

Engage - Glenlora Care Home Service

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Priesthill
Glasgow
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Type of inspection:
Unannounced

Completed on:
15 March 2024

Service provided by:
Scottish Action For Mental Health

Service provider number:
SP2003000180

Service no:
CS2008192701

About the service

Engage - Glenlora is a care home for up to eight adults with mental health issues. It is managed by the Scottish Action for Mental Health (SAMH).

The care home is located in a residential area in the south side of Glasgow. It provides eight single bedrooms, six of which have their own en-suite facilities.

There are two kitchens, a sitting room and dining areas for residents' communal use. A gazebo in the back garden is used as a designated smoking area.

This short term intensive service aims to improve people's physical and mental wellbeing and help develop the skills to move on to more independent settings.

There were seven people living in the home at the time of inspection.

About the inspection

This was an unannounced inspection which took place on 12 and 13 March 2024. 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, information submitted by the service and intelligence gathered since the last inspection.

In making our evaluations of the service we:

- spoke with seven people using the service and one of their family
- spoke with seven staff and management
- observed practice and daily life
- reviewed documents including personal plans, quality assurance documents and the service improvement plan
- spoke with three visiting professionals.

Key messages

People benefitted from positive relationships with a skilled and motivated staff team.

Staff worked closely with health and social care partners to support people's health, wellbeing and recovery.

Service improvement planning would benefit from greater input from people living in the service.

Support planning was being developed to ensure it is meaningful to people using the service.

The organisation had reviewed their approach and was implementing policy and procedures to direct staff in supporting personal care needs.

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 leadership?	4 - Good
How good is our staff team?	4 - Good
How good is our setting?	4 - Good
How well is our care and support planned?	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

We made an evaluation of adequate for this key question, as there are some strengths, but these just outweigh weaknesses and areas for improvement. Strengths may still have a positive impact but the likelihood of achieving positive experiences and outcomes for people is reduced significantly because one key area of performance needed to improve.

The service aimed to help people manage their mental health needs and recovery in a supportive environment and to develop independent living skills in order to move on successfully to the community.

A committed core staff team knew people's needs and preferences well. This meant staff were able to recognise and respond to changes in people's physical and mental health/wellbeing.

Some people supported, lived with complex and enduring mental health issues. The service had good knowledge of how best to support people's needs in this area according to current best practice and the individuals' preferences. This meant people could be confident their support arrangements were right for them.

There were good links with external health and social work professionals. Feedback confirmed they found "Glenlora management and staff very professional and positive," and that the service was seen to be "proactive when looking after individuals." This helped to keep people well.

People living in the home confirmed they were happy there, felt safe and well supported. Comments included, "any problems I have, I can go to them" and "I can speak with any of the staff, they are helping me with managing my money and my independence."

One family member confirmed that she felt her loved one, "is in a good place at this present time" and "they have been well supported by several staff and they had been able to build trusting relationships."

People managed their own meals and had access to well equipped kitchens. They were supported to budget and shop for their food if required and some individuals were supported to cook meals from scratch.

The service had introduced initiatives to support healthier eating options. This included access to fresh fruit, smoothie breakfasts, taster sessions and group meal/activity sessions such as Cod and Ceilidh as well as weekly communal Sunday dinners. Service users were encouraged to participate in aspects of delivering these which helped promote independence and group living skills.

People benefit from meaningful activity and socialisation opportunities, the service had dedicated participation champions who had developed a programme of activities following consultation with service users. People had enjoyed evenings out at the theatre, ten pin bowling and activities within the home such as spa evenings and Bingo.

This helped people develop confidence whilst out in the community and offered a sense of fun and enjoyment for those supported.

People were supported to keep their own living space clean and to attend to their laundry. Support tasks were evidenced in people's daily support planners. These were updated weekly alongside individuals and

reflected planned appointments and activities. This helped improve people's independent living skills and self-esteem.

Daily support planning reflected that service users had varying levels of input from staff depending on needs and preferences. We were disappointed to note that one aspect of an individual's support needs was not met by the service. Although arrangements had been made for an external agency to undertake this support, we concluded that this decision had compromised the individual's comfort and dignity and that of other people living in the service.

The provider had reviewed their approach and gave assurance of a change to practice in supporting people with personal care. This will afford people dignity and choice as personal care should be attended to sensitively and discreetly by people who know the service user well.

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. Whilst some improvements were needed, the strengths identified had a significant positive impact on people's experiences.

People can expect to use a service that is well led and managed. The service had enjoyed a period of stability and the manager had established a visible presence and good oversight of key areas of service delivery. All people living at the home knew who the manager was, and staff confirmed they were accessible.

People should benefit from a culture of continuous improvement. The provider had developed a comprehensive Quality Assurance Framework (QAF) which was being embedded in the service. This offered an oversight of key areas of service provision such as personal plan audits, accidents/incidents, staff training and supervisions as well as health & safety functions and infection prevention and control (IPC) practices.

This offered assurance that key functions were being monitored and actions put in place to address areas needing improvement. This process was overseen by senior management and informed the organisations improvement plan.

Some gaps were found in people's personal plans and aspects of IPC auditing. The manager agreed to review and improve the depth of information being evaluated.

A service improvement plan was in place and evidenced progress made across all areas of the home including service delivery and the environment.

The service collated feedback from people using the service, staff and stakeholders. However, it was not clear how this directly informed the service improvement plan and outcomes for individuals who used the service.

The service would now benefit from clearer evidence of how feedback is incorporated in service improvement planning and how it leads to improved outcomes for people.

The service was currently recruiting a team leader to strengthen the management team and support additional quality assurance and service development work.

