

# Care service inspection report

Full inspection

## Anchor House Housing Support Service

49 Crieff Road  
Perth



HAPPY TO TRANSLATE

Service provided by: Anchor House

Service provider number: SP2004006041

Care service number: CS2004061871

Inspection Visit Type: Unannounced

Care services in Scotland cannot operate unless they are registered with the Care Inspectorate. We inspect, award grades and set out improvements that must be made. We also investigate complaints about care services and 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.

## Contact Us

Care Inspectorate  
Compass House  
11 Riverside Drive  
Dundee  
DD1 4NY

[enquiries@careinspectorate.com](mailto:enquiries@careinspectorate.com)

0345 600 9527

[www.careinspectorate.com](http://www.careinspectorate.com)

 [@careinspect](https://twitter.com/careinspect)

## Summary

This report and grades represent our assessment of the quality of the areas of performance which were examined during this inspection.

Grades for this care service may change after this inspection following other regulatory activity. For example, if we have to take enforcement action to make the service improve, or if we investigate and agree with a complaint someone makes about the service.

### We gave the service these grades

Quality of care and support	6	Excellent
Quality of staffing		N/A
Quality of management and leadership	6	Excellent

### What the service does well

People who used the service told us that they felt the service supported them very well, and that staff appeared to be approachable and well-trained. They said that they felt well supported by the service and that this had made a positive difference to their lives.

### What the service could do better

We gave the service some suggestions about additional online training and also some good practice documents.

### What the service has done since the last inspection

The service has looked at how they ensure they continue to provide an excellent quality service, and have introduced ways of reviewing records.

### Conclusion

The service provides an excellent service to people who have found themselves in need of support with housing issues. This includes providing support with money management, cooking and nutrition, and finding employment and

permanent housing. People who used the service told us that they felt well supported and spoke highly of individual staff members who supported them.

# 1 About the service we inspected

Anchor House Housing Support Service provides a Housing Support service to adults in the Perth area. The organisation runs two supported accommodation units and also provides an outreach service to people in their own homes.

The service has a mission statement; 'To support vulnerable people irrespective of their sex, ethnic origins, gender, physical mental ability who may have an alcohol or drug dependency'.

The support is provided according to individual assessed need and the aims and objectives are to provide, 'a comprehensive range of needs led services, which includes; accommodation, tenancy support and social economy services to those that experience homelessness, disadvantage and exclusion'.

The Care Inspectorate regulates care services in Scotland. Information about all care services is available on our website at [www.careinspectorate.com](http://www.careinspectorate.com)

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

## Recommendations

A recommendation is a statement that sets out actions that a care service provider should take to improve or develop the quality of the service, but where failure to do so would not directly result in enforcement.

Recommendations are based on the National Care Standards, SSSC codes of practice and recognised good practice. These must also be outcomes-based and if the provider meets the recommendation this would improve outcomes for people receiving the service.

## Requirements

A requirement is a statement which sets out what a care service must do to improve outcomes for people who use services and must be linked to a breach in the Public Services Reform (Scotland) Act 2010 (the "Act"), its regulations, or

orders made under the Act, or a condition of registration. Requirements are enforceable in law.

We make requirements where (a) there is evidence of poor outcomes for people using the service or (b) there is the potential for poor outcomes which would affect people's health, safety or welfare.

Based on the findings of this inspection this service has been awarded the following grades:

**Quality of care and support - Grade 6 - Excellent**

**Quality of staffing - N/A**

**Quality of management and leadership - Grade 6 - Excellent**

This report and grades represent our assessment of the quality of the areas of performance which were examined during this inspection.

Grades for this care service may change following other regulatory activity. You can find the most up-to-date grades for this service by visiting our website [www.careinspectorate.com](http://www.careinspectorate.com) or by calling us on 0345 600 9527 or visiting one of our offices.

## 2 How we inspected this service

### The level of inspection we carried out

In this service we carried out a low intensity inspection. We carry out these inspections when we are satisfied that services are working hard to provide consistently high standards of care.

### What we did during the inspection

The inspection was unannounced and took place over a number of visits to the service, by one Care Inspectorate inspector, between 13 and 27 April 2016. The service submitted a completed annual return and self assessment prior to the inspection as requested by the Care Inspectorate. Feedback was given to the manager and senior staff on 27 April 2016.

