

Glasgow East Housing Support Service Housing Support Service

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Type of inspection:
Announced (short notice)

Completed on:
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Service provided by:
Blackwood Homes and Care

Service provider number:
SP2003000176

Service no:
CS2020379409

About the service

Glasgow East Housing Support Service and Care at Home Service is registered to provide a housing support and care at home service to adults with disabilities and older people in their home and in the community. The provider is Blackwood Homes and Care.

The service is located in the Parkhead area of Glasgow and is well serviced with local transport, shops and leisure facilities.

The registered manager is responsible for coordination of the overall running of the service, supported by three team leaders and 43 support staff. People's care and support packages ranged from 20 hours to 92 hours per week. Examples of care provided, ranged from social supports, practical home maintenance and assistance with personal care.

The service aims to develop a modern standard of accessible homes, combining technology, modern construction and engagement with people of all ages who live with a disability.

There are 24 flats onsite, and at the time of the inspection 23 flats were occupied. Each flat has a built in CleverCogs (www.blackwoodgroup.org.uk/clevercogs) system that offers a bespoke care and response service around people's care needs.

This was a short notice announced inspection by two inspectors to evaluate how well people were being supported. The inspectors were supported by an inspection volunteer. We evaluated the service based on key areas that are vital to the support and wellbeing of people experiencing care.

We carried out this inspection using virtual technology. This was the first inspection of the service since registration.

What people told us

We made contact with five people who received support from the service and six family members.

People told us they were happy with the service they were receiving; some comments were:

"I like having my own flat."

"I feel more independent living here."

"The carers are prepared to do anything you ask them to do."

Families told us:

"The carers know what to do."

"Lots of different staff."

"My husband has a lot more freedom, can get out on his own."

"Can be difficult to find information."

From this inspection we evaluated this service as:

In evaluating quality, we use a six point scale where 1 is unsatisfactory and 6 is excellent

How well do we support people's wellbeing?	3 - Adequate
How good is our care and support during the COVID-19 pandemic?	4 - Good

Further details on the particular areas inspected are provided at the end of this report.

How well do we support people's wellbeing?

3 - Adequate

Our focus in this inspection area was to establish how well people's wellbeing was supported. We found the performance of the service in relation to this key question to be adequate.

We saw that people were treated with dignity and respect. Staff told us that the values of the Blackwood group were important to them and a key factor in joining the organisation.

People told us that staff were friendly and always helpful. Staff demonstrated a good knowledge base and understanding of people's support needs. We observed staff asking people for their views rather than answering for them. This supported people to feel valued and have a voice.

We sampled people's personal plans and found these to contain good information to direct staff on how people wished to be supported, especially at times of distress. Personal plans reflected people's aspirations as well as promoting and enabling independence. This ensured continuity in the staff teams' approach and supported positive outcomes for people.

People were encouraged to be as active as they could be within the limitation of the conditions they were living with. We saw good examples of people being supported back to employment, online education and attending theatre groups. People had been enabled to move from living in a care home to living more independently in their own flat. This supported people's sense of wellbeing and worth.

The service promoted an enabling approach for people to develop an understanding of risk, and the right to make choices and take informed personal risk. We saw good use of advocacy services to support this for one individual. Staff demonstrated a good understanding of adult support and protection issues and how to keep people safe.

We saw that people's health was supported by the good relationships fostered with other health professionals that supported people using the service. People were encouraged to make healthy lifestyle choices through diet and exercise and attending specialist healthcare appointments when needed. Staff had received training in the complex health conditions that people were living with, ensuring they had the skills and knowledge to support people.

People should experience consistency and continuity from the people providing their care and support. The service had a number of staff vacancies. We received mixed feedback from some families regarding the use of agency staff providing care. We were pleased to see that the service tried to minimise the disruption to people using the service by ensuring agency staff were advanced booked to ensure continuity in staffing. Agency staff were given access to the service's training resources to reduce any potential risk to customers. We acknowledged that there is a recruitment challenge for care services at this time and were reassured that the service had an ongoing recruitment drive and commitment to fill all staff vacancies. We advised the service they should keep customers and families updated regularly regarding developments in this area. (See area for improvement 1.)

People were empowered to have control over their medication. This promoted choice and independence. People should benefit from robust medication management systems. The service had notified us of a number of medication administration errors. These had been reported and followed up appropriately, with additional training provided where need was identified. The provider was currently reviewing the medication policy. We advised management that staff had told us they felt the training given at induction regarding safe medication administration processes could be better. (See area for improvement 2.)

