I need now, I am involved in developing how my support should be, I have to be the one who leads."

"My regular lady is excellent, she doesn't take over, together we have identified the things I am not so good at, lots of chatting goes on, we are always planning how to achieve greater independence."

"I feel I can confide some of my worries, just having the support has allowed me to open up more."

"I wouldn't be without them, I get on well with them all."

"Staff are really good, they are respectful."

Self assessment

We did not request a self assessment prior to this inspection.

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 should expect that their care and support plans are right for them, that they set out how their support needs will be met as well as their wishes and choices. During this inspection we looked at seven support plans which were stored electronically. The plans we looked at contained very good information about the support that people required. There was strong evidence of how people were supported to express their views and to make choices (see areas for improvement).

Risk assessments were seen in files. Guidance and advice from other professionals was there within the care files. Records of consultations demonstrated that people were supported to maintain and improve their health and wellbeing. We saw that plans were evaluated and reviewed (see areas for improvement).

We spoke with staff supporting people during this inspection and it was evident that they were knowledgeable about people's health and wellbeing needs. Staff described how through observation, they were alert to small changes in peoples behaviours that indicated that they may be unwell. The staff we spoke to were very clear about their roles and responsibilities and clearly had a common goal of helping people they support to achieve the outcomes they desired. Staff described a supportive and inclusive team where everyones suggestions and opinions were valued.

People being supported confirmed this and were highly complementary about the support provided. People spoken with were able to provide lots of positive examples of how the support had helped them to gain confidence and to increase their independence.

People using the service were very positive about the quality of the support and key to this was good and effective, communication, the development of positive relationships and staff and their skills in supporting people. They described the support as being flexible, innovative and person centred.

People had been supported and encouraged to share their experiences and a range of recovery stories were available that people had consented to share with others. We discussed that an area for development may be making these stories more available to people using the service as examples of the very good outcomes people were supported to achieve and sustain.

It was important to people that they knew who was providing their care and support on a day-to-day basis. People told us that usually they would see the same support worker or at least a worker they knew. Any changes to the worker was usually communicated through text message or telephone call.

People could be confident that their care and support would be consistent and stable because people work well together. The staff we spoke to told us that they were well supported and felt valued in their roles and could seek advice and guidance where necessary which helped to ensure that people who used the service were supported to achieve their desired outcomes. We also received feedback from other professionals who told us that they were very pleased with the level of communication from staff at Penumbra and that they had confidence that any guidance provided was used to help formulate planned support. Feedback helped to confirm our view that this service was well led and managed.

People who used the service received an annual questionnaire that asked them for their opinion of the support they received. This included what worked well and suggestions for improvement. Feedback was then collated into a brief report that was shared with people with information of how feedback would influence developments in the service.

A service development plan was created following an internal quality audit. This was reviewed regularly and shared with staff through team meetings.

What the service could do better

We discussed some areas for improvement with the management of the service during feedback, these included:

The service needs to consider how they review the outcomes for people using the service. There is a legal requirement for people to have their support needs reviewed at least six monthly, and we saw that this was not always the case for people whose files we looked at. The manager was developing a tool which would give them oversight of the frequency of reviews to ensure that this was addressed. (See Recommendation 1).

The provider was changing over to a new electronic system for storing files and it is hoped that this will mean that files are easier to audit and ensure that all information in the files has been reviewed and is current accurate and complete.

Risk assessments looked at in the files were not very detailed, we would expect to see that these had clear detail of any hazards and clear guidance on the actions staff should take to minimise these. The manager and service manager advised that a new format had been introduced which would provide clearer information and address these shortfalls.

We discussed with the management team how it would be a good development to create an overview of key processes. For example formal reviews, staff training and staff supervision so that they could see at a glance where any gaps were or predict where additional support may be required to maintain the expected standard. The manager had created a system to do this during our inspection.

We also suggested that the service development plan is extended to include feedback from people who use the service, staff and other stakeholders.

Requirements

Number of requirements: 0

Recommendations

Number of recommendations: 1

1. The provider should review how they work towards outcomes with the people they support. They should consider current best practice and how that could be adapted to suit their particular service.

This is to ensure that care and support reflects the Health and Social Care Standards which state; 'I am fully involved in developing and reviewing my personal plan, which is always available to me.' (HSCS 2.17) and 'I am supported to give regular feedback on how I experience care and support and the organisation uses learning from this to improve.' (HSCS 4.8).

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
23 Jan 2018	Announced (short notice)	Care and support Environment Staffing Management and leadership
		5 - Very good Not assessed 5 - Very good Not assessed
25 Jan 2017	Unannounced	Care and support Environment Staffing Management and leadership
		6 - Excellent Not assessed 6 - Excellent Not assessed
28 Jan 2016	Announced (short notice)	Care and support Environment Staffing Management and leadership
		6 - Excellent Not assessed 6 - Excellent 6 - Excellent

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