

# Share Scotland - Glasgow Housing Support Service

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Type of inspection:

Unannounced

Completed on:

21 June 2024

Service provided by:

Share Scotland

Service provider number:

SP2003002639

**Service no:** CS2003053749



# Inspection report

#### About the service

Share Scotland - Glasgow is a combined care at home and housing support service. It is registered to support adults with complex learning and physical needs in the community; either within accommodation where they live alone or within small group living settings which they share with other people.

The provider is Share Scotland.

The service currently supports individuals across Glasgow and West Dunbartonshire. Each house has a dedicated staff team which provides an individualised care package to each service user.

At the time of the inspection, the service was supporting 18 people.

# About the inspection

This was an unannounced inspection which took place between 18 and 21 June 2024. The inspection was carried out by one inspector.

To prepare for the inspection we reviewed information about this service. This included previous inspection findings, registration and complaints information, information submitted by the service, and intelligence gathered throughout the inspection year. To inform our evaluation we:

- spoke with six people using the service and six of their relatives
- · spoke with six staff and the management
- · spoke with three external professionals
- · observed practice and daily life
- reviewed documents.

### Key messages

- Those who used the service and their relatives were highly complimentary in their praise and appreciation of the quality of support received.
- Staff were skilled and knowledgeable about people's needs and preferences.
- People's health benefitted from effective assessment and links with other agencies.
- The service was well led and managed by responsive and accessible management.
- The management team used feedback from people who used the support, their relatives and external professionals, to inform their service improvement plan.
- Appropriate staffing arrangements ensured people received effective one-to-one support to meet their needs.
- Staff supported each other and worked well as a team to ensure people were well cared for.

## 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? | 6 - Excellent |
|--|---------------|
| 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?

6 - Excellent

We evaluated this key question as excellent, as the service demonstrated a track record of effective practice and very high-quality care.

We found that Share Scotland were making a positive difference to people's lives and supporting people to achieve their chosen outcomes. Through feedback and our observations, we could see that the service excelled at providing a high standard of care that supported and prolonged the lives of people, with often profound learning and physical disabilities, in their own homes. People gave us numerous examples of how the service had a positive effect on their loved ones, such as, "People's lives are filled with experiences, and a programme of activities." A second person told us, "The care is first class and I could not ask for better." We were also told by relatives that staff communication with them is excellent and staff are very responsive to people's changing needs.

Staff employed creative approaches to promoting and supporting people's choices. Meaningful engagement was not only about being active in the community or participating in planned activities, it was part of people's daily lives and the relationships they built and maintained. People participated in various activities that suited their interests and hobbies, which included movie nights, visits to the theatre, social clubs, music and dance groups and regular holidays. The staff recognised the importance of impromptu gatherings of the people they supported, which enhanced people's wellbeing and ensured that they continued to have an active life.

The skills and knowledge of staff and their rapport promoted trust and positive relationships which helped secure excellent outcomes for people. One relative told us, "Staff invest in the person." and this was evident in our observations. We saw dedicated and caring staff, who were warm, friendly and respectful in their approach. Discussions with staff showed that they had the person who used the service at the heart of everything they did. They had a good understanding of the Health and Social Care Standards which was embedded in their every day practice to ensure people's independence was promoted. Staff demonstrated knowledge and competency in their roles and had the support from their management team to develop their skills in order to support people who used the service. This ensured that people's health and wellbeing was being maintained.

People benefitted from a robust medication management system that adhered to good practice guidance. The service was proactive in looking at alternative solutions to manage how staff administered medication. Management had devised a points system which gave managers oversight into medication practices across the service. This helped ensure individuals were supported to take the right medication at the right time, and promoted health and wellbeing. It also allowed management to identify any learning needs and implement any refresher training if necessary.

Positive and effective working relationships with other agencies and health professionals involved in people's care helped people keep as well as they could. This also enabled their future care and support needs to be anticipated. We saw evidence of regular and appropriate referrals to the GP, Physiotherapists and Speech and Language teams. We also spoke to external professionals who told us that staff were excellent at engaging with people and it was always a positive experience working with the staff. Relevant consents, and legal documents were in place. This meant that people were fully informed and included, and the service complied with relevant legislation.