During the inspection, evidence was gathered from a number of sources, including;

- discussion with the manager and staff
- examination of a range of records, such as policies and procedures
- a sample of personal plans of people who use the service, including risk assessment paperwork
- a sample of staff files
- training records.

We also talked with people who used the service, at both units. The Care Inspectorate sent out questionnaires to residents and staff prior to the inspection to gather their views about the service, and we also spoke with some staff who had completed these.

### Grading the service against quality themes and statements

We inspect and grade elements of care that we call 'quality themes'. For example, one of the quality themes we might look at is 'Quality of care and support'. Under each quality theme are 'quality statements' which describe what a service should be doing well for that theme. We grade how the service

performs against the quality themes and statements.

Details of what we found are in Section 3: The inspection

### **Inspection Focus Areas (IFAs)**

In any year we may decide on specific aspects of care to focus on during our inspections. These are extra checks we make on top of all the normal ones we make during inspection. We do this to gather information about the quality of these aspects of care on a national basis. Where we have examined an inspection focus area we will clearly identify it under the relevant quality statement.

### **Fire safety issues**

We do not regulate fire safety. Local fire and rescue services are responsible for checking services. However, where significant fire safety issues become apparent, we will alert the relevant fire and rescue services so they may consider what action to take. You can find out more about care services' responsibilities for fire safety at [www.firescotland.gov.uk](http://www.firescotland.gov.uk)

## The annual return

Every year all care services must complete an 'annual return' form to make sure the information we hold is up to date. We also use annual returns to decide how we will inspect the service.

**Annual Return Received:** Yes - Electronic

## Comments on Self Assessment

Every year all care services must complete a 'self assessment' form telling us how their service is performing. We check to make sure this assessment is accurate.

The Care Inspectorate received an updated self assessment document from the service provider. In the self assessment the provider identified what they thought they did well and some areas for development. The service told us ways that people who use the service have been involved in the self assessment process.

## Taking the views of people using the care service into account

We spoke with people who used the service at both units in Perth. We spoke with them as a group as this was what they preferred. They told us they were happy with the service and made comments such as:

"There's always someone around to give me a hand if I need it."

"I speak with my key worker on a regular basis and have always found them to be really approachable and helpful."

"They help to keep me right about stuff."

"The staff seem to know what they are talking about."

"This is the best hostel in Perth, I'm glad I'm here and not in one of the other places."

"It's good that it's a dry service, that's helped to keep me clean."

### **Taking carers' views into account**

We did not speak with carers at this inspection.

## 3 The inspection

We looked at how the service performs against the following quality themes and statements. Here are the details of what we found.

### Quality Theme 1: Quality of Care and Support

Grade awarded for this theme: 6 - Excellent

#### Statement 3

“We ensure that service users' health and wellbeing needs are met.”

#### Service Strengths

The service was able to provide excellent evidence in support of this statement.

As part of the inspection we sampled some service users' files and looked at information recorded. We saw that this included a full assessment of needs which was completed when a service user first started to receive support from the service. We could see from this that with agreement from the service user, relevant referrals had been made to a range of healthcare and support services.

Service users were encouraged to register with a local GP practice if they did not already have a local GP. The Central Healthcare Team based at the local GP practice supported service users to undergo basic health checks and were able to make relevant referrals to appropriate services such as; GPs, physiotherapy, occupational therapy, dental services or optical services. Younger people who used the service could also access the 'Young Persons Health Worker'. People who used the service could also access in-house opportunities such as visits from dentists, or opticians, as well as advice from staff.

We could see that the service had good links with appropriate health professionals and encouraged service users to follow any health plans they had adopted. One service user we spoke with told us that staff had supported them

to remain drug free. People who used the service were given information on how they could access the local Live Active Scheme, which gave free access to all Perth and Kinross Council leisure facilities in order to promote healthy lifestyles. Staff had good knowledge of other sources of support for service users, for example, service users we spoke with during the inspection told us that staff had given them advice on how to access debt management advice or housing advice. Staff supported service users to have a healthy diet and, encouraged them to take part in informal basic healthy cooking sessions run by staff. During the inspection we saw that people who used the service were involved in practical cooking sessions, and observed them enjoying a lunch cooked by a group of service users.