Families told us that they found it difficult at times to navigate the CleverCogs system and access information of their loved ones' support and care provision. As a new service, it had been a challenge to engage fully with the families/representatives of those living at the service due to restrictions on social contacts during the pandemic. As society is opening up more, the service should take the opportunity to revisit with their customers and their families/representatives how to access and take full advantage of the CleverCogs system. (See area for improvement 3.)

Areas for improvement

1. The service provider should ensure that care and support is provided by a consistent care staff group who have a good understanding and knowledge of people's needs, likes and dislikes.

This is to ensure care and support is consistent with the Health and Social Care Standards (HSCS) which state:

"I know who provides my care and support on a day to day basis and what they are expected to do. If possible, I can have a say on who provides my care and support." (HSCS 3.11)

2. To ensure that any treatment or intervention is safe and effective, the service should review the current medication training for staff responsible for medication administration at induction and refresher training as identified through direct observations of practice.

This is to ensure care and support is consistent with the Health and Social Care Standards (HSCS) 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. The service should support customers and their families/representatives to access and understand the full extent of the enabling technology within the service.

This is to ensure care and support is consistent with the Health and Social Care Standards (HSCS) which state:

"I receive and understand information and advice in a format or language that is right for me." (HSCS 2.9)

How good is our care and support during the COVID-19 pandemic?

4 - Good

7.2 Infection prevention and control practices are safe for people experiencing care and staff.

Our focus in this inspection area was to establish if infection prevention and control (IPC) practices supported a safe environment for both people experiencing care and staff. We found the performance of the service in relation to this quality indicator to be good.

At the time of the inspection, there was no one in the service that was positive to Covid-19.

Through our virtual observations we saw safe IPC practice. Staff were able to tell us the correct procedures for putting on (donning) and taking off (doffing) of personal protective equipment. Staff reported there was an adequate supply of equipment. This ensured that both staff and people using the service remained protected and safe from cross infection.

Management communicated effectively with staff, this ensured they were informed about Covid-19 guidance. Robust quality assurance processes were in place and staff told us of the direct observations of IPC practice by management. Communication with staff across the organisation with regard to Covid-19 and updated guidance was communicated timeously.

7.3 Leadership and staffing arrangements are responsive to the changing needs of people experiencing care.

Our focus in this inspection area was to establish the responsiveness of leadership and staffing arrangements to the changing needs of people. We found the performance of the service in relation to this quality indicator to be good.

The management team had an understanding of the potential challenges of Covid-19.

The service had a 12 weekly cycle for staff supervision which included 1:1 meetings and direct observations of practice which was in date. Peer learning was embedded into the service as new staff were recruited. There was a robust induction programme for staff that ensured staff were competent and skilled prior to delivering care. All staff had completed their mandatory training regarding Covid-19 and IPC practices. Staff told us that they had received supervision and that management were supportive. This ensured people were receiving care and support that reflected good practice guidance. Staff morale was good and they described receiving good support from the management team and the organisation.

People should experience consistency and continuity from the people providing their care and support. Although a number of agency staff were being used, the service had good systems in place to ensure agency staff knew what was required of them when working in the service. We saw good examples of care summary sheets for customers which directed staff in people's current support needs. Agency staff also had access to some of the service's training resources. Staff were available in sufficient numbers to support people's needs. The CleverCogs system allowed people to check on their support arrangements and be able to notify staff if they were going out. Staff were then alerted by mobile phones if a customer's support needs changed. This afforded people flexibility and control over their day to day activities.

Staff confirmed that they were carrying out Covid-19 lateral flow tests twice per week. This reduced the risk of staff unknowingly passing any Covid-19 infection to people who may be vulnerable and already at risk.

Complaints

There have been no complaints upheld since the service registered.

Details of any upheld complaints are published at www.careinspectorate.com

Detailed evaluations

How well do we support people's wellbeing?	3 - Adequate
1.1 People experience compassion, dignity and respect	4 - Good
1.2 People get the most out of life	4 - Good
1.3 People's health and wellbeing benefits from their care and support	3 - Adequate

How good is our care and support during the COVID-19 pandemic?	4 - Good
7.2 Infection prevention and control practices are safe for people experiencing care and staff	4 - Good
7.3 Leadership and staffing arrangements are responsive to the changing needs of people experiencing care	4 - Good

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