

Threshold Support Services - Residential Care Home Service

New Cross Centre
Lamb Street
Hamilton
ML3 6AH

Telephone: 01698 423335

Type of inspection: Unannounced
Inspection completed on: 30 November 2017

Service provided by:
Church of Scotland Trading as
Crossreach

Service provider number:
SP2004005785

Care service number:
CS2003001401

About the service

Threshold Support Services - Residential is a care home service for adults with learning disabilities. The service is provided in three houses in South Lanarkshire, one in Hamilton, one in Larkhall and one in Kirkmuirhill. Two of the houses are purpose built bungalows and the other is a more traditional detached house. Each house can accommodate four people and twelve people were using the service at the time of our inspection. Each person has their own bedroom and share the living room, dining room, kitchen, utility room and accessible bathrooms. There is an enclosed accessible garden, parking area and office space for staff's use at each house. The service was previously known as the Cornerstone Project. It was registered with the Care Commission and has been registered with the Care Inspectorate since the Care Inspectorate was formed in 2011.

The service is provided by the Church of Scotland trading as Crossreach. Their mission statement is, "In Christ's name we seek to retain and regain the highest quality of life which each individual is capable of experiencing at any given time".

What people told us

We received a total of four questionnaires as part of our inspection of the service. These were completed on behalf of the people who use the service with assistance from staff, representatives or relatives. On reviewing these questionnaires we found 100% of responders strongly agreed that they were overall happy with the quality of the service provided.

People who chose to comment in their response told us:

"Staff arrange meetings and reviews keeping me well informed"

"Staff are excellent"

We briefly spoke to and observed people being supported within all three properties within which the service operates. We also spoke to two relatives of people supported as part of our inspection. From the responses given and observations made as part of the inspection it was apparent that the service provided by Threshold Support Service - Residential was of a very good quality and had impacted positively on people's lives.

People we briefly spoke to and observed told us:

"The staff, they are good to me"

"I like them"

When asked if they were happy within the service people we spoke to said they were. We saw caring and compassionate support being provided and it was clear staff had very good relationships with the people they cared for.

Self assessment

As there was no requirement for the service to provide a self-assessment for the inspection year 2017/18 we referred to a previously submitted version. We were satisfied with the way the provider had completed this and with the relevant information included in relation to the quality themes we were assessing.

From this inspection we graded this service as:

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

What the service does well

We found that the service's quality of care and support and management and leadership continued to be very good.

We saw caring staff teams who provided compassionate care to the people being supported. Documentation we saw was relevant, up to date, personalised and detailed to a good standard. People needs, preferences, likes and dislikes were the focus in care planning. Risks were managed through the use of regularly updated risk assessments. We found in some cases the residual actions described to reduce risk could have been more personalised and detailed to ensure any staff member not familiar with the person would have enough information to provide sufficient support. This would ensure people's health and wellbeing needs are consistently met by all staff at all times. This will be reviewed at the next inspection.

We spoke to people being supported and some relatives who clearly felt the level of support provided by the service was of a very good standard. This assured us people felt they were being properly supported and the service was meeting people's needs.

We found that medication support was given in line with people's needs and that people had received their medication as prescribed. We did find that some areas of medication recording could be improved and this is discussed below. It is important that medication support is given in line with guidance and recorded properly to ensure people receive the medicines they need appropriately.

Staff informed us they felt supported by the management team and enjoyed working in the service. Some had compared it as very favourable in comparison to previous care services they had worked in. Staff told us people were safe and their needs were being met although some staff felt people could be better encouraged to leave the homes and get more involved in the community. This was discussed with senior managers on conclusion of the inspection.

We found that the service had managed incidents and accidents appropriately. However, we saw an example where the notification of an incident had not been made to the Care Inspectorate as it should have been. We discussed this with the manager and shared a guidance document clarifying what should be notified to the Care Inspectorate. This process is to ensure, amongst other categories of notification, that unforeseen incidents and accidents are managed properly and people are safe. This will be monitored and reviewed at the next inspection.

