

# Lanarkshire Supported Living Service Housing Support Service

Baltic Chambers  
Suite 429 - 432  
50 Wellington Street  
Glasgow  
G2 6HJ

Telephone: 01412292580

**Type of inspection:**  
Unannounced

**Completed on:**  
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**Service provided by:**  
Penumbra

**Service provider number:**  
SP2003002595

**Service no:**  
CS2004061892

## About the service

Penumbra offers a recovery focussed approach inclusive of practical and emotional support to promote mental health and mental wellbeing to people living in their home. The services are spread over North and South Lanarkshire.

Since the last inspection the Lanarkshire Penumbra had moved their office location to Glasgow city centre. It is easily accessible by public transport with a 10 or 15 minute walk. There is a lift or stairs in the office building to take you to the office floor.

The service faced some challenges and changes at the end of last year which they have steadily and successfully overcome.

At the time of inspection the service supported 26 people.

## About the inspection

This was a short announced inspection which took place between 16 and 20 April 2024. The inspection was carried out by three 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:

- spoke with four people using the service
- spoke with five staff and management
- observed practice and daily life
- reviewed documents.

**Key messages**

- People achieved very good outcomes relating to their mental health and wellbeing.
- People were encouraged and supported to be part of their communities.
- Staffing levels were very good to meet people's support needs
- People were happy with the staff team who supported them
- Quality assurance could be improved relating to audits of staff practice.

**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 staff team?	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

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.

### Quality Indicator: 1.3 People's health and wellbeing benefits from their care and support

People's physical, mental health and social care needs were assessed effectively on a continuous basis. These were followed up with appropriate and very good interventions such as community involvement, meeting new people and medical advice.

People felt always listened to and were very involved in decisions about their lives. As a result, people felt empowered and in control of their support and care.

Staff were very skilled at recognising when an individual was unwell or if their mental or physical health was deteriorating. This was evidenced through risk assessments and accident and incident reporting. This meant people could feel safe and assured about receiving the right care at the right time.

Care plans were very well documented and gave good insight into who the person was and how they should be supported. This could be further enhanced with recording the detailed knowledge staff held about what works while supporting individuals. This would ensure a consistent and person-centred approach from all staff. (See Area for Improvement 1).

People were involved in reviewing their care which offered them ownership over the process. A few reviews were outwith the six-monthly cycle. This was due to staff absence; however, future dates were arranged. This ensured people got the right care at the right time.

Staff sought the support and expertise of other professionals such as GP's, Community Psychiatric Nurses, and the Crisis team. This offered a great wraparound service for people to benefit from and maintain their recovery journey.

People were supported to maximise their independence and abilities which supported the recovery approach. This included help with finances, shopping, bills, and self-care. This meant people could build and maintain their confidence and self-esteem. Furthermore, people were supported to be part of their community and accessed local amenities. This boosted people's mental and physical wellbeing.

People had exceeded their outcomes and expectations with great support from staff. Some people had the opportunity to access holidays and had great experiences. Furthermore, due to their increased confidence they had booked more holidays.

People had access to technology to seek support if they needed it through an alarm call system. We also observed how people used technology such as 'Alexa' to support their safety and comfort.

## Areas for improvement

1. The provider should ensure that the support plans in place contains accurate and up-to-date information.

This is in order to ensure that care and support is consistent with the Health and Social Care Standards 1.15 which states '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.'

## How good is our staff team?

**5 - Very Good**

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.

### Quality Indicator: 3.3 Staffing arrangements are right and staff work well together.

Staff had built trusting relationships with people which enhanced their interactions together. People told us "They are brilliant," "They've helped me so much," "They will let me know if they are going to be late," "The manager has advocated or me when I needed her." People were aware of who the manager was and felt able to call her or other staff if they needed to.

People were asked for their views about the service regularly. For example, when staff were nearing the end of their probationary period or when the person had their review of care. This meant that people were involved in improving staff practice and performance.

Staff worked effectively together as a team and had an incredibly positive culture. They were able to rely on each other for support and knowledge when needed. This included their relief staff who covered when permanent staff were off. As a result, people received support from a consistent and stable team.

The service faced some challenges near the end of last year while the manager was absent. This led to some aspects of the service, such as formal staff supervisions and team meetings being behind. However, this has been resolved and staff felt supported and back on track.

Daily meetings were taking place with the staff team to ensure communication was effective and support needs were up-to-date. Staff found this to be a positive addition for sharing information. This meant people benefitted from a team who were aware of any changes to their support needs.

Staff found their line managers and the manager to be approachable and supportive. They felt they had regular contact and guidance whenever they needed it. This offered staff confidence and security when supporting people who experienced stress and distress or behaviours that put themselves at risk.

The staff were aware of the new 'Safe Staffing' legislation for health and social care staff. This places responsibility on the provider to ensure staffing levels are right as well as the skill mix in teams. The manager had been advised of ways they could implement this by another care inspector. Therefore, people should feel the positive impact of this legislation.

## 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 provider should ensure that the support plan in place contains accurate and up-to-date information including risk assessments of the support provided.

This is in order to ensure that care and support is consistent with the Health and Social Care Standards 1.15 which states '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.'

**This area for improvement was made on 19 December 2020.**

#### Action taken since then

Risk assessments were updated whenever there were any changes experienced by people or their situation. However, a few care plans were not fully completed to ensure the most up-to-date information. Therefore we have repeated this area for improvement with some slight changes to the wording to reflect that the risk assessment part was met.

#### Previous area for improvement 2

The provider should develop an annual service improvement plan incorporating the following:

- What people experiencing care have suggested for improvements in the feedback surveys
- Any audit actions, both short term and long term, to improve outcomes for people
- Any areas for improvement suggested by the Care Inspectorate
- How the service will embed the Health and Social Care Standards into their culture and ethos.

This will ensure the service is meeting the Health and Social Care Standard (4.19) which state 'I benefit from a culture of continuous improvement, with the organisation having robust and transparent quality assurance processes.'

**This area for improvement was made on 19 December 2020.**

#### Action taken since then

The provider had made progress with a development plan and were also in the process of developing a more sophisticated and all encompassing improvement plan. These should demonstrate a more dynamic and meaningful process with time limits and named responsible people.

This area for improvement was not met and therefore this area for improvement will be repeated.

### Previous area for improvement 3

Audits and spot checks should be carried out, recorded and followed up timeously to cover such areas as the following:

- Staff punctuality and presentation
- Staff engagement with people
- Staff supervision
- Staff training
- Staff deployment.

The service should find ways for people experiencing care to be part of these processes.

This would be in line to meet The Health and Social Care Standards (4.11) which state 'I experience high quality care and support based on relevant evidence, guidance and best practice' and 4.11 'I experience high quality care and support based on relevant evidence, guidance and best practice.'

**This area for improvement was made on 19 December 2020.**

#### Action taken since then

We found that the service was carrying out some aspects for this area for improvement however, these were not recorded formally to provide us with evidence.

This area for improvement was not met and therefore this area for improvement will be repeated.

## Complaints

There have been no complaints upheld since the last inspection. Details of any older upheld complaints are published at [www.careinspectorate.com](http://www.careinspectorate.com).

## Detailed evaluations

How well do we support people's wellbeing?	5 - Very Good
1.3 People's health and wellbeing benefits from their care and support	5 - Very Good
How good is our staff team?	5 - Very Good
3.3 Staffing arrangements are right and staff work well together	5 - Very Good



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