care
inspectorate

Glasgow Personalisation Service
Housing Support Service

19 Waterloo Street
Glasgow
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Telephone: 0141 530 1312

Type of inspection: Unannounced
Inspection completed on: 9 May 2018

Service provided by:
Scottish Association For Mental Health

Service provider number:
SP2003000180

Care service number:
CS2004081914

HAPPY TO **TRANSLATE**

About the service

Glasgow Personalisation Service is provided by the Scottish Association for Mental Health (SAMH). It provides an integrated Housing Support/Care at Home service to people within their own homes across Glasgow. The staff office base has recently moved to a centralised location in the city centre. Prior to that, staff were based in four local offices.

The service is provided to people on the basis of self-directed support through the Local Authority's personalisation agenda. This means that following a social work services assessment of need the person is awarded a budget of money to develop and organise a support plan, in this case, using SAMH as the service provider.

The aims of the service include, "a commitment to the ethos of recovery" and responding "flexibly to each person's needs in a wide range of situations and circumstances with person-centred approaches and in recognition of the fluctuating nature of mental health".

The service was previously registered with the Care Commission and transferred its registration to the Care Inspectorate on 1 April 2018.

What people told us

Overall, feedback from people was positive and showed that they were generally happy with the quality of the service. However some people had noticed difficulties with staffing. Comments included,

"If I didn't have SAMH my mental health would not be so good...kept me out of hospital"
"More agency staff recently. I am not very keen on it, they don't know me as well...need to get staffing levels sorted out"

Self assessment

The service did not require to submit a self-assessment as part of this inspection process.

From this inspection we graded this service as:

Quality of care and support	3 - Adequate
Quality of staffing	3 - Adequate
Quality of management and leadership	3 - Adequate

Quality of care and support

Findings from the inspection

Many people we spoke with could identify how the service made a positive difference to their lives. Examples included, a greater sense of safety and security, engagement with their local community and less isolation, a healthier lifestyle and more confidence to manage their tenancy.

People should be cared for by a reliable and flexible service to help ensure that people receive a high standard of support which meets their needs and planned outcomes. Glasgow Personalisation service had experienced another year of management and staffing turnover and instability with staff shortages and over-reliance on agency staff. Feedback from management, staff and people receiving the service highlighted that this situation often led to inconsistency in support. At times, this has affected the reliability and continuity of the service. Difficulties with establishing an effective working rota across the centralised service was raised as a problem affecting the standard of support that people should be able to expect. Examples reported to us included missed visits, late visits, different staff visiting to the ones expected or staff coming at the wrong time (See Recommendations 1 and 2). It was evident that the new management team was taking action to address the highlighted issues of concern, but this was at a very early stage. They recognised the importance of sustained progress.

Care plans should clearly direct the delivery of each person's care and support and measure how well the person's identified needs and wishes are being met. This is important as it ensures that people experience a recovery based service. We could see that record keeping was improving and that a regular system of care and support reviews was being established. This meant that people's needs, preferences and goals were a central focus to the care and support provided. Managers were also able to share with us the progress the service was making to review paperwork to improve the process of personal planning and to make it easier to capture rehabilitation and recovery outcomes. The management team agreed that it would be useful to use a recognised recovery tool to focus staff learning and development on improving knowledge of recovery approaches and related best practice. We will be able to assess progress with this at the next inspection.

It is important that supported individuals experience a responsive service as this encourages their wellbeing and fosters confidence in the organisation providing their care and support. However, when people phoned the office base their call often went to voicemail due to lack of staff and management availability. The manager recognised that communication with the office was an issue and agreed to discuss this matter with his managers to resolve the problem.

Requirements

Number of requirements: 0

Recommendations

Number of recommendations: 2

1. In order to ensure people's needs are appropriately met in a consistent manner, managers should organise rotas so that

- people can build up trusting relationships with a suitably sized team of regular staff
- lessons are learnt to avoid missed and late visits or staff turning up at the wrong time
- people are provided with their weekly rota in advance and are kept informed should any changes occur in their visit schedule.

This will ensure care and support is consistent with the Health and Social Care Standards, which state: My care and support is provided in a planned and safe way, including if there is an emergency or unexpected event (HSCS 4.14) and, I am supported and cared for by people I know so that I experience consistency and continuity (HSCS 4.16).

2. In order to ensure that people receive a reliable service and continuity of care, without the need to rely on the use of agency staff, the service provider should,

- take forward planned action to fill staff vacancies and create an appropriate pool of bank staff
- review its staffing resources and strategy for staff retention to ensure continuity of support.

This will ensure care and support is consistent with the Health and Social Care Standards, which state: My needs are met by the right number of people (HSCS 3.15) and, I experience stability in my care and support from people who know my needs, choices and wishes, even if there are changes in the service or organisation (HSCS 4.15).

