

Step Up (Housing, Employability & Community Support Services) Housing Support Service

Lock 9 Cottage The Maltings Falkirk FK1 5BW

Telephone: 01324 465 000

Type of inspection:

Announced (short notice)

Completed on:

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Service provided by:

Step Up (Housing, Employability & Community Support Services) Ltd

Service no:

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Service provider number:

SP2013012130



About the service

Step Up (Housing, Employability & Community Support Services) is a combined Housing Support and Care at Home service which operates in the Falkirk and Clackmannanshire areas. The service supports people over the age of 16 who may be at risk of becoming homeless, and adults who have mental health issues, physical disabilities and older adults living in their own homes. The service aims to support people to develop the skills required to live independently, and the level of support varies according to assessed need.

Support is provided by two staff teams operating out of offices in Falkirk and Alloa. As well as providing support at home, and while out in the community, young people could attend the office to receive support and a 24 hour on-call system was also operational. At the time of our inspection, 20 young people were using the service. Most of the people being supported by the service are young people who are care experienced.

About the inspection

This was an announced (short notice) inspection which took place on 22 August 2023 between 11:00 and 16:00 and 23 August 2023 between 08:50 and 17:30. Some follow up interviews also took place on 24, 25 and 29 August 2023. One Inspector carried out the inspection. To prepare for the inspection we reviewed information about this service. This included registration and complaints information, information submitted by the service and intelligence gathered throughout the inspection year. To inform out evaluation we:

- spoke with five young people using the service
- spoke to 10 members of staff and management
- · spoke to four external professionals
- observed practice within the office
- · reviewed documents.

Key messages

- Staff were skilled at developing meaningful relationships with people which helped to improve outcomes.
- The service was creative and innovative in the way they met people's needs.
- The service model allowed support to be flexible and responsive, which worked well for people using the service.
- Priority was given to people's safety and the service promoted an enabling approach to risk assessment.
- The service was highly valued by external professionals.
- · Quality assurance systems were robust.
- Leadership at the service was very good and focused on improvement.
- The service were working on improving people's participation in key parts of the service including care planning and service evaluation.

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 evaluated this key question as very good, where significant strengths in the care provided supported positive outcomes for people.

People were supported by staff who were warm and compassionate and this enabled trusting relationships to be formed. Many people met with staff multiple times per day and we found that established relationships had helped to improve people's confidence and reduce isolation. People using the service were very positive about the qualities and attributes of the staff supporting them and said they felt respected and cared about. We did however identify that a high turnover of staff had impacted on some people's experiences due to a lack of continuity and consistency, something the service were working to address.

The service model allowed for a flexible and responsive service, which was tailored to people's needs and wishes. The service was skilled at adapting support during times of crisis or change and external professionals were complementary about this aspect of the service. We saw examples of creative solutions being developed to improve outcomes, for example around pet ownership. One person told us that being supported to own a pet had, "a huge positive impact on my mental health". Staff practised in a way that was empathetic and trauma-informed; they stuck by people who either struggled to engage with the service, or posed challenges for staff.

The service supported people to achieve greater independence through a variety of approaches, which were personalised to individuals. People's outcomes were significantly improved by being provided with support to develop vital life-skills, which helped to reduce the risk of homelessness. The people we spoke to were able to describe their progress in areas such as shopping, cooking, budgeting, and cleaning, achieved with the help of committed and compassionate care. One person told us, "At first, I'd had trouble keeping my flat tidy, if I wasn't managing, they'd clean it, give me a fresh start, so we can try again".

The service had high aspirations for people using the service, helping to demonstrate a message of respect. As well as ensuring basic needs were met, we found that people were given tenancies in areas of importance to them, had internet access as standard, and were offered driving lessons. These measures allowed people to maintain important connections, and focus on future goals.

People were encouraged to make decisions and choices over their care and support, and transitions into the service were well planned. All people had support plans that were personalised and focused on clear identified need. We did however find that some people hadn't seen their plans, or couldn't remember them. The service were considering ways to improve people's participation in care planning through further digitising elements of the service.

The service was very good at ensuring support promoted positive outcomes with regards to work and education. Some people we spoke to had achieved success in their career due to help from the service at various stages. We heard from people who had received some coaching around interview skills, help with application forms, and who had been connected with local employers for work experience. The service had maintained informal links with some people who no longer required support from the service, some of whom had gone on to attend University.

The service had also promoted positive outcomes by identifying health needs and ensuring people had access to health assessments. An external professional told us that the Registered Manager had been,

"skilled at identifying undiagnosed health difficulties for some young people, being proactive about that and getting people diagnosis and support". For some people, their quality of life had been vastly improved due to this support from the service.

The service ensured people were safe by having robust risk assessments and protection procedures in place. All of the people we spoke to said they felt safe and they appreciated the level of independence and autonomy given to them by the service. We identified that staff had excellent awareness of risk and worked collaboratively with individuals and other agencies to reduce risk. One Social Worker told us that, "I know my young person is safe when they're there". The service promoted a very enabling attitude towards risk, where they accepted an individual's right to take risks in a proportionate way.

How good is our leadership?

5 - Very Good

We found significant strengths in the leadership of the service and how these supported positive outcomes for people, therefore we evaluated this key question as very good.

The service had robust quality assurance systems in place to ensure people's experiences of care and support could be evaluated. Leaders in the service had a clear oversight of people's plans and external professionals told us they received good quality communication from the service to update them on people's outcomes. The service had a Quality Manager and Office Manager, who provided an extra layer of scrutiny to quality assurance processes.

The service benefitted from self-evaluation to help improve outcomes. An annual feedback plan was in place to seek feedback about various parts of the service from external professionals and the service had clear aims and objectives to help drive improvement. In keeping Scotland's Promise to care experienced young people, the service aimed to further develop their self-evaluation to ensure that the views of people using the service were given greater prominence.

Staff received support and training to ensure they had the skills to support people well, and the staff induction plan was comprehensive. We heard that staff would welcome more in-person training to ensure training was meaningful. Leaders placed importance on developing the workforce and staff were given time and support to meet conditions of their SSSC registration.

The service benefitted from a well-established and skilled leadership team. The staff we spoke to considered management to be approachable, supportive and decisive. We also heard that management had helped to lead a unified team who were caring and supportive of one another. Regular team meetings took place to facilitate discussion and drive improvement. We observed effective team-working during our inspection and heard that the service placed importance on the well-being of staff. Experienced managers had helped to embed a trauma-informed approach to practice and this was identified through many parts of the service.

Leaders had identified that staff recruitment and retention had been an area of challenge for the service and had been proactive in employing an HR Business Partner to review recruitment, pay, benefits and conditions. As part of this, staff had been invited to share their ideas for improvement, and some of these suggestions had been actioned. We made suggestions for improvement to recruitment practices during our inspection, including on clarity of the interviewing panel, and increasing young people's participation in recruitment, and these suggestions were taken on board. A high turnover of staff had impacted on outcomes for some young people using the service, however we were reassured the service were being responsive to this.

Inspection report

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 | 6 - Excellent |
| 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 |

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