

Engage Support Services Housing Support Service

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Glasgow
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Type of inspection:
Unannounced

Completed on:
25 September 2024

Service provided by:
Scottish Action For Mental Health

Service provider number:
SP2003000180

Service no:
CS2014334286

About the service

Engage Support Services is registered with the Care Inspectorate to provide a housing support and care at home service to adults with mental health issues and who have experience of homelessness. Some people may also have needs associated with addictions. The provider is Scottish Action for Mental Health (SAMH)

The service is located in the in the Pollok area of Glasgow.

The staff team consists of the registered manager, a team leader and support workers.

As the purpose of the service is to help people move on, the length of stay for a person is usually up to two years. At the time of this inspection, five people were using the service.

The service aims to; "Support people to develop the skills, confidence and resilience to build coping strategies and tools that will help them to self manage and to feel positive and ambitious for the future."

About the inspection

This was an unannounced inspection which took place on 24th and 25th September, 2024. The inspection was carried out by two inspectors 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 three people living at the service and received electronic feedback from another one.
- Spoke with eight staff and management.
- Observed practice and daily life and reviewed documents including support plans, audits and the service improvement plan.
- Spoke with one visiting professional.

Key messages

People benefited from positive relationships with a committed, knowledgeable staff team.

Support was flexible, person led, and people's individual preferences were pursued.

A multi-disciplinary approach ensured support strategies were appropriate to the individual.

The service planned to develop engagement opportunities to ensure people got the most out of their support.

Opportunities for service users and staff to be more involved in developing the service were being progressed.

As part of the inspection, we assessed the service's self-evaluation of key areas. We found the service had made positive progress in completing their self-evaluation. The service should continue to develop this approach to support improvement.

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
How good is our staff team?	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?

4 - Good

We evaluated this key question as good where several strengths impacted positively on outcomes for people and clearly outweighed areas for improvement.

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

We observed positive, respectful interactions between staff and people living in the service. This helped make people feel valued.

Staff had a good understanding of each person's needs and preferences which helped achieve positive outcomes for people. People had variable individual support plans. Most people did not fully utilise the full extent of the support available to them. The manager and staff team were looking at strategies to maximise engagement with people. We heard positive comments in relation to people's support. These included; "staff are amazing, anything I need they will help me with" and "the staff are really supportive and are available overnight if my mental health dips". The support available had contributed to people feeling safe and better able to manage day to day living.

People's health and wellbeing was well supported by a multi-disciplinary approach. Some people experienced periods of crisis. Flexible and responsive support was evident, and we heard from people who appreciated the time spent with them to help re-establish calm and stability. This made them feel valued.

Robust communication ensured changes in people's health was shared appropriately and support adjusted according to professional advice. Feedback from external professionals was positive, they felt people were appropriately placed and received support according to their needs. Comments included; "the staff team are all respectful and knowledgeable about how best to support my client and always seek advice and act upon it appropriately" and "they are good at balancing good care but also promoting people's independence". This helped people achieve personal outcomes and develop skills necessary to move on when the time was appropriate.

Day to day support varied and included helping people maintain their tenancy to a good standard, budgeting, cooking, accessing the community as well as emotional support and limited support with their medication.

Having meaningful things to do is important for wellbeing. Some people maintained positive relationships with family and friends and enjoyed independent time out with the service.

To help identify opportunities for people to access activities that were of interest/benefit to them, the service was evaluating local resources and activities and exploring organising social/communal events within the service.

How good is our leadership?

4 - Good

We evaluated this key question as good where several strengths impacted positively on outcomes for people and clearly outweighed areas for improvement.

Quality Indicator 2.2 Quality assurance and improvement is led well

People can expect to use a service that is well led and managed. The service had benefited from a consistent management team who had a visible presence and good oversight of key areas of service delivery. People living at the service knew who the manager was, and staff confirmed they were accessible.

Feedback confirmed the management team's supportive approach and genuine commitment to people using the service and the staff team. This ensured people felt valued and listened to.

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 planning, accidents/incidents, staff training and development as well as health & safety functions and infection, prevention and control (IPC) practices. Organisational audits were in place and evaluated regularly to ensure aspects of service delivery reflected current best practice.

This offered assurance that the quality of the service was monitored. The management team planned to implement specific action plans following audits and progress a service development plan with timescales to ensure that quality assurance processes led to meaningful improvements.

The management team valued feedback from people using the service. An informal drop in forum was used to encourage people to evaluate their support and share how they would like to see the service develop. The manager was committed to using feedback to ensure planned improvements benefited people using the service.

