

Inclusion Glasgow Supported Living 1 Housing Support Service

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Type of inspection:
Unannounced

Completed on:
4 October 2024

Service provided by:
Inclusion Glasgow

Service provider number:
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Service no:
CS2004056091

About the service

Inclusion Glasgow Supported Living 1 provides a care at home and housing support service to people aged 18 - 85 with learning disabilities and/or physical disabilities and/or mental health problems living in their own homes. The service operates within Glasgow City and North Lanarkshire.

The service is managed by Inclusion Glasgow, which is a registered Scottish charity. The organisation's office is based in Glasgow and the service is managed from this office.

Each person who is supported has a dedicated staff team who provides their support. This support ranges from a few hours a week to 24-hours a day. At the time of the inspection, the service employed 131 staff and provided support to 51 people.

The registered manager co-ordinates the overall running of the service. They are supported by a team of service managers who lead and manage the teams around each person. The service also employs development coaches who focus on supporting staff to reflect on their practice and explore their professional development.

The service aims to provide person-centred support, enabling the individual to live a life of their choosing.

About the inspection

This was an unannounced inspection which took place from 2 - 4 October 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, registration information, information submitted by the service and intelligence gathered since the last inspection.

In making our evaluations of the service we:

- spoke with 12 people using the service
- spoke with 17 staff and management
- observed practice and daily life
- reviewed documents
- spoke with one commissioner
- Received feedback via online survey from nine people supported by the service.

Key messages

- The provider had a clear vision of what they wanted the service to offer to people; this was developed in consultation with people who receive support and the staff team.
- People were supported well to make decisions about their care and independence was promoted.
- The service had a culture of learning and improvement and learned from experience, including from accidents, incidents and complaints.
- People benefitted from support to achieve their needs and wishes.

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

Staff in the service understood their role in supporting people's access to healthcare and addressing health inequalities. We saw evidence of members of a person's staff identifying issues with their hearing and vision. The staff team ensured the person received the medical support they needed for this. Staff discussed changes to people's health and wellbeing with their team and appropriate referrals were made by service managers to health professionals when required. This included speech and language professionals, mental health services and learning disability nurses. This meant that staff were confident at identifying people's changing needs and ensured these were addressed.

People who received support from the service were involved in developing their personal plans and in agreeing the outcomes they wanted to achieve. People told us about day trips they had chosen or skills they had been supported to learn. People we spoke to showed and told us they were in control of their home and their support. People were supported to make decisions and to agree what they did with their support. Changes were managed at a pace that worked for the person, including introducing new members of staff to their team. This meant that support was person-centred and focussed on what each individual wanted.

Medication was well managed and ensured that people were supported safely.

People were supported to shop, prepare meals and to eat when required. Discussions in supervision notes showed that at times, staff raised concerns about budgets and grocery shopping and support to address these problems were put in place. This showed that people were supported well within the constraints of their budgets.

Interactions between staff and the people they supported were warm and staff displayed a good understanding of people's needs. We observed how staff supported people and people were supported to live good, full lives and independence and skills development were encouraged.

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.

The senior management team had a clear vision for where they want the organisation to be going and how they want people to be supported. Methods of involving people and staff more and encouraging them to share feedback have been developed. A regular 90 second survey had been implemented where staff were asked to give feedback. This was used for feedback when issues were raised within the staff teams as well as to ask staff opinions on plans from the management team. These meant that the staff team were feeling connected to the management team and that the views of everyone were considered when decisions were being made. Some of the developments intended to improve communication needed some time to fully embed, though we saw progress since our last inspection.

Staff continually evaluated people's experiences to ensure that, as far as possible, people using the service were provided with the right care and support in the right place to meet their outcomes. This was done through team meetings and discussions with team leads and the rest of the team. Teams worked together to ensure that people had more consistent support provided by everyone across the team by developing more detailed support plans.

The service had clearly written information for people using the service about what standards they can expect from the service. Feedback was requested from people regularly, giving them the opportunity to share what they thought could be better, which meant that people's experiences were central to planned improvements in the service.

The management team had responded to incidents, accidents, and complaints well and there was evidence of learning from these. Changes were implemented following analysis of the learning. This meant that leaders were responsive and reflective and continually trying to improve the experience of people using the service.

A service improvement plan was in place which reflected the intended direction of travel for the service. Due to some changes in the leadership team, some progress had been slower than hoped; however, we could see that there had been progress. The service would benefit from time to ensure that the ethos and direction of travel is understood by staff at all levels and therefore permeates through the whole organisation.

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.