Comprehensive needs assessments were undertaken to establish people's life history, needs and wishes. We saw evidence of nutritional care plans and observed mealtimes. Food was enjoyed in a setting which was relaxed and peaceful, and people received appropriate nutrition and hydration. Personal plans and reviews we sampled included associated risks and how these could be managed. A particular strength of the service was how they demonstrated innovative ways of working when managing people's complex needs. For example, the use of a calm blanket significantly reduced stress and distress for people who experienced self harming behaviour. One external professional told us, "Safety is paramount, whilst people are still encouraged to live their lives to the fullest." This meant that people could make informed choices and decisions about the risks they took in their daily lives and were encouraged to take positive risks which enhanced their quality of life.

There was overwhelmingly positive feedback about the service's professionalism, values, and ability to meet people's varied and complex needs. One relative told us, "People are not just existing, they are living their lives to the full." We concluded that people who used this service experienced very positive outcomes in a service which operated to a very high standard.

#### 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.

Staffing arrangements for the service were determined by a process of continuous assessment. The interview competencies, training programme, induction and probationary reviews all informed the scheduling of staff. The service understood the importance of matching staff to people along with consideration of compatibility and continuity of care. We found there was effective management oversight to monitor any staff shortages and a commitment to regularly reviewing the staffing arrangements. This meant the right number of staff with the right skills were working at the right times to support people's outcomes.

All staff received training appropriate to the needs of the people they cared for. This ensured staff continued to have the skills to meet people's changing needs. The service also introduced bespoke training in specialised areas such as Autism, so that staff could feel confident in effectively communicating with people they supported. Discussions with staff evidenced they understood their role and responded flexibly to changing situations to ensure that care and support is consistent and stable. This ensured staff had the time to provide care and support with compassion and engage in meaningful conversations, and people had a say in who provides their care and support.

There was evidence that the feedback obtained from people who used this service, staff and health professionals, was analysed by the service. This was an indication that the service looked at what could be learned or improved upon because of this information, and this was reflected in their service improvement plans.

Staff had knowledge on the new safe staffing legislation which came into force on 1 April 2024. We received positive feedback from staff about how the service supports their wellbeing and morale, which further improved their practice. One staff member told us, "Training is very specific to the people we support and that is really helpful for us and the people we look after." Managers told us the management development days were also beneficial as it recognised collective strengths which boosted morale and confidence building.

# Inspection report

People should expect a service where there is effective communication between staff, with opportunities for discussion about their work and how best to improve outcomes for people. We saw evidence of regular team meetings and staff supervision. The service made a commitment to develop observations of practice so that learning needs are identified and staff can reflect on how best to improve outcomes for people.

# 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

People experiencing care should experience high quality care and support that is right for them. This should include an agreed plan of support when required by the service user reflecting how they choose to use preventative healthcare services.

This is to ensure care and support is consistent with the Health and Social Care Standard (HSCS) which states that:

'I am supported to make informed lifestyle choices affecting my health and wellbeing, and I am helped to use relevant screening and healthcare services' (HSCS 1.28).

This area for improvement was made on 10 September 2019.

#### Action taken since then

We identified there were support agreements in place for each person who used the service. People had access to Learning Disability services, and relaxation and lifestyle therapies. Comprehensive support plans detailed each area of support required and the desired outcomes. These were regularly reviewed and included the contribution and consultation of others to inform future planning whilst involving the person who used the service. Measures were in place to reduce risks for people as well as promoting safe risks. Those that had restrictions, where it is not possible otherwise, staff clearly documented ways to keep people safe. There were care plans in place for medical interventions for those who lack capacity.

This area for improvement has been met.

#### Previous area for improvement 2

The service should improve the systems in place with any aspects of financial management support to people. This should be part of measures to increase transparency and understanding and avoid any potential for financial abuse.

This is to ensure care and support is consistent with the Health and Social Care Standards (HSCS) which states that:

'I am protected from harm, neglect, abuse, bullying and exploitation by people who have a clear understanding of their responsibilities' (HSCS 3.20).

This area for improvement was made on 10 September 2019.

#### Action taken since then

There were financial management plans for each person using the service. There were up-to-date and robust records of who had legal duties (POA, guardianships, appointeeship). There were accurate recordings of income and expenditure. Monies on the premises were secure and safeguarded. Any financial arrangements, for example, pay backs for utility bills, transport, loans etc., were fully documented and approved by the guardian or those with financial responsibilities.

This area for improvement has 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?                             | 6 - Excellent |
|--|---------------|
| 1.3 People's health and wellbeing benefits from their care and support | 6 - Excellent |

| 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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