What the service could do better

We found that not all staff had received supervision meetings with senior staff as frequently as service policy prescribes. It is important that all staff take part regularly in these meetings to monitor their practice, development and review any personal issues that may impact on their work. We suggested that senior staff use a planning system to ensure these meetings take place in line with policy. The roll out of the service's new annual appraisal template (PDQP) is still to take place and it is expected this will be in place for all staff soon. This will be reviewed at the next inspection.

We found medication recording was accurately completed. In the records we reviewed people's medical conditions were described within their plans and where "as required" medication was prescribed the circumstances of this were briefly described. The service should improve this area of support through the use of specific protocols regarding "as required" medication. These would be agreed with prescribers and would detail, but not be limited to, what the medication was, for what condition, the circumstances when it is to be given and any non-medical interventions to be considered prior to administration. This should be done to comply with the service's medication policy and ensure "as required" medication is given appropriately and staff can follow clear guidance accordingly. These documents should then be subject to regular review to ensure relevant medication is still required. We also noted that when giving "as required" medication not all staff completed the rear of the medicines administration record (MAR) sheets with reasons for administering and results. This should be done consistently by all staff in all cases to ensure medication efficacy. These areas for improvement will be reviewed at the next inspection.

We saw that risk assessments were in place for the people being supported. These were regularly updated and related to key aspects of people's support. We discussed with the manager the Mental Welfare Commission's best practice guidance around restraint, "Rights risks and limits to freedom" and asked the service review its risk assessment process in line with this guidance to ensure any form of restraint used, including, but not limited to seat belts, lap straps and relevant forms of monitoring and practice, is delivered in line with this guidance.

We saw there was a quality audit tool in place that ensures each resident's documentation and general service provision is regularly reviewed. We noted on one particular audit a medication recording issue we had identified during inspection had not been identified within it. The audit process should be robust, detailed and thorough. The service is still reviewing its audit process and, with the wider organisation, is going to introduce a revised audit system at some point in the near future. This will be reviewed at the next inspection.

We have repeated areas for improvement identified at the previous inspection. To maintain the grades awarded at this inspection the service should fully address all areas for improvement identified in this report.

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.

Inspection and grading history

Date	Type	Gradings	
23 Dec 2016	Announced (short notice)	Care and support	5 - Very good
		Environment	Not assessed
		Staffing	Not assessed
		Management and leadership	5 - Very good
21 Jan 2015	Unannounced	Care and support	5 - Very good
		Environment	5 - Very good
		Staffing	5 - Very good
		Management and leadership	5 - Very good
24 Jan 2014	Unannounced	Care and support	5 - Very good
		Environment	5 - Very good
		Staffing	5 - Very good
		Management and leadership	5 - Very good
5 Jun 2013	Unannounced	Care and support	5 - Very good
		Environment	4 - Good
		Staffing	4 - Good
		Management and leadership	5 - Very good
31 Oct 2012	Announced (short notice)	Care and support	3 - Adequate
		Environment	4 - Good
		Staffing	3 - Adequate
		Management and leadership	4 - Good
24 Oct 2011	Announced (short notice)	Care and support	4 - Good
		Environment	3 - Adequate
		Staffing	4 - Good
		Management and leadership	4 - Good
30 Jan 2011	Unannounced	Care and support	4 - Good

Date	Type	Gradings	
		Environment	Not assessed
		Staffing	Not assessed
		Management and leadership	3 - Adequate
6 Oct 2010	Announced	Care and support	2 - Weak
		Environment	Not assessed
		Staffing	Not assessed
		Management and leadership	2 - Weak
9 Feb 2010	Unannounced	Care and support	5 - Very good
		Environment	5 - Very good
		Staffing	4 - Good
		Management and leadership	5 - Very good
26 Aug 2009	Announced	Care and support	5 - Very good
		Environment	5 - Very good
		Staffing	4 - Good
		Management and leadership	5 - Very good
20 Nov 2008	Unannounced	Care and support	5 - Very good
		Environment	5 - Very good
		Staffing	5 - Very good
		Management and leadership	5 - Very good
6 Jun 2008	Announced	Care and support	4 - Good
		Environment	4 - Good
		Staffing	5 - Very good
		Management and leadership	5 - Very good

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