

Maxwell Drive Housing Support Service

35 Maxwell Drive Pollokshields Glasgow G41 5DT

Telephone: 0141 429 8188

Type of inspection:

Unannounced

Completed on:

13 February 2019

Service provided by:

Simon Community Scotland

Service no:

CS2014327865

Service provider number:

SP2003000169



Inspection report

About the service

The Care Inspectorate regulates care services in Scotland. Information about all care services can be found on our website at www.careinspectorate.com

This service was registered with the Care Inspectorate on 30 January 2015.

Maxwell Drive is operated by the Simon Community Scotland. It is registered to provide a combined housing support and care at home service. The service has the capacity to support eight people.

Situated within a large sandstone villa in a residential area in the south side of Glasgow, the service provides support to women who are at risk of becoming homeless and have complex needs. The accommodation comprises en-suite bedrooms with shared communal facilities. In addition, there is a self-contained flat attached to the property.

Staff work in a person-centred way to support women staying at the service to develop the skills and resources to sustain positive outcomes.

There have been changes to the management team, including a new registered manager, since the previous inspection.

What people told us

We examined questionnaires returned to us from people using the service, in advance of the inspection. We found that people were highly complimentary in relation to the care and support provided.

We spoke with two people during the inspection. Overall, feedback was very positive about the care and support provided by staff. Comments suggested that the service was well-managed.

"The staff are really good here. They really care about you."

"I have no complaints about the service, it is well-managed, I feel listened to."

"The place here is great, if your head is in the right place."

We received comments in one questionnaire in relation to a perceived need for more staff. We explored this as part of the inspection and concluded there was no basis to support this.

Self assessment

On this occasion the service was not required to complete a self assessment.

From this inspection we graded this service as:

Quality of care and support5 - Very GoodQuality of staffingnot assessedQuality of management and leadership5 - Very Good

Quality of care and support

Findings from the inspection

People were encouraged to give their views on the service by using questionnaires, care reviews and group meetings. People felt listened to by support staff and the management team, meaning that support was aligned to people's preferences and wishes. We identified that the service could be better at recording what impact the service has on the day-to-day experiences of people using the service.

Support is provided by an experienced, highly motivated and well-trained staff team which see each person's worth. This means that people benefit from staff who have a very good level of understanding of their unique circumstances and background experiences and are well-equipped to provide appropriate interventions including the involvement of external professionals and independent advocates. This helps ensure that each person's rights are promoted and protected.

People should be empowered to develop their individual support plans and these should reflect the strengths and abilities of each individual. We identified a need for the ongoing development and improvement of recording. We shared examples of how individual risk assessments could be developed to be a more accurate reflection of the person's current needs and strategies being used to minimise risks.

Specific assessments were used with input from each person to help them assess how they were progressing in their recovery journey. This is a good method to help each person identify areas that they would like to work on and think about supports needed. We concluded that these could be used more consistently and received assurance that plans were in place to help this happen.

People should be confident that there are systems in place to record when accident and incidents occur and look at the potential cause. This means that measures can be identified to reduce the risk of recurrence. We identified that records at the service could improve to reflect early interventions that were put in place to help keep people safe. We discussed this with the management team and were confident that they would implement measures to address this area.

People have benefitted from the service developing a greater range of planned activities held within the service, since the previous inspection. These offered opportunities for social interactions, developing relationships, learning new skills and building confidence.

Requirements

Number of requirements: 0

Recommendations

Number of recommendations: 0

Grade: 5 - very good

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Quality of staffing

This quality theme was not assessed.

Quality of management and leadership

Findings from the inspection

People can be assured that the service is committed to involving them with the ongoing development and improvement of the service. A good example of this has been the involvement of a person who previously used the service and a person currently using the service in completing the service self evaluation and improvement plan.

People using the service had ongoing input through planned meetings to help the service identify how they are progressing with the improvement plan and if this is aligned to meeting their needs and preferences.

The service self evaluation is aligned to the headline outcomes of the Health and Social Care Standards which should help keep the service focused on how it promotes positive outcomes for people who use the service.

People can be confident that the service monitors key areas using a suite of audits to check that they are promoting the safety and wellbeing of individuals. However, we concluded some of these could be more robust in view of our findings relating to support plans and assessments including risk assessments. We received commitment that these areas would be taken forward by the service.

We identified improvement that was needed to be made in relation to notifying the Care Inspectorate following specific incidents with people using the service and updating the outcomes and measures that had been put in place to reduce the risk of harm. We shall make a recommendation in connection with this area. (See recommendation 1)

The audits carried out by the service revealed some improvements had been made which benefited people. An example of this had been an increase in the number of planned activities shaped by people who used the service

The service had re-introduced reflective practice sessions with staff which helped identify creative solutions to issues that may arise with individuals and promoted consistency of the approach when providing support. The management team had provided very good supports to staff which had helped individual staff grow in confidence when fulfilling their role. Staff have a clear focus on how they can best support people with their recovery journey.

Requirements

Number of requirements: 0

Recommendations

Number of recommendations: 1

1. The service provider should ensure that they fully adhere to their legal responsibilities of providing relevant initial and post event details to the Care Inspectorate when there are significant events which have led to harm.

This ensures that support is consistent with the Health and Social Care Standards which state:

I am protected from harm, neglect, abuse, bullying and exploitation by people who have a clear understanding of their responsibilities. (HSCS 3.20)

Grade: 5 - very good

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

Previous requirements

There are no outstanding requirements.

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

Previous recommendations

There are no outstanding recommendations.

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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Enforcement

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

Inspection and grading history

Date	Туре	Gradings	
11 Jan 2018	Unannounced	Care and support Environment Staffing Management and leadership	6 - Excellent Not assessed 5 - Very good Not assessed
16 Dec 2016	Unannounced	Care and support Environment Staffing Management and leadership	5 - Very good Not assessed Not assessed 5 - Very good
21 Jan 2016	Unannounced	Care and support Environment Staffing Management and leadership	5 - Very good Not assessed 5 - Very good 5 - Very good

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