Grade: 3 - adequate

Quality of staffing

Findings from the inspection

This inspection has found some improvement with regard to the quality of staffing in recent months. However, the impact of short staffing, poor morale and limited opportunities for reflective practice over a long period of time has meant that people were not yet fully guaranteed a high standard of support from current staffing arrangements across all service locations. The service is at an early stage of transition with regards to developing the quality of staffing and culture expected. This has been reflected in our evaluation of this quality theme.

We observed positive interactions during home visits. It was clear that staff were caring and committed to improving the lives of people. They were person centred, warm and friendly. We also noted that newer staff presented as motivated and were assisting the development of the service.

The service now benefitted from part-time admin support. Staff had also had been issued with smartphones and many reported that this was having a positive impact on communication in the field, time management and report writing. Managers assured us that, where staff needed further support in using the new technology, this would be provided.

People should have confidence that their care and support is of a high standard because staff work well together and have the resources to provide continuity of support. Staff told us they enjoyed their job. However, we were not yet able to confirm at inspection that everyone receiving the service was supported by fully functioning team of people who were well-trained, skilled and motivated. For instance, a number of staff we spoke with had poor morale in the absence of sustained management overview, effective rota systems and stable staffing levels. Some staff did not feel valued or listened to and we found divisions within the team. In addition, developing teamwork and staff ownership of planned changes needed priority attention to ensure there was a unified approach leading to better outcomes for people (See Recommendation 1).

Managers were aware that addressing staff shortages and turnover was essential to improving team performance. (See Recommendation 2 made under Quality Theme 1: Quality of Care and Support).

Previous recommendations in relation to staffing were not fully met due to recurring management changes. This included ensuring that workers engaged in regular team meetings, supervision and annual appraisals and received support through direct observations of their practice. Providing staff with all relevant learning and development opportunities also remained an issue as induction and ongoing training was not informing practice

as we would have expected. We could see that the new management team had made some progress in the last few months to addressing these areas of staff support and performance. However, improvement was still at an early stage. We have therefore repeated associated recommendations to support sustained progress (See Recommendations 2 and 3).

Requirements

Number of requirements: 0

Recommendations

Number of recommendations: 3

1. In order to ensure that people can maintain their confidence in the people who support them, the service provider should focus on developing staff morale, teamwork and ownership of planned changes to foster a more unified approach aimed at achieving better outcomes for people.

This will ensure care and support is consistent with the Health and Social Care Standards, which state: My care and support is consistent and stable because people work together well (HSCS 3.19).

2. In order that supported individuals are supported and protected by people who have a clear understanding of their role and responsibilities, the service provider should ensure that

- team meetings, staff supervision, observational monitoring/spot checks and appraisal take place on a regular basis across the whole service and be informed by feedback from people receiving the support and any other interested parties.

This will ensure care and support is consistent with the Health and Social Care Standards, which state: I have confidence in people because they are trained, competent and skilled, are able to reflect on their practice and follow their professional and organisational codes (HSCS 3.14)

3. In order that people can be assured that staff know how to meet their particular support needs, the service provider should ensure that:

- new staff receive robust induction training when they begin working for the service.
- there are arrangements in place for checking that agency staff have been suitably trained before supporting people, and this should include mental health and substance abuse.
- there is a system for assessing and monitoring the quality of agency staff at service as part of organisational quality assurance.
- opportunities for staff training, learning and development should continue to develop in line with staff's role and people's needs.

This will ensure care and support is consistent with the Health and Social Care Standards, which state: I have confidence in people because they are trained, competent and skilled, are able to reflect on their practice and follow their professional and organisational codes (HSCS 3.14)

Grade: 3 - adequate

Quality of management and leadership

Findings from the inspection

The service was performing adequately overall in regard to this quality theme. This takes account of the capacity to improve and the findings from the other quality themes in this report.

Over the past number of years, the service had been through a difficult and unstable time, particularly as a result of staff turnover/shortages and management changes. This has led to reactive and unsustained approaches to development and quality assurance. We acknowledged the action planning by external management to deal with the highlighted areas for improvement. We were pleased to note that the new management team had made some progress but action plans were at an early stage of implementation given the short time they had been in post. For instance, whilst some improvement had taken place in relation to staff performance, there was still a significant amount of work to be done in relation to teamwork, rota scheduling, staff supervision, training/education, direct observations, appraisal, team meetings and on going upskilling on matters related to a recovery based approach. It is essential that the service provider reviews and reflects on the lessons from this situation and takes appropriate steps to ensure improvements are embedded and maintained. This will include taking whatever steps are necessary to ensure a period of management stability in order to achieve and maintain high standards of care and support for people who receive the service (See Recommendation 1)

Methods of participation remained in need of attention so that everyone (supported individuals, staff and other agencies) could be involved in evaluating the quality of the service. This should now be prioritised in order to ascertain the views and understanding of all stakeholders on the progress and outcomes of the service's improvement plan (See Recommendation 2).