How good is our staff team?

4 - Good

We made an evaluation of good for this key question, as several important strengths, taken together, clearly outweighed areas for improvement. Whilst some improvements were needed, the strengths identified had a significant positive impact on people's experiences.

Staffing arrangements were appropriate to meet people's needs and the service was actively recruiting to fill vacancies covered by regular bank and agency staff. This offered consistency of support.

Staff morale was good, and a strong sense of collaboration and supportive teamwork was evident.

"It's a great place to work", "It's the best team I have ever worked in.....all here to support the people who live here...and each other" and "from the manager down it's a real democracy."

Staff we spoke with conveyed a genuine commitment to providing quality support to people they supported. Keyworkers knew people well and advocated for them when faced by challenges and discrimination. Independent advocacy was also available to individuals. This ensured people were listened to.

Staff confirmed access to a comprehensive induction and flexible training programme. Regular and meaningful supervision and appraisal opportunities meant staff felt listened to and valued. They received positive feedback about their practice and genuinely felt able to influence the development of learning opportunities.

Staff accessed mandatory training online and face to face opportunities delivered by external colleagues. This included NHS sessions on personality disorder, trauma and managing psychosis.

This ensured key staff were skilled and knowledgeable and supported people according to current best practice.

Some staff would benefit from ongoing learning and mentoring opportunities as there were a few examples of negative language recorded within personal plans and of poor reflections on supporting people positively to live with enduring mental health conditions.

The manager confirmed this will be considered as part of ongoing service and individual staff development.

How good is our setting?

4 - Good

We made an evaluation of good for this key question, as several important strengths, taken together, clearly outweighed areas for improvement. The strengths identified had a positive impact on people's experience of living in the care home.

People living at the home accessed clean and fresh communal living areas which had recently been decorated to a good standard. The main living area would benefit from the addition of soft furnishings.

This would help people feel comfortable in their main living area which was used for activities and participation forums.

People were supported to cook in a well organised and clean kitchen which also highlighted the service's commitment to recycling.

Effective cleaning schedules ensured all areas of the home were maintained to a good standard. Staff were trained in infection, prevention and control (IPC) and appropriate cleaning materials were being used. This helped to keep the home clean and well presented.

People living in the service were involved in choosing paint colours and curtains. This helped people feel more invested in the home in which they lived.

People's bedrooms and en-suites had been refurbished to a good standard. Two people shared a shower / toilet room facility. This was to be refurbished imminently.

The organisational quality assurance oversight process included monitoring of aspects of fire safety and health and safety. Records showed that equipment was appropriately maintained. This helped ensure people benefited from a safe well-maintained environment.

How well is our care and support planned?

4 - Good

We made an evaluation of good for this key question, as several important strengths, taken together, clearly outweighed areas for improvement. Whilst some improvements were needed, the strengths identified had a significant positive impact on people's experience of living in the care home.

Personal plans help to direct staff about people's support needs and their choices and wishes. The organisation had implemented an electronic support planning system (ACP) and some staff demonstrated they were becoming more confident in its use.

"All About Me" documents were in place and provided a good level of detail to allow staff and agency staff to get to know people and their past experiences.

Revised templates and guidance had been implemented to direct staff to manage risk and vulnerability. This transition had left some gaps within personal plans. This meant that support plans did not consistently reflect all aspects of support needs. The management team planned to review risk assessments as part of their quality assurance overview.

The organisation's generic recovery tool to support people to achieve personal outcomes, "My Plan, My Way", had been adapted recently. People were now involved in monthly reviews of achievements and goal setting. This approach appeared to be more meaningful to people and ensured people were supported according to their current needs and wishes.

Some people had access to copies of agreed goals and were able to reflect on these and on past achievements. This supported their wellbeing and recovery.

Access to personal planning was being reviewed by the provider as part of its digital inclusion outcome. Staff were accessing training and additional support to ensure greater consistency in the use of electronic personal planning and enhance their knowledge and confidence in supporting people to work towards achievable "SMART" goals. This will support a more dynamic approach to personal planning and to achieving measurable and meaningful evidence of progress made towards identified outcomes. A previous area for improvement around support planning will be repeated. (See area for improvement)

Areas for improvement

1. To ensure that people can be confident that their personal plan is right for them, the manager should ensure,

- that care plans and recovery tools used to support people should be aligned to the aims and objectives of the service
- that care plans provide clear guidance about how each person can be best supported to achieve their individual identified outcomes
- that staff receive further training and guidance on formulating action points and goals in care plans, which are SMART (specific, measurable, achievable, relevant/realistic, and time-bound)
- care plans are regularly audited.

This is to ensure that care and support is consistent with the Health and Social Care Standards which states that: 'My personal plan (sometimes referred to as a care plan) is right for me because it sets out how my needs will be met, as well as my wishes and choices' (HSCS 1.15).

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

To ensure that people can be confident that their personal plan is right for them, the manager should ensure,

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This area for improvement was made on 7 June 2022.

Action taken since then

Personal support planning and recovery tools were being reviewed.

SMART goal setting was being developed to be more accessible and meaningful to people

Staff were being supported with additional training to ensure these were implemented consistently.

This has not been met at this time and will be reviewed as part of future inspection.

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?	3 - Adequate
1.1 People experience compassion, dignity and respect	3 - Adequate
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

How good is our staff team?	4 - Good
3.2 Staff have the right knowledge, competence and development to care for and support people	4 - Good

How good is our setting?	4 - Good
4.1 People experience high quality facilities	4 - Good

How well is our care and support planned?	4 - Good
5.1 Assessment and personal planning reflects people's outcomes and wishes	4 - Good

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