Share Scotland - Glasgow
Housing Support Service

6b Moorpark Court
33 Dava Street
Govan
Glasgow
G51 2JA

Telephone: 0141 445 8992

Type of inspection:
Unannounced

Completed on:
11 October 2019

Service provided by:
Share Scotland

Service provider number:
SP2003002639

Service no:
CS2003053749
About the service

Share Scotland Glasgow provided support to adults with complex learning and physical needs in the community; either within accommodation where they live alone or within small group living settings which they share with other people.

The service supported people across Glasgow and West Dunbartonshire. There is a core staff team in each house providing person centred care to each individual.

The organisation is committed to “Providing a service that develops alongside the people it supported. It not only strives to meet their current needs, but also offers people an environment in which they can experience new opportunities, meet new people and face new challenges”. At the time of the inspection the service was supporting 21 people.

What people told us

With some support from staff, we heard the views of nine service users and, without exception, their comments about the service were very positive. We also received eight care standards questionnaires from service users and their families.

They described staff in ways which suggested they were very knowledgeable, resourceful, caring and enabling.

Some examples of their comments included:

“I enjoy living here, it’s my house. The staff are very good at helping me to get to my activities.”

“I still like to get involved in what’s going on in and outside my house.”

“We have no issues with the service provided, the staff are very accommodating.”

“As far as we are concerned, we have never seen our relative’s support plan, although we are aware of its existence. Whilst the staff do their very best with looking after our relative and taking care of his everyday needs, he is very autistic and we feel more training could be offered to help staff with the specifics of this. We must praise the staff for the tremendous work they do however.”

“We are very happy with the care and support our relative receives.”

Self assessment

The service was not asked to submit a self assessment prior to this inspection.

From this inspection we graded this service as:

Quality of care and support 5 - Very Good
Quality of staffing 5 - Very Good
Quality of management and leadership 4 - Good
Quality of care and support

Findings from the inspection

Personal plans should give clear direction about how to deliver people’s care and support, and how their needs will be met. We reviewed various personal plans in relation to activities, people’s health and well being and how service users finances were managed.

We saw that people experienced positive outcomes through their activity programmes, examples included, music, art, dance, therapies, meeting friends at day centres, massage, dinner with families, going to the pub, and football. It was clear that this was important to people in maintaining their health and well-being, and being active.

We reviewed the life histories of people, and found that people were able to express their likes, and dislikes. This also meant that staff would be fully informed about their past, including their health and care experiences, again ensuring that people received support that met their needs.

However, a previous complaint to the service had recommended that people experiencing care should experience high quality care and support that is right for them. This should include an agreed plan of support reflecting how they choose to use preventative healthcare services. Whilst we saw that the service had planned to speak with GPs and families in order to update peoples’ care plans to reflect how they are being supported to use preventative healthcare services, this is on-going and we have re written this as an area for improvement. See recommendation one.

Personal plans included; associated risks and how these could be managed. This meant that people could make informed choices and decisions about the risks they took in their daily lives and were encouraged to take positive risks which enhanced their quality of life.

Our observations showed that staff were compassionate, and very supportive, showing dignity and respect at all times. Examples of this were when people were in distress and required reassurance. This meant that people experienced positive outcomes because of the care and support they received.

We saw that where someone’s control or choices were restricted, it was clearly justified with the relevant consents, and legal documents in place. This meant that people were fully informed and included, and also complied with relevant legislation.

People were involved in, and told us how they enjoyed mealtimes in a relaxed and supportive atmosphere. This was important in ensuring that food could be enjoyed in a setting which was relaxed and peaceful, and also that they received appropriate nutrition and hydration.

We concluded that people who used this service could be confident that the quality of care and support they received was of a very good standard.

Requirements

Number of requirements: 0
Recommendations

Number of recommendations: 1

1. People experiencing care should experience high quality care and support that is right for them. This should include an agreed plan of support when required by the service user reflecting how they choose to use preventative healthcare services.

This is to ensure care and support is consistent with Health and Social Care Standard 1.28: I am supported to make informed lifestyle choices affecting my health and wellbeing, and I am helped to use relevant screening and healthcare services.

Grade: 5 - very good

Quality of staffing

Findings from the inspection

Through our observations we saw that people experienced warmth, kindness, and compassion from the staff team.

Staff demonstrated knowledge and competency in their roles and had the support to develop their skills to support people who used the service. The manager had an overview of all staff training, supervision, and appraisals ensuring that staff had the relevant skills to support the people who used the service. This meant that people’s health and well-being was being maintained.

Staff that we met told us that the service was very proactive in supporting them to achieve their professional qualifications, this allowed them to be registered appropriately with their professional body, the Scottish Social Services Council. This meant that people could be confident that a professional staff team were supporting them.

