

Community Service Housing Support Service

Pavilion 6a, Moorpark Court 35 Dava Street, Govan Glasgow G51 2BQ

Telephone: 01414 401 309

Type of inspection:

Unannounced

Completed on:

1 March 2023

Service provided by:

Mainstay Trust Ltd.

Service provider number:

SP2003000175

Service no:

CS2004077238



About the service

Community Service is provided by Mainstay Trust Limited and is registered to provide a housing support and care at home service to people with a range of disabilities in their own homes and in the community.

The office base is in the Govan area of Glasgow and it provides a city-wide service. The building is over two floors and consists of a reception area, an office space on the upper floor and The Hub on the ground floor which offers facilities for people who experience support.

There is a computer suite, kitchen, small breakaway rooms and a large open space that is used for a variety of activities. The toilet and changing facilities provide equipment suitable for the needs of people who use the service.

Mainstay Trust's overall objective is: "To create an environment where individuals can achieve their full potential and achieve the best day possible for every person we support." Their aims include "To provide a structure of support which will assist and encourage individuals to gain both skills and confidence to lead to a more autonomous and independent life."

At the time of the inspection, 24 people were experiencing support.

About the inspection

This was an unannounced inspection which took place between 22 February and 1 March 2023. The inspection was carried out by two inspectors from the Care Inspectorate.

To prepare for the inspection we reviewed information about this service. This included previous inspection findings, registration information, information submitted by the service and intelligence gathered since the last inspection.

In making our evaluations of the service we:

- met with seven people using the service
- spoke with three relatives
- spoke with 13 support staff, the service manager, the operational manager and a director
- received feedback from a commissioning officer and care manager
- reviewed documents.

Key messages

- People who received support and their relatives were very satisfied with the support provided by genuine, caring teams of staff.
- Support meant people had acquired new skills, became more independent, were helped to keep well, had developed more interests, connected with their community and made friendships.
- Support plans, care reviews and records to capture the positive impacts the service had made needed developed.
- Quality assurance systems needed further implementation and development to help the management team to have a clear overview and direct priorities.

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?	4 - Good
How good is our leadership?	3 - Adequate

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

How well do we support people's wellbeing?

4 - Good

We made an evaluation of good as there was a number of important strengths which, taken together, clearly outweighed areas for improvement. The strengths had a significant positive impact on people's experiences and outcomes.

We observed warm, genuine and nurturing interactions between staff and people being supported.

Feedback from the people being supported was very positive in relation to staff.

"I love my support workers, they are great."

"They are good."

"It's good having the staff, it makes me happy."

Feedback from relatives indicated that they found staff had established positive relationships with their loved ones, were respectful and they felt involved with decisions around the ongoing support of their loved ones.

"I've had no problems with the service. They have been the one constant in times of change."

"Overall, I feel that there are good communications between the service and us as relatives."

People benefited from small teams of staff who provided their support. People were informed in advance if there were any planned changes to the staff who would provide support.

Staff understood and were committed to promoting the rights of people they supported

People benefited from support which struck a good balance between promoting independence and helping to keep them safe.

Staff monitored the changing needs of people and advocated on their behalf. They provided ongoing support within other settings for example when people were admitted to hospital. Hospital passports were in place. These helped hospital-based staff understand the current needs of people.

People benefited from staff promoting healthy lifestyles including support with healthy eating and planned weight loss.

The legal status of people was known and was used to inform decisions around any health and welfare intervention.

People were helped to keep well and have a sense of wellbeing. This meant they maintained or increased important skills and engaged with people and services within their local community. Feedback from people receiving support and relatives illustrated how they had benefited.

"The staff have really helped my relative to develop. She is encouraged to be as independent as she can be including when washing, dressing and using the toilet. Her confidence has grown as a result."

"Her [relative's] interests have increased - she enjoys craft activities and going out into the community for meals, cinema and ten pin bowling - staff are building this up again post pandemic."

"I go to museums, cookery classes, the men's shed group, bingo, cinema and plan to go on holiday."

Although people benefited from the support and had positive experiences, these were not being consistently recorded within associated documentation.

Staff had identified changes and actively sought medical input but had not recorded the important support that they had provided to access services.

Care reviews were not consistently up-to-date. These are important for checking that support is meeting people's current needs. The service missed opportunities to use care reviews to capture the views of people and reflect the positive outcomes achieved as a result of support. See How good is our leadership?

Staff felt confident that they knew how to support people when they became emotionally distressed due to guidance from management and information held within support plans. People were appropriately supported to take medication to keep well.

Regular audits had been carried out to check that people were receiving the right medicine at the right time. People who needed support with the handling of money had been appropriately supported and checks had been completed to ensure that these had been used to benefit people.

Staff had supported people to use technology to help maintain contact with family members during the pandemic.

People benefited from receiving support from staff within small teams and not having agency staff who provided support. This had the effect of cohorting staff and reducing the risk of transmission as well as promoting continuity of care.

Staff had received infection prevention and control (IPC) training as part of the induction programme. However, there was a lack of clarity around how updates and changes to best practice guidance was communicated to staff. Some shared that this was mainly done verbally and others indicated written guidance had previously been sent.

In order that people using the service can be confident that staff consistently follow good IPC practice, the management team should use a range of methods to ensure staff are up-to-date and consistently follow best practice guidance. See How good is our leadership?

There was a range of personal protective equipment (PPE) available for staff use. Staff did not consistently know how this should be worn and removed.

Cleaning rotas were in place for people who received support with housework. We found standards of cleanliness to be very good within the households that we visited. Staff had encouraged people to be involved in keeping their environment clean and well-maintained.