How good is our staff team?

4 - Good

We evaluated this key question as good where several strengths impacted positively on outcomes for people and clearly outweighed areas for improvement.

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

Staffing arrangements ensured scheduled support took place. Staffing levels and support was adjusted according to people's needs, preferences and other commitments such as visiting family. This demonstrated a flexible, person-led approach.

A strong sense of collaboration and supportive teamwork was evident.

A committed team ensured consistency of support. Keyworkers knew people well and advocated for them to overcome challenges and discrimination. Independent advocacy was available to individuals. This ensured people were listened to and their rights promoted.

Staff confirmed access to a comprehensive and flexible training programme comprising of online mandatory training and relevant face to face opportunities delivered by external colleagues. Observations of areas of practice took place and staff confirmed they received positive feedback and guidance and genuinely felt able to influence the development of learning opportunities. This ensured the staff team had the relevant skills and knowledge to support people well.

Regular and meaningful supervision and appraisal opportunities meant staff felt listened to and valued.

Recent development sessions and group supervisions gave opportunities for reflection and sharing of strategies and approaches to supporting people well. The focus of these sessions should now be used to look at how best to maximise engagement opportunities with people including outwith scheduled support sessions. This will help people achieve their desired outcomes and enhance their day-to-day experiences.

How well is our care and support planned?

4 - Good

We evaluated this key question as good where several strengths impacted positively on outcomes for people and clearly outweighed areas for improvement.

Quality Indicator 5.1 Assessment and personal planning reflects people's outcomes and wishes

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 staff demonstrated they were becoming more confident in navigating recent updates.

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

Revised templates and guidance had been implemented to direct staff on how best to manage risk and vulnerability. Individual safety plans were in place which gave clear direction on how people wished to be supported to manage aspects of their lives. This helped to keep people safe.

Some people struggled to understand identified areas of potential risk. Multi agency reviews determined where risk management plans were necessary. This included monitoring and support with meeting nutrition and medication needs. We asked that these be reviewed to ensure they reflected people's ability and level of understanding and not that they were in disagreement.

The management team planned to review support planning with a particular emphasis on the quality of recording 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. There was evidence of individuals beginning to build up a "portfolio" of achieved goals. They confirmed this gave them a sense of achievement.

Personal planning and the overarching outcomes framework was being reviewed by the organisation to ensure it was meaningful to people accessing services. The organisation was also implementing a support activities application as part of its digital inclusion/development programme. This will help to make support planning more consistent, auditable and accessible to people using the service.

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

In order that people can have confidence in the staff supporting them, the manager should ensure that staff receive relevant training and development opportunities. This should take account of the current and anticipated needs of service users and an evaluation of staff skills, knowledge, and areas of development.

This is to ensure 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)

And

"I have confidence in people because they are trained, competent and skilled, are able to reflect on their practice and follow their professional and organisational codes" (HSCS 3.14).

This area for improvement was made on 13 February 2023.

Action taken since then

The service had completed a comprehensive evaluation of staff training, skills and knowledge. All staff had an individual development plan and discussed training needs and opportunities regularly with their manager.

Training had been accessed where development needs had been identified and where service users needs may have changed. This ensured that staff knowledge and practice remained current and reflected best practice.

This helped to keep people safe and achieving well according to identified outcomes.

This area for improvement has been met.

Previous area for improvement 2

In order that people can have confidence that the service is well led and responsive, the manager should ensure that there is in place a robust and comprehensive overview of all service practices. This should influence the service development plan which will also take account of the views of people using the service, staff, and family/ stakeholders as appropriate.

This is to ensure care and support is consistent with the Health and Social Care Standards, which state that:

"I benefit from a culture of continuous improvement, with the organisation having robust and transparent quality assurance processes" (HSCS 4.19)

And

"I am actively encouraged to be involved in improving the service I use, in a spirit of genuine partnership" (HSCS 4.7).

This area for improvement was made on 13 February 2023.

Action taken since then

A comprehensive organisational quality assurance system, including regular audits, and a service improvement plan, was in place. This ensured the management team had an overview of all key areas of service delivery. This helped to keep people well and ensure scheduled support reflected their needs and preferences.

The service was prioritising feedback and engagement opportunities and had appointed a participation lead. The management team planned to develop improvement planning to ensure feedback and input from people resulted in an improved service and in people achieving outcomes that are important to them.

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?	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
3.3 Staffing arrangements are right and staff work well together	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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