Following a review of the service’s safer recruitment procedure we were confident that a staff team who had been appropriately and safely recruited was supporting people. This meant that people were kept safe.

We found that staff responded to people in distress or displayed significant deterioration in their health and well-being; this meant that people were protected from harm and kept safe.

We saw that staff knew the people who used the service very well, and that their support was consistent and stable because people worked well together.

We concluded that people using this service were being supported by a very good staff team.

Requirements

Number of requirements: 0
Recommendations

Number of recommendations: 0

Grade: 5 - very good

Quality of management and leadership

Findings from the inspection

The service used a range of quality assurance systems including internal and external audits. These covered key areas, for example, medication, care planning, and spot checks within people’s homes. This meant that people experienced care and support which was managed and led well. It also meant that people received the appropriate medication, were kept safe, and that their care and support was right for them.

The management team promoted a culture of continuous improvement. We could evidence this from team meetings and the actions taken. We reviewed the service’s development plan which ensured the service prioritised areas for development and how they monitored the quality of service provision. We discussed with the service the need to develop an improvement plan which could measure the service’s successes in providing quality care and support.

We looked at a sample of accidents and incidents to check that these were properly recorded, reported and where necessary appropriate action taken, this ensured that the service could respond to the changing needs of people who used the service.

We reviewed how the service supported people to manage their finances. A complaint received by the service had recommended that the service should improve the systems in place with any aspects of financial management support to people. This should be part of measures to increase transparency and understanding and avoid any potential for financial abuse.

We saw that the service was developing an agreement for all service users which will make any financial transactions transparent and protect the financial well being of people. However, we saw that the service still had some work to do in order to meet this recommendation. We have re-written this recommendation to reflect our findings. See recommendation one.

We reviewed the conditions of registration with the management team and asked them to consider ways of meeting these conditions, in particular condition five where it states “Staff will not use a service user’s home as an office base or as venue for supervision/appraisal or other staff meetings”. We will monitor this at future inspections.

We concluded that the people who used this service could experience good outcomes in a service which operated to a high standard due to the robust management and leadership demonstrated by the management team, and the skills, dedication, and motivation of staff who support them.

Requirements

Number of requirements: 0
Recommendations

Number of recommendations: 1

1. The service should improve the systems in place with any aspects of financial management support to people. This should be part of measures to increase transparency and understanding and avoid any potential for financial abuse.

This is to ensure care and support is consistent with Health and Social Care Standard 3.20: I am protected from harm, neglect, abuse, bullying and exploitation by people who have a clear understanding of their responsibilities.

Grade: 4 - 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

Recommendation 1

People experiencing care should have confidence that the organisation will provide the agreed level of care and support. The service should assess, record and continually review how they will ensure staffing resources are adequate to meet support packages that the organisation commits to.

This is to ensure care and support is consistent with Health and Social Care Standard 4.27: I experience high quality care and support because people have the necessary information and resources.

This recommendation was made on 10 September 2019.

Action taken on previous recommendation

The service had discussed this issue with the local authority concerned and is continually discussed at provider meetings by which the provider can inform the council, service users and their families if agreed staffing levels fall below the agreed threshold.
This recommendation had been met.

**Recommendation 2**

The service should improve the systems in place with any aspects of financial management support to people. This should be part of measures to increase transparency and understanding and avoid any potential for financial abuse.

This is to ensure care and support is consistent with Health and Social Care Standard 3.20: I am protected from harm, neglect, abuse, bullying and exploitation by people who have a clear understanding of their responsibilities.

**This recommendation was made on 10 September 2019.**

**Action taken on previous recommendation**

The service was working toward a new finance / service agreement which will ensure that people using the service will be fully involved and agree how their finances will be managed. It was too early to determine the effectiveness of this and will be reviewed again at future inspections.

We have re-written this as a further area for improvement to reflect our findings.

**Recommendation 3**

People experiencing care should experience high quality care and support that is right for them. This should include an agreed plan of support reflecting how they choose to use preventative healthcare services.

This is to ensure care and support is consistent with Health and Social Care Standard 1.28: I am supported to make informed lifestyle choices affecting my health and wellbeing, and I am helped to use relevant screening and healthcare services.

**This recommendation was made on 10 September 2019.**

**Action taken on previous recommendation**

The service was working toward a new finance / service agreement which will ensure that people using the service will be fully involved and agree how their finances will be managed. It was too early to determine the effectiveness of this and will be reviewed again at future inspections.

We have re-written this as a further area for improvement to reflect our findings.

**Complaints**

Please see Care Inspectorate website (www.careinspectorate.com) for details of complaints about the service which have been upheld.
no enforcement action has been taken against this care service since the last inspection.

### Inspection and grading history

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