People who used the service had detailed support plans which outlined how the service would support them. Service users told us that they knew what was in these plans and had been involved in their compilation. They also told us that staff helped them to review the content on a regular basis to make sure that it remained relevant. Support planners also identified any risks and, how these would be managed. All support plans were seen to be signed by staff and service users. Staff completed detailed contact sheets for reach service user and, these contacts were reviewed on a monthly basis.

The service had an illicit substance free environment. This was made clear to all service users when they started to receive support from the service, and this was formally recorded. People who used the service told us that this was part of the reason they used this particular service. Staff had received training to allow them to test for specific substances, and service users were aware that they could be tested at any time or, when they appeared to be under the influence of drugs or alcohol. We saw clear records of this in service users' files, along with signed agreements of when this would be carried out as part of a regular check. Staff were aware of the additional risk issues around 'legal highs' and were working with people who used the service to make them aware of these risks.

### **Areas for improvement**

The service should continue to support people who used the service to be aware of, and access appropriate health and wellbeing services.

## Grade

6 - Excellent

**Number of requirements - 0**

**Number of recommendations - 0**

## Statement 5

“We respond to service users' care and support needs using person centered values.”

### Service Strengths

The service was able to provide excellent evidence in support of this statement.

As part of the inspection we sampled some personal plans of people who used the service. These showed the individual support needs of each person, and reflected the level of support required, for example some people had independent cooking skills, whilst others required some support and guidance with nutrition and cooking. Key working responsibilities of staff were allocated based on expertise, for example some staff had particular knowledge of drug and alcohol issues while others had experience in child protection.

People who used the service told us that they had opportunities to discuss as a group what events and activities they would like to try. We saw an activities programme which included a variety of activities, the majority of which were chosen by people who used the service. This included, 'masterchef' competitions, fly fishing, boxing and literacy and numeracy. Everyone who used the service had the opportunity to use the local authority leisure facilities via a free membership card.

The service encouraged people who used the service to attend regular service user meetings, and these gave people the opportunity to be involved in joint decisions such as the compilation of menus for group meals, changes to décor in communal areas, and one-off activities or events, such as trips out.

Records showed that staff were able to access specific training to meet the needs of people who used the service, for example benefits training, or mental health awareness. We saw that there was good communication between a

range of additional support services, such as social work, community psychiatric nurses, and housing departments of the local authority. This meant that staff were able to support people who used the service to access appropriate support to help them to move on to more independent living.

During the inspection the service was able to give accommodation to a new service user, and we could see that the affect this would have on existing service users was considered when placing this new service user.

### Areas for improvement

The service should continue to provide a person-centred service, and in order to support the development of the service we signposted them to additional online training in human rights at <http://scottishhumanrights.com/careaboutrights>

### Grade

6 - Excellent

**Number of requirements - 0**

**Number of recommendations - 0**

## Quality Theme 3: Quality of Staffing

Quality theme not assessed

## Quality Theme 4: Quality of Management and Leadership

Grade awarded for this theme: 6 - Excellent

### Statement 3

“To encourage good quality care, we promote leadership values throughout the workforce.”

### Service Strengths

The service was able to provide excellent evidence in support of this statement.

There were a range of opportunities for staff to take on additional responsibilities based on personal and professional interest. For example one staff member had undergone additional training in child protection, while others had completed training in drugs and alcohol and maintained professional contacts in this area. Although the manager acted as the formal link worker to regular social work students who were placed within the service, all staff had the opportunity to mentor students during their placement. Staff were encouraged to be involved pro-actively in supporting service users, for example in taking part in physical activities, healthy eating and education opportunities. Staff told us that they felt they were very well supported by colleagues and senior staff which allowed them to be confident in having significant responsibility for the day-to-day delivery of support.

The service was committed to accessing appropriate training, professional and service development and best practice, and made good use of local connections to achieve this. Staff had a positive attitude to being part of a professional team who were empowered to make appropriate decisions. Structures in place, such as supervision, changeover and team meetings, promoted the opportunity for discussion, and challenge, about effective decision-making. All of these contributed to the opportunity for staff to develop and enhance their leadership values and skills.

