

Allarton Housing Support Service

19 Broomhill Gate Glasgow G11 7NU

Telephone: 01413 391 383

Type of inspection:

Unannounced

Completed on: 27 February 2024

Service provided by:

Church of Scotland Trading as

Crossreach

Service no: CS2019373947

Service provider number:

SP2004005785



About the service

Allarton is registered with the Care Inspectorate to provide a service to adults with mental health issues living in their own homes. The provider is Church of Scotland Trading as Crossreach.

Allarton is situated in a residential area in Broomhill (Glasgow) and is close to shops, transport links and other public amenities. Whilst there is limited parking at the front of the building, off street parking can be easily accessed.

Accommodation is provided over three floors with lift access. Staff office space and a visitors' room is located on the ground floor. The basement provides a larger lounge/activity area, which all tenants can access. There is also a communal kitchen and utility room which tenants can use. An enclosed private garden is located to the rear of the building.

All 14 bedrooms are single with an en suite toilet and shower. Four of the bedrooms have a facility that can be used to prepare food. Two communal bathrooms are available, with one having an assisted bath.

A lounge area and kitchen/dining room is available on each of the floors where bedrooms are situated. People who use the service have access to a small, designated smoking area on the top floor of the building.

At the time of this inspection support was being provided to 13 people. The aims of the service include "to deliver a person centred individualised therapeutic approach to enable those it supports in a recovery-based model".

About the inspection

This was an unannounced inspection carried out by two inspectors from the Care Inspectorate between 20 February and 27 February 2024. 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 carrying out this inspection, we:

- Spoke with five people using the service or their family representatives
- · Gathered the views of three external professionals
- Spoke with five staff and the management team
- Observed practice and daily life
- · Reviewed documents.

Key messages

- People experienced high quality care and were respected and valued.
- Peoples' health benefitted from effective assessment and monitoring of their needs and collaboration with external professionals and services.
- People were actively involved in evaluating and improving their service.
- People had access to a range of activities and local community links based on their preferences.
- Quality assurance and improvement was well led.

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?	5 - Very Good
How good is our leadership?	5 - Very Good

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

How well do we support people's wellbeing?

5 - Very Good

People experienced high quality care and were respected and valued.

We found significant strengths in aspects of the care provided and how these supported positive outcomes for people, therefore we evaluated this key question as very good.

Feedback from people using the service, and other stakeholders consistently showed high levels of satisfaction with the quality of care and support that Allarton provided. We found that they were making a positive difference to peoples' lives.

We observed a team of resolute and committed staff who genuinely cared for the people they supported. Staff were clearly committed to supporting people to meet their chosen outcomes. It was evident during the interactions and engagements we witnessed and heard about, that staff treated people with compassion, dignity, and respect.

People benefitted from positive and trusting relationships with the staff team. This meant that people felt included, listened to, and valued, and ensured that the service was centred on the needs and wishes of the person.

People were recognised as experts in their own experiences and aspirations. We saw examples of people who may otherwise have felt isolated or excluded being sensitively encouraged to increase their access to the community. Personal planning and health risk assessment documentation we reviewed contained detailed descriptions of the level of support each person required. This included defined outcomes important to each person using the STAR outcomes tool. Staff worked in partnership with people to recognise achievements and progress made in achieving their outcomes.

People were routinely involved in developing and reviewing their personal plans, either through informal meetings with their key team or at regular multidisciplinary reviews. This ensured people were supported according to their expressed wishes.

Comments from people included:

- "Staff are good."
- "There should be more places like this for people with mental health issues."
- "Staff are good at supporting me with my medical health needs."

Peoples' health benefitted from effective assessment and monitoring of their needs and collaboration with external professionals and services. Feedback from external professionals was very positive and reassured us that the service worked effectively with external health and social care professionals.

Comments from external professionals included:

- "Good person-centred care is being delivered to (my client)."
- "Good communication from the service, they get in touch appropriately and any advice or suggestions given have been followed."

People were enabled to get the most out of life with opportunities to maintain or develop interests, friendships, and activities that mattered to them. This included attending art sessions, snooker clubs, visiting family, attending sporting events various clubs. People had access to a well-equipped communal area, that they could use if they chose. This promoted peoples' wellbeing.

Care was delivered in a dynamic and flexible way to meet agreed care plans, changing circumstances and any unplanned situations. The management team were reviewing Anticipatory Care Plans (ACP) with people and external professionals who could help. This ensured staff were prepared for the eventuality if a person became unwell or if their health deteriorated for any reason. This helped to keep people well and ensure that peoples known wishes were respected should their health deteriorate.

Comments from professionals included:

I have had excellent communication with the managers and carers.

They treat them with respect.

Communicate well in a timely manner.

The service operated a key worker, providing continuity, consistency, and stability of support. People told us that they knew and liked their teams.

Medication was managed well. This helped ensure individuals were supported to take the right medication at the right time.

How good is our leadership?

5 - Very Good

Quality assurance and improvement was well led. We found significant strengths in aspects of the care provided and how these supported positive outcomes for people, therefore we evaluated this key question as very good.

People spoke positively about the management team who were seen as being available, responsive, approachable, and supportive.

A range of quality audits had been completed regularly, including personal planning, medication management, finances, and individuals' experiences. The service used regular reviews, meetings, and questionnaires to gather peoples' views and ensuring informed a detailed service development plan, which focussed on improving peoples' outcomes.

There was effective management oversight and clear action plans were produced to progress improvements where needed.

People using the service had participated in the recruitment process and the management team were looking to develop this further. This helped ensure people supported were empowered to shape their care arrangements.

Staff commented positively about support from the management team and training provided. Staff training and development processes helped to ensure that people could be confident the staff team could meet their needs, and the staff team felt valued.

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 service should ensure that care reviews are outcome focussed and detail what people have achieved and what their goals are for moving forward.

This ensures care and support is consistent with the Health and Social Care Standards, which state that: 'My care and support meets my needs and is right for me.' (HSCS 1:19)

This area for improvement was made on 3 September 2021.

Action taken since then

Personal planning and health risk assessment documentation we reviewed contained detailed descriptions of the level of support each person required. This included defined outcomes important to each person using the STAR outcomes tool.

People were routinely involved in developing and reviewing their personal plans, either through informal meetings with their key worker or at regular multidisciplinary reviews. This ensured people were supported according to their expressed wishes.

This area for improvement had been met.

Previous area for improvement 2

The service should ensure that people who require support with their medication on an "as required" basis have a protocol in place. This means that support staff will consider non-pharmacological approaches prior to administering medication.

This ensures care and support is consistent with the Health and Social Care Standards, which state that: 'If I need help with medication, I am able to have as much control as possible.' (HSCS 2:23)

This area for improvement was made on 3 September 2021.

Action taken since then

Medication was well managed. People who required medication on an 'as required' basis had agreed and clear protocols in place to ensure that they received the correct medication at the correct time.

This area for improvement had been met.

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?	5 - Very Good
1.1 People experience compassion, dignity and respect	5 - Very Good
1.2 People get the most out of life	5 - Very Good
1.3 People's health and wellbeing benefits from their care and support	5 - Very Good

How good is our leadership?	5 - Very Good
2.2 Quality assurance and improvement is led well	5 - Very Good

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