

## Key Community Supports - Glasgow East Support Service

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Type of inspection: Unannounced  
Inspection completed on: 25 January 2017

**Service provided by:**  
Key Housing Association Ltd

**Service provider number:**  
SP2003000173

**Care service number:**  
CS2014325032

## About the service

Key Community Supports - Glasgow East has been registered with the Care Inspectorate since 2014 to provide a care at home service to adults with a disability, living in their own homes within the community. The service has recently moved to a new facility within the East End of the city

At the time of the inspection, the service was providing support to 98 individuals living at home within the east of Glasgow. Most of the people being supported by the service had a learning disability and a small number of people had alcohol related brain damage or an acquired brain injury.

The amount of support people received could vary from a few hours per week up to 24 hours a day for an individual service user.

The overall aim of the service was 'to support individuals in the community and to maximise the opportunities for normal living within the local community'.

## What people told us

For this inspection, we spoke individually with nine individuals using the service. We also received three completed care standard questionnaires.

From the limited responses we received we were advised that all were either very happy or happy with the quality of care and support provided. From individual discussions with service users, we were told that staff made service users feel very safe and comfortable in their company and that the care and support delivered is centred solely on their own individual needs.

Those using the service were very confident in the staff's knowledge and skills. Service users commented that they felt the staff allocated to their care package had a great degree of knowledge about them and as a result of this, confidence in the staff's ability to do their job appropriately was very high.

Comments from those we spoke with included:

"I don't have much family around me so my support workers are really important to me"

"I really enjoy the clubs and activities that my support workers have found for me"

"XXX is a great help to me, I would not want anyone else to help me"

## Self assessment

The Care Inspectorate received a fully completed self-assessment from the provider.

The provider identified what it thought the service did well and gave examples of improvements in a number of areas.

The self-assessment clearly identified some key areas that the provider believed can be improved and showed how the service intended to do this. The provider told us how the people who used the care service had taken part in the self-assessment process and how their feedback directed the development of their plans for improving the service.

## From this inspection we graded this service as:

Quality of care and support	6 - Excellent
Quality of staffing	not assessed
Quality of management and leadership	5 - Very Good

## What the service does well

During our time spent in the service, we examined a range support plans. From the evidence gathered from these documents and through our discussions with a number of those in receipt of support, we can see consistent and meaningful involvement from each individual in developing and helping to maintain their own plans.

We were very pleased with the standard of support plans examined. They were noted to be person centred and outcomes based documents provided the staff with all the necessary information they will need to provide the standard of care observed.

Routines are noted to be very important in the lives of each service user, with specific support strategies in place to ensure that individuals are provided with the care their package requires. Health care support plans are also extremely well presented, in order to ensure that the needs of each person are consistently attended to.

We noted a number of healthcare appointments with a range of specialists, who maintain the health and wellbeing of each service user. Throughout the service, staff have been on hand to ensure that critical medical information is documented and passed on throughout the team, to allow a consistency of support from all.

We have noted a range of quality assurance procedures being used by the service staff and leadership. These include:

Local manager Operation Audits

Local Manager Finance Audits, including input from the service users themselves

Medication Admin Record monthly checks and six monthly local service manager support with medications audit.

The Community Development Department within Key continued to work very closely with the service over the

last year. They have supported service users to organise meaningful activities which they wish to take part in and benefit from the learning of new skills and having new experiences.

The service has developed its own improvement plan which sits alongside the organisation's nationwide corporate strategy. Included in this local plan is the roll out of new care and support plans and the widening of the outcomes for living agenda. By succeeding in these areas the service can demonstrate its own contributions to delivering on the goals of the organisation as a whole.

## What the service could do better

Wherever possible service users should sign financial support plans (and all other relevant support documentation) to ensure that their views have been captured. When not possible the service should always endeavour to make sure a representative of some sort does so, to ensure that the management of the service user's finances is handled in a multi-disciplinary fashion and all involved are secure in their roles.

We also asked that, within care plans, staff should avoid the use of terms such as 'no issues' or 'on-going' when discussing timelines or service users themselves. Such language can be seen as vague and of no use to the reader. Staff should ensure that use of language is creative in order to convey the correct message to the reader.

Reflective practice is being conducted by the service in the initial introduction to practice training sessions, but not on the subsequent training. We have made suggestions to the management team along the lines of widening the scope of the reflective practice, to ensure that all staff evaluate their continued professional development, to allow staff to communicate their feelings on its worth and how they can take it forward into practice.

We also discussed the ways in which the service seeks and gathers feedback from key stakeholders, such as members of service users' families. In the past, the service has sent out questionnaires asking for comments on the progress made. The uptake of this method has been few and far between, therefore the service aims to identify new ways to gather this feedback and use it to help develop the service. We will examine the progress made in this area at the next inspection.

## Requirements

Number of requirements: 0

## Recommendations

Number of recommendations: 0

## Complaints

There have been no complaints upheld since the last inspection. Details of any older upheld complaints are published at [www.careinspectorate.com](http://www.careinspectorate.com).

## Inspection and grading history

Date	Type	Gradings	
8 Feb 2016	Unannounced	Care and support	5 - Very good
		Environment	Not assessed
		Staffing	5 - Very good
		Management and leadership	5 - Very good

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