How good is our leadership?

3 - Adequate

We made an evaluation of adequate as there were some strengths but these just outweighed weaknesses. Strengths may still have a positive impact but the likelihood of achieving positive experiences and outcomes for people is reduced significantly because key areas of performance need to improve.

There had been changes to the management team since the previous inspection. The management team's prime focus had been to ensure people received support during the pandemic.

The new manager and management team were committed to making improvement and understood the importance of involving people to help take the service forward.

We recognised that there had been a range of quality assurance tools previously used to promote good standards of support and checking staff adherence to good practice.

Staff consistently communicated that the management team had been very supportive and responsive to questions and concerns, and they received good advice to help them fulfil their role. However, due to the manager directly delivering support this had an impact on the implementation of quality assurance processes meaning work was needed to develop an overview of priorities.

Although, there was a range of audits and systems in place, which if used appropriately can help inform the management team if they are consistently keeping people safe and well, there were some areas that required improvement.

Information in support plans and care reviews needed updated to ensure staff are appropriately informed and take a consistent approach when providing support. Accidents and incidents had been recorded and referrals made to external agencies when issues around adult support and protection had been identified. However, these had not always translated into the appropriate notification to the Care Inspectorate. Staff should receive planned support from management and opportunities to share their views. This support should include direct observations of practice, team meetings and a programme of supervision.

The service had developed a comprehensive induction programme which helped equip staff with necessary knowledge and skills when initially providing support. However, we identified key pieces of training which would enhance staff skills and understanding. This included training relevant to supporting people living with dementia, mental health and refresher infection prevention and control training.

To ensure people being supported are adequately protected; the recruitment of staff should follow the good practice guidance: Safer Recruitment Through Better Recruitment. This should include ensuring robust preemployment checks are carried out.

Quality assurance processes and improvement plans should be informed by the views of people who use the service, their relatives, staff and external stakeholders. We concluded the management team missed opportunities to capture many positive comments and shared experiences by people who used the service and their relatives (see requirement 1).

Requirements

1. By 2 June 2023, the provider must ensure that quality assurance processes are carried out competently and effectively, and in a manner which achieves improvements in the provision of the service. To do this, the provider must ensure:

- a) Internal quality assurance systems are effectively identifying any issue which may have a negative impact on the health and welfare of people supported. This includes but is not limited to support plan audits, care reviews and risk assessments are up-to-date and accurately reflect the needs of each person and detail support in place to meet identified needs.
- b) Any adult support protection incident is reported to the Care Inspectorate and reinforce each staff member's responsibilities in reporting.
- c) Regular staff observations, staff meetings and a programme of regular planned staff supervisions are in place. All staff have up-to-date training relevant to the needs of people being supported.
- d) Recruitment of staff adheres to best practice guidance.
- e) People who use the service, their relatives, staff and other stakeholders are involved with the ongoing improvement and development of the service.

This is to comply with Regulation 4(1)(a) (Welfare of users) and Regulation 15(b)(i) (Staffing) of The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/210).

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that: "I benefit from a culture of continuous improvement, with the organisation having robust and transparent quality assurance processes" (HSCS 4.19) and "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).

What the service has done to meet any areas for improvement we made at or since the last inspection

Areas for improvement

Previous area for improvement 1

The manager should ensure that information relating to positive outcomes achieved is unique and understandable to the individual service user.

This is to ensure care and support is consistent with the Health and Social Care Standards which state that, "I experience high quality care and support because people have the necessary information and resources." (HSCS 4.27)

This area for improvement was made on 7 October 2019.

Inspection report

Action taken since then

See comments in relation to care reviews, the need for updating information held within support plans and capturing the views of people under How good is our leadership? Based upon our findings, the area for improvement was not met and now forms part of requirement 1.

Complaints

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

Detailed evaluations

How well do we support people's wellbeing?	4 - Good
1.1 People experience compassion, dignity and respect	5 - Very Good
1.3 People's health and wellbeing benefits from their care and support	4 - Good
1.5 People's health and wellbeing benefits from safe infection prevention and control practice and procedure	4 - Good

How good is our leadership?	3 - Adequate
2.2 Quality assurance and improvement is led well	3 - Adequate

To find out more

This inspection report is published by the Care Inspectorate. You can download this report and others from our website.

Care services in Scotland cannot operate unless they are registered with the Care Inspectorate. We inspect, award grades and help services to improve. We also investigate complaints about care services and can take action when things aren't good enough.

Please get in touch with us if you would like more information or have any concerns about a care service.

You can also read more about our work online at www.careinspectorate.com

Contact us

Care Inspectorate Compass House 11 Riverside Drive Dundee DD1 4NY

enquiries@careinspectorate.com

0345 600 9527

Find us on Facebook

Twitter: @careinspect

Other languages and formats

This report is available in other languages and formats on request.

Tha am foillseachadh seo ri fhaighinn ann an cruthannan is cànain eile ma nithear iarrtas.

অনুরোধসাপেক্ষে এই প্রকাশনাটি অন্য ফরম্যাট এবং অন্যান্য ভাষায় পাওয়া যায়।

ਬੇਨਤੀ 'ਤੇ ਇਹ ਪ੍ਰਕਾਸ਼ਨ ਹੋਰ ਰੂਪਾਂ ਅਤੇ ਹੋਰਨਾਂ ਭਾਸ਼ਾਵਾਂ ਵਿਚ ਉਪਲਬਧ ਹੈ।

本出版品有其他格式和其他語言備索。

Na życzenie niniejsza publikacja dostępna jest także w innych formatach oraz językach.