

Ledmore Supported Accommodation Project Care Home Service

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Type of inspection:
Unannounced

Completed on:
12 October 2023

Service provided by:
Scottish Association For Mental
Health

Service provider number:
SP2003000180

Service no:
CS2003000882

About the service

Ledmore Supported Accommodation Project is registered as a care home to provide support to eight adults with mental health difficulties. The provider is SAMH (Scottish Association for Mental Health).

The home is located in a residential area of Drumchapel, Glasgow. Accommodation is on one site and consists of a house with four bedrooms, each with en-suite shower and toilet, a communal lounge, kitchen/dining room, a staff office and sleepover room. Adjacent to this house, there are four individual one bedroom flats. A garden area is available to residents. Visitors have access to on-street parking next to the home. Local amenities are within walking distance of the home.

At the time of the inspection, there were seven people using the service.

About the inspection

This was an unannounced inspection which took place between 10, 11 and 12 October 2023. The inspection was carried out by one inspector 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:

- spoke with six out of seven people who use the service and three of their relatives
- spoke with five out of six staff members and the manager
- spoke with three external professionals
- observed practice and daily life
- reviewed documents.

Key messages

- People who use the service said they felt safe and staff respected their privacy.
- Staff were skilled, professional and knowledgeable about people's needs.
- People's health and wellbeing benefitted from effective assessment and links with other agencies.
- The service was well led and managed by a responsive and accessible manager.

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?	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?

4 - Good

We made an evaluation of good for this key question, as several important strengths, taken together, clearly outweighed areas for improvement.

People experienced care and support which was compassionate. Staff had developed warm and positive relationships with each person living within the service. People were respected and listened to. People we spoke with told us staff understood their diagnosis and they were sensitive to their needs. People were routinely involved in making decisions about their individual care and support. One person's relative told us getting to decide how to paint their own bedroom gave them a sense of worth and trust.

We considered how people get the most out of life whilst they are being supported by the service. We found that those with specific communication needs were supported to participate in ways which suited them best, for example, with the use of aids or adaptations. People we spoke with told us staff encouraged them to pursue their interests. People were encouraged to participate in local clubs and attend social events. We could see how this benefitted people through improving their self-confidence, engaging more with their local community, and having an improved sense of wellbeing.

People were able to describe the positive difference the support they received had made to their lives, such as feeling more independent, more able to budget their finances and better prepared to move to their own tenancy. This illustrated that the support people received was right for them.

People were supported with their medication. When medication errors occurred, managers ensured staff completed competency refreshers. This was to reinforce the importance of accurate recording and administration of medication. This also ensured individuals were supported to take the right medication at the right time, and promoted health and wellbeing.

The service was proactive in involving other professionals when they detected changes or recognised that further assessment and advice was needed to help keep each person well. People could be confident that the service regularly monitored their health and psychological needs. Support was shaped by the advice or recommendations given by external professionals.

We looked at a sample of care plans and found that the information they contained was person-centred and helped guide staff as to the care each person required, their individual preferences, likes and dislikes. This enabled staff to support people in keeping with their known wishes. Risk assessments were generally up to date and there was a range of assessment tools and charts in place to monitor people's health and wellbeing.

How good is our leadership?

4 - Good

We made an evaluation of good for this key question, as several important strengths, taken together, clearly outweighed areas for improvement.

When people are cared for by a consistent and trained staff team, this helps to ensure that they feel valued and receive an appropriate service that meets their needs. We found the staff members worked well as a team. Staff spoke highly of the manager, who was approachable, knowledgeable and had a good

understanding of people and their needs.

To manage staff shortages, the service accessed agency staff. In order to provide consistency, the same agency provider was used and the agency staff who are familiar with the service were requested. All staff, including agency, benefitted from a robust induction to prepare them fully for their role. This helped to promote consistent practice across the service. This meant that staff were attuned to the needs and preferences of each person and used a range of methods and approaches to promote positive outcomes.

Staff had benefitted from a good range of training opportunities to develop their skills and knowledge. However, not all staff had completed the mandatory training. We were satisfied the manager had an oversight of what training was outstanding and would provide opportunities for staff to complete their training. The manager made a commitment to this.

The service had improved their quality assurance processes in relation to Infection Prevention Control (IPC). They introduced an IPC champion, daily cleaning and disinfecting schedules, PPE stations and a National IPC Manual and Best Practice guide were made visible.

Staff we spoke to demonstrated they had a clear understanding of their roles and responsibilities to protect people from harm, through their participation in Adult Support and Protection, Trauma and Forensic training. The manager had implemented observations and spot checks to ensure procedures were followed and safe practice was adhered to. Despite these checks, some medication errors still occurred, but we were assured measures were in place to minimise such recurrences.

We found evidence that staff competencies and areas of development were discussed sensitively in team meetings and supervisions. Supervision took place regularly which supported staff to reflect on their practice. The manager and staff member could analyse their performance at work and offered staff the opportunity to discuss their development, review their progress and discuss wider work issues.

People should be involved in improving their service. The views of people experiencing care were sought as part of the quality assurance process and taken into consideration within the service improvement plan. They could be confident that any feedback given was used to improve their care and the wider service. Staff told us they felt confident and comfortable giving feedback to the manager. This demonstrated that those leading the service understood the value of feedback and were responsive in using learning to improve.

We saw that when new staff were recruited, relevant checks were made to ascertain qualifications, experience, and background. Appropriate arrangements were in place to ensure that staff were registered with the Scottish Social Services Council, who regulate the social care workforce.

Staff and management demonstrated that they had the skills, capacity, and systems in place to identify risks and drive improvement. There was a comprehensive service improvement plan. This plan was well considered and covered all aspects of the service. The manager planned to undertake a self-evaluation linked to the Care Inspectorate quality framework to support existing quality assurance processes.

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 further develop quality assurance in relation to infection prevention and control management.

This is to ensure that measures in place remain sufficient to reduce the ongoing risk to residents, staff and visitors of transmission of Covid-19.

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).

This area for improvement was made on 20 October 2021.

Action taken since then

The service has met this recommendation.

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
1.2 People get the most out of life	4 - Good
1.3 People's health and wellbeing benefits from their care and support	4 - Good

How good is our leadership?	4 - Good
2.2 Quality assurance and improvement is led well	4 - Good

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