The service matched staff to the people they supported and people were able to make a decision about who was in their team. This added additional challenges to recruitment but supported better outcomes for people when the team was settled, and people knew the people supporting them well. For example, in cases where staff had been recruited to a team where it had not worked out and they had been able to move into another person's team where they had been a better fit. This showed a commitment from the provider to ensuring that people were supported by staff members who worked well with them. The provider had implemented a prolonged probationary period for new staff to ensure that there was time to ensure staff members were recruited and placed in the right team.

Due to long term sickness and some difficulty in recruiting the right staff to walk alongside some of the people they work for there was strain felt by some staff who were having to work extra hours. People supported by the service were being impacted by more regular changes to their staff team than would be ideal. However, the provider had plans to address some of the resulting capacity issues these would help to alleviate the strains on the staff. This should be of particular benefit to the staff who walk alongside people who require more complex support.

Staff had sufficient time to provide support to people in an unhurried way that met their needs; the ethos of care was to walk alongside people. This ensured support was provided at the right pace for people.

Teams had opportunities to discuss the support they provided to people including how training was relevant specifically to the people they support. These opportunities meant that training could be personalised to

the needs of the person. This ensured that staff learned from each other and the person they work with to provide the best quality personalised support possible.

Some staff commented that they felt there could be some improvement in communication between different members of the management team. In particular, staff who worked in different people's teams sometimes had issues with communication across teams. The management team were aware of these issues and had plans in place to make improvements.

Staff had regular supervision and told us that this was beneficial. The format for supervision had been developed to support staff development through encouraging reflective discussions. We reviewed some supervision notes and found that there were inconsistencies in the quality of the reflective discussions in these. Training had taken place for some of the team to be better at reflective conversations. We discussed with the service that this could be more consistent and have made an area for improvement (see area for improvement 1).

Areas for improvement

1. The provider should consider ways to develop the reflective practice skills of the whole staff team. This would support the whole team to benefit fully from supervision and encourage continual improvement for the benefit of the people who they work with.

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

'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).

How well is our care and support planned?

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.

Personal plans and in particular, the outcomes support plans were very clearly written with the person's involvement and with staff who knew them well. Plans were thorough, detailed, engaging, and they were easy to understand. They were reviewed and updated regularly. When required, other relevant professionals such as speech and language therapists, learning disability nurses and mental health professionals were consulted. These consistently informed all aspects of the care and support they experience. People and, where relevant, their families, were fully involved in developing their personal plans. People had clear outcomes plans that showed what they wanted to achieve and how Inclusion Glasgow would support them with this. These outcomes plans identified a range of outcomes chosen by people, such as exercise, support to maintain contact with family, and support to go on holidays and outings. These ensured that all staff were working together to support the person.

People's support enabled them to make choices in their day-to-day activities as well as agreeing their longer-term support. People's support could be reduced or increased if needed and any changes were managed well at an appropriate pace for the person. This included introducing new staff to a person's team; the process of this was adapted to suit each person's individual needs. This ensured that people had an opportunity to get to know and trust new people in their team.

There was good evidence that staff understood their responsibilities to involve legal guardians when appropriate. This was demonstrated through recordings in personal plans and through discussions with members of the staff team, which meant that people were supported to make their own decisions when possible and legal powers were used when appropriate.

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 have confidence in the organisation providing their care and support, the manager should ensure that robust and transparent quality assurance procedures continue to be carried out through:

receiving feedback from service users, relatives, staff, other relevant stakeholders and reflecting any action taken; and

a focussed and dynamic improvement plan that is made available to people, relatives, staff, and relevant stakeholders.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) 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 use a service and organisation that are well led and managed' (HSCS 4.23).

This area for improvement was made on 28 April 2023.

Action taken since then

The provider had developed a variety of methods for people and staff to give feedback on the service. This included new surveys for staff and for people they work with. The service had a plain English quality policy and procedure that was available to everyone using the service so they understood what they could expect from the service. The improvement plan was available in plain English and available to all stakeholders.

This area for improvement has been met.

Previous area for improvement 2

The service should review the new management structure. The structure should support consistently good service delivery across all teams and ensure that information is gathered and used for the purposes of quality assurance and improvement. The review should also consider ensuring that there are open lines of communication for staff at all levels.

This review should be carried out with the inclusion of the views of staff at all levels. Any necessary changes to the structure, or roles of the team, should be made. Staff should be supported to understand the structure and any concerns listened to.

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

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

This area for improvement was made on 28 April 2023.

Action taken since then

The service completed a robust analysis of the changes to the management structure. This included gathering feedback from staff by using a variety of methods. The service took time to review before fully implementing the new structure and additional consideration was given to how best to adapt when changes to the management team were required.

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?	5 - Very Good
1.3 People's health and wellbeing benefits from their care and support	5 - Very 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?	5 - Very Good
5.1 Assessment and personal planning reflects people's outcomes and wishes	5 - Very Good

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