Requirements

Number of requirements: 0

Recommendations

Number of recommendations: 2

1. In order to ensure that people can have confidence in the staff, management and organisation providing support, the service provider should take whatever steps are necessary to,

- achieve a period of management stability
- ensure continued improvement and that the improvements achieved so far are embedded and maintained.

This will ensure care and support is consistent with the Health and Social Care Standards, which state: I use a service and organisation that are well led and managed (HSCS 4.23)

2. In order to ensure that people feel valued and that their views matter, the service provider should give priority to resuming participation methods across the service and carry out a formal survey of all stakeholders to gather feedback on the progress and outcomes of the service's improvement plan.

This will ensure care and support is consistent with the Health and Social Care Standards, which state: 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 4.8).

Grade: 3 - adequate

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

Previous requirements

Requirement 1

The provider must ensure that personal plans are reviewed at intervals in keeping with required legislation and show involvement of service users. In order to achieve this: All personal plans must be reviewed at least once in every six month period, and when there is a significant change in a service user's health, welfare or safety needs.

This is to comply with SSI 2011/210. Regulation 5(2) Personal Plans. A requirement to review the personal plan.

This requirement was made on 10 July 2017.

Action taken on previous requirement
We found that the majority of people had received a review of their support and that remaining overdue reviews were now scheduled to take place. Managers had also developed a tracker system to maintain a minimum of six monthly reviews going forward. On this basis we have judged the requirement to be met.

Met - outwith timescales

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

Previous recommendations

Recommendation 1

Managers should ensure that all support plan documentation is outcome focused, kept up to date and fully completed, including, risk assessments, and show that everyone has been involved and agree with what is written.

National Care Standards (NCS) 3 Care at Home - Your Personal Plan

This recommendation was made on 10 July 2017.

Action taken on previous recommendation
We found improvements with regard to maintaining accountable support plan paperwork and demonstrating people's involvement. Managers were in the process of introducing a new outcome based framework across the service.

Recommendation 2

Regular team meetings, staff supervision and annual appraisal systems should be prioritised across the whole service and be informed by feedback from supported individuals and any other interested parties.

NCS 4 Care at Home - Management and Staffing

This recommendation was made on 10 July 2017.

Action taken on previous recommendation
Changes in management had slowed down progress with this recommendation, which we have reworded in this report.

Recommendation 3

The service should introduce a system of observational monitoring of staff practice across all service locations.

NCS 4 Care at Home - Management and Staffing

This recommendation was made on 10 July 2017.

Action taken on previous recommendation
Changes in management had slowed down progress with this recommendation, which we have reworded in this report.

Recommendation 4

Opportunities for staff training, learning and development, should continue to develop in line with staff's role and service users' needs.

NCS 3 Care at Home - Your Personal Plan and NCS 4 Care at Home - Management and Staffing

This recommendation was made on 10 July 2017.

Action taken on previous recommendation
Changes in management had slowed down progress with this recommendation, which we have reworded in this report.

Complaints

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

Enforcement

No enforcement action has been taken against this care service since the last inspection.

Inspection and grading history

Date	Type	Gradings	
19 May 2017	Unannounced	Care and support	3 - Adequate
		Environment	Not assessed
		Staffing	4 - Good
		Management and leadership	4 - Good
11 May 2016	Unannounced	Care and support	3 - Adequate
		Environment	Not assessed
		Staffing	3 - Adequate
		Management and leadership	3 - Adequate
28 Apr 2015	Unannounced	Care and support	3 - Adequate
		Environment	Not assessed
		Staffing	3 - Adequate
		Management and leadership	3 - Adequate
28 Apr 2014	Unannounced	Care and support	3 - Adequate

Date	Type	Gradings	
		Environment	Not assessed
		Staffing	3 - Adequate
		Management and leadership	3 - Adequate
17 Apr 2013	Unannounced	Care and support	4 - Good
		Environment	Not assessed
		Staffing	4 - Good
		Management and leadership	4 - Good
3 May 2012	Unannounced	Care and support	5 - Very good
		Environment	Not assessed
		Staffing	5 - Very good
		Management and leadership	4 - Good
31 Aug 2011	Unannounced	Care and support	6 - Excellent
		Environment	Not assessed
		Staffing	5 - Very good
		Management and leadership	5 - Very good
6 Oct 2010	Announced	Care and support	5 - Very good
		Environment	Not assessed
		Staffing	Not assessed
		Management and leadership	5 - Very good
15 Oct 2009	Announced	Care and support	5 - Very good
		Environment	Not assessed
		Staffing	4 - Good
		Management and leadership	Not assessed
29 Jan 2009	Announced	Care and support	4 - Good
		Environment	Not assessed
		Staffing	4 - Good
		Management and leadership	4 - Good

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