## Areas for improvement

In order to encourage the development of leadership skills and values we signposted the service to [www.stepintoleadership.info](http://www.stepintoleadership.info)

## Grade

6 - Excellent

**Number of requirements - 0**

**Number of recommendations - 0**

## Statement 4

“We use quality assurance systems and processes which involve service users, carers, staff and stakeholders to assess the quality of service we provide”

## Service Strengths

The service was able to provide excellent evidence in support of this statement

The service had a range of formal and informal processes which allowed them to assess the quality of service they provided.

We could see that the service reacted quickly to any issues raised by staff or people who used the service. For example an issue had been raised by people who used the service in relation to 'housekeeping' communal areas, and the service promptly arranged for this to be discussed at a tenants' meeting and followed through with decisions made. People who used the service were encouraged to attend the regular tenants' meetings to discuss issues which affected them all, and records were kept of these meetings to allow senior staff to review actions.

Records showed that personal plans were audited regularly by senior staff, and actions identified where appropriate. These were followed up to ensure that action had been taken. Since the last inspection, all contact notes were now recorded electronically rather than on paper copies, which allowed senior staff to review them frequently and identify any issues for action. This information was fed into regular three-month reviews of service which was then sent to the local authority contract monitoring team.

The service had close links with associated professionals such as the Supporting People Team in the local authority, the local Housing and Community Care Team, and the Social Work Department. As a charity the service had a Board of Trustees, and the service produced an annual report for the Board which highlighted any developments and outcomes from, for example, Care Inspectorate inspections.

The service had developed a questionnaire for people who used the service, and the information gained from these had been analysed and any actions decided on fed back to people who used the service at a tenants' meeting.

### Areas for improvement

The service should consider how they could involve people who used the service in the completion of their self assessment prior to submission to the Care Inspectorate, and use this document to comment on any positive outcomes for people who use the service as a result of the service provided.

### Grade

6 - Excellent

Number of requirements - 0

Number of recommendations - 0

## 4 What the service has done to meet any requirements we made at our last inspection

### Previous requirements

There are no outstanding requirements.

## 5 What the service has done to meet any recommendations we made at our last inspection

### Previous recommendations

There are no outstanding recommendations.

## 6 Complaints

No complaints have been upheld, or partially upheld, since the last inspection.

## 7 Enforcements

We have taken no enforcement action against this care service since the last inspection.

## 8 Additional Information

There is no additional information.

## 9 Inspection and grading history

Date	Type	Gradings								
22 Apr 2014	Unannounced	<table> <tr> <td>Care and support</td> <td>5 - Very Good</td> </tr> <tr> <td>Environment</td> <td>Not Assessed</td> </tr> <tr> <td>Staffing</td> <td>6 - Excellent</td> </tr> <tr> <td>Management and Leadership</td> <td>5 - Very Good</td> </tr> </table>	Care and support	5 - Very Good	Environment	Not Assessed	Staffing	6 - Excellent	Management and Leadership	5 - Very Good
Care and support	5 - Very Good									
Environment	Not Assessed									
Staffing	6 - Excellent									
Management and Leadership	5 - Very Good									
21 May 2013	Unannounced	<table> <tr> <td>Care and support</td> <td>6 - Excellent</td> </tr> </table>	Care and support	6 - Excellent						
Care and support	6 - Excellent									

		Environment Staffing Management and Leadership	Not Assessed 6 - Excellent 5 - Very Good
20 Dec 2011	Unannounced	Care and support Environment Staffing Management and Leadership	5 - Very Good Not Assessed 4 - Good Not Assessed
10 Nov 2008	Announced	Care and support Environment Staffing Management and Leadership	5 - Very Good Not Assessed 5 - Very Good 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.

You can also read more about our work online.

### Contact Us

Care Inspectorate  
Compass House  
11 Riverside Drive  
Dundee  
DD1 4NY

[enquiries@careinspectorate.com](mailto:enquiries@careinspectorate.com)

0345 600 9527

[www.careinspectorate.com](http://www.careinspectorate.com)

 [@careinspect](https://twitter.com/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 c?nain eile ma nithear iarrtas.

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.