

Performance Review and Scrutiny Committee Tuesday 7 November 2023 Item No 5.1

Inspection of Midlothian Community Access Team Report by Nick Clater, Head of Service, Health and Social Care Report for Noting

1 Recommendations

Performance Review is requested to note the outcome of the inspection of Midlothian Community Access Team by the Care Inspectorate.

2 Purpose of Report/Executive Summary

This report advises of

- 1. The outcome of the inspection of Midlothian Community Access
 Team
- 2. The actions that are being progressed as a result of the inspection

Date: 12/10/23 Report Contact: Nick Clater

3 Background

3.1 Inspection

Midlothian Community Access Team is a community based Day Support Service, operated by Midlothian Council that provides support for adults with Learning Disabilities. It caters for individuals with learning disabilities and provides support for individuals in community based settings.

In August 2023 the Care Inspectorate conducted and announced (short notice) inspection of Midlothian Community Access Team. A copy of the report is contained in Appendix B of this report.

3.2 Grades

Following the inspection the Care Inspectorate awarded the following grades.

How well do we support people's wellbeing?5 – Very Good

3 – Adequate

- How good is our leadership?
- How good is our staff team? 4 Good
- How well is our care and support planned? 4 Good

The Inspection report noted strengths in the following areas:

- People said that they enjoyed meeting their peers, taking part in activities and attending groups.
- Family said that they welcomed the opportunities offered to their loved ones through attending the Community Access Team Hubs.
- Staff were skilled and able to work effectively with the people they support

It should be noted that this was the first time the service had been inspected since 2015 and the first time under changed inspection criteria.

It is noted that the report is broadly very positive and appreciation is due to the staff working in the service.

3.2 Areas for Improvement

The report identifies 3 main areas where improvements should be made:

Aspects of the service's quality assurance and quality engagement processes needed development.

- The service should consult with and determine key stakeholders views on engagement with quality assurance processes in the service. Consideration should be given to developing a forum or forums which allow people to share their views and contribute to service development and improvement plans.
- The service should provide notifications of accidents and incidents to the Care Inspectorate in line with regulatory guidance.

The service should consider approaches to evaluating staff skills and practice.

- The service should develop competency-based observations of staff practice, clarifying that they have the requisite skills and that they put them into practice during support. Observations should include feed back from people who experienced care and inform discussion, supervision and professional development for the staff concerned.
- The service should develop a training matrix which allows management overview of learning undertaken and insight into when refresher training updates are needed.

Personal plans and risk assessment were maintained inconsistently.

- In order to ensure that personal plans are relevant and adequately guide staff response to any presenting risk, the service should:
 - Ensure that personal plans identify all risk, health, welfare and safety issues in a manner which documents how needs are met.
 - Ensure that personal plans are shared with people who experience care and their representatives.
- In order to ensure that people can contribute to their personal planning and evaluate outcomes arising from support, the service should:
 - Ensure that reviews are carried out a minimum of six monthly intervals
 - Review capture and fully record people's evaluations of the outcomes derived from their support.

3.3 Actions Being Progressed

The following actions are being progressed to address the areas for improvement identified in the inspection report:

- 1. Quality assurance processes to be reviewed and existing good practice to rolled out to all hubs. By 02/24
- 2. Process for notifying Care Inspectorate of relevant accidents/incidents to be updated. COMPLETE
- 3. Observation of workers practice to be incorporated into supervision feedback. By 12/23
- 4. Training Matrix to be developed. By 12/23
- 5. Support plans to be updated to include Personal Risk Plans By 12/23
- 6. All support provision to be reviewed and to review to include carer & service user contributions. By 02/24.

4 Report Implications (Resource, Digital and Risk)

4.1 Resource

There are no direct resource requirements arising from the inspection.

4.2 Digital

There are no digital implications related to this paper.

4.3 Risk

There is a reputation risk to Midlothian Health and Social Care Partnership should the identified improvements not be progressed.

4.4 Ensuring Equalities (if required a separate IIA must be completed)

The provision of day services by Community Access Team addresses inequalities experienced by people with Learning Disabilities.

4.4 Additional Report Implications

There are no additional report implications at present.

Appendices

Appendix A – Additional Report Implications Appendix B – Background information/Links

APPENDIX A – Report Implications

A.1 Key Priorities within the Single Midlothian Plan

A.2	Key Drivers for Change
	Key drivers addressed in this report:
	 Holistic Working Hub and Spoke Modern Sustainable Transformational Preventative Asset-based Continuous Improvement One size fits one None of the above
A.3	Key Delivery Streams
	Key delivery streams addressed in this report:
	 ☐ One Council Working with you, for you ☐ Preventative and Sustainable ☐ Efficient and Modern ☐ Innovative and Ambitious ☒ None of the above
A.4	Delivering Best Value
	The report does not directly impact on Delivering Best Value
A. 5	Involving Communities and Other Stakeholders
	Subsequent to the inspection there has been consultation with users of the service and their families in relation to the arrangements for mealtimes.
A.6	Impact on Performance and Outcomes
	This report highlight a number of actions that will improve performance and the outcomes of people using the service.
A .7	Adopting a Preventative Approach
	Not applicable

A.8 Supporting Sustainable Development

APPENDIX B

Inspection Report



CAT Inspection Report_Aug 23.pdf