

Braeburn Court Housing Support Service

Braeburn Court St. Margaret's Hope Orkney KW17 2RR

Telephone: 01856 831 501

Type of inspection:

Announced (short notice)

Completed on:

11 March 2024

Service provided by:

Orkney Islands Council

Service no:

CS2011303830

Service provider number:

SP2003001951



Inspection report

About the service

Braeburn Court is a purpose-built facility designed to provide a housing support/care at home support service to older and vulnerable people in their own tenancies. The service is registered to support up to 14 tenants with a one-bedded flat used for respite care. The main building contains offices, staff sleep-in room, a communal social area with kitchen, toilets and some of the tenant accommodation.

The other tenancies are located in semi-detached bungalows facing the central building.

Eligibility is extended to individuals who experience a significant degree of challenge to living independently that requires on-site support services.

At the time of inspection 12 people were receiving support.

The inspection was carried out virtually with no on-site visit.

About the inspection

This was a virtual inspection which took place from 4-11 March 2024. It was carried out by one inspector from the Care Inspectorate and was to follow up on a requirement from a previous inspection. To prepare for the inspection we reviewed information about this service. This included previous inspection findings, information submitted by the service and intelligence gathered since the last inspection.

In making our evaluations of the service we reviewed documents relating to quality assurance and management oversight of service delivery.

We spoke with senior staff, the manager and representatives from the local authority.

Key messages

People were receiving consistent care delivered by a stable staff team.

Management oversight of key areas of service delivery had improved.

The service was continuing to develop a meaningful activity programme.

What the service has done to meet any requirements we made at or since the last inspection

Requirements

Requirement 1

By 25 February 2024, the provider must ensure effective management arrangements remain in place to fully embed robust quality assurance systems. This is to ensure recent improvements in key areas of service delivery are sustained. The outcome of quality assurance should inform a service improvement plan.

This is to comply with: The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulation 2011 (SSI 2011/210) regulation 4 (1) (a) - a requirement to make proper provision for the health and welfare of service users.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that: 'I use a service and organisation that are well led and managed' (HSCS 4.23), 'I am supported to give regular feedback on how I experience my care and support and the organisation uses learning from this to improve' (HSCS 4.) and 'If I experience care and support where I live, people respect this as my home' (HSCS 3.2).

This requirement was made on 3 August 2023.

Action taken on previous requirement

Appropriate management arrangements were in place. An experienced interim agency manager supported by peers and senior management ensured the service was being managed well.

A permanent manager was being recruited. The provider gave assurances that the required resources would remain available throughout any transition period to ensure robust management of the service continued.

Staff working in the service were clear about their roles and responsibilities. Weekly meetings improved communication within the management team. This allowed the management team to monitor key areas of care and support as part of improved quality assurance processes. This included reviewing personal plans, health and safety arrangements and staff supervision and training.

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The management team planned to continue to embed oversight processes to ensure improvement in areas identified. Areas identified as needing improvement were reflected in the service development plan and implemented and followed up appropriately. This ensured people using the service received appropriate support from a competent and skilled care team.

Met - outwith timescales

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

To ensure that people can engage in meaningful activity the provider should:

- review the activity provision to ensure tenants have access to activity in line with their preferences and choices.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that: 'I can choose to have an active life and participate in a range of recreational, social, creative, physical and learning activities every day, both indoors and outdoors' (HSCS 1.25).

This area for improvement was made on 3 August 2023.

Action taken since then

A new activities coordinator had recently been recruited. The service had begun a consultation process with people living in the service. This included activity assessments and general feedback questionnaires. People's previous interests and life histories were being incorporated into individual activity planners. Evaluation tools were being developed to ensure progress towards identified goals was being continually assessed and monthly evaluations were carried out. This will ensure people are involved in activities that are meaningful to them.

The service planned to continue to develop in this area and to make better use of the service community hub and explore external agencies/entertainers to attend the service. This will enhance activity opportunities for people.

This has not been met and will be reviewed at the next inspection.

Complaints

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

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Care Inspectorate Compass House 11 Riverside Drive Dundee DD1 4NY

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