

Cosgrove Care - Home Care Service Housing Support Service

Walton Community Care Centre
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Giffnock
Glasgow
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Telephone: 01416 202 500

Type of inspection:
Unannounced

Completed on:
18 November 2024

Service provided by:
Cosgrove Care

Service provider number:
SP2003002854

Service no:
CS2003054090

About the service

Cosgrove Care - Home Care Service provides a care at home and housing support service for adults with learning disabilities who live in the East Renfrewshire area and the neighbouring parts of Glasgow City.

The people who are supported by the service live in a mixture of accommodation types. Some share with flatmates while others live on their own. The people supported by the service have a range of needs.

Cosgrove Care is a registered charity which operates and manages the service from their offices in Giffnock.

At the time of the inspection, the service supported 48 people and employed 90 staff. Staff work in teams based in the homes of the people they support.

About the inspection

This was an unannounced inspection which took place from 13 to 15 November 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, registration information, 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 four of their family
- spoke with 14 staff and management
- observed practice and daily life
- reviewed documents
- received responses to an online survey from seven family members.

Key messages

- People received good quality person-centred support that met their health and wellbeing needs.
- Medication administration had improved due to work undertaken by the provider.
- People were able to direct their own care and support.
- People were supported by a stable and consistent staff team who knew them well.
- The staff team were well supported and worked well together following recruitment of new staff and a period of change in the management team.

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.

People were supported by a staff team who knew them well and were able to identify any changes to the person that might indicate a change to their health or wellbeing. Referrals to other professionals were made when appropriate. Discussions with staff, and families and observations of how people interacted with their staff showed that staff felt confident they could support people's needs.

Information about changes to people's health or wellbeing were communicated well between staff on the person's team. This was achieved by using the electronic care planning system and emails to the staff team to ensure they were informed of changes. Staff members who worked across teams said that the systems in place ensured they were able to keep up to date with any changes to medications, personal plans and any appointments the person had.

Personal plans were detailed and person-centred. Routines, likes and dislikes were well documented in these as were people's support needs. This ensured that all staff had the information they needed to support people well.

People with complex health or care needs had plans and risk assessments that reflected how best to support them with these needs. Good personal plans helped to ensure that stress and distress was kept to a minimum and managed well.

Where appropriate, legal proxies, and external health professionals were involved in developing people's plans. In some cases, technology was used to support people to stay safe in a non-intrusive way.

People had choice about what they did with their time and how they spent their days. People chose what they ate and drank. When people had dietary requirements, these were clearly noted in their plans. Which ensured that staff supported people to make good choices.

We observed people leading their support and interacting well with their staff team. Interactions with staff showed that people were comfortable with their staff team and were directing their own support.

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.

There had been a lot of change in the senior management team over the year prior to this inspection. Staff members who spoke to us told us that although these changes were initially unsettling, they had noticed improvements since this change. Staff told us they felt that for them work life had improved or was in the process of improving over recent months. This was a result of having a stable staff team who had been in post long enough to know their jobs and the people they work with. An increase in permanent staff numbers meant that the team could cover shifts without use of agency staff. This ensured that permanent staff on shift were working with other staff who know the organisation and the people they supported. This meant that individual staff didn't feel as overworked as they had before and were able to give better

support as a result.

There was no reliance on agency staff which meant that the staff teams were settled, knew each other and the people they supported well. Consistency in the staff team over recent months had ensured that staff were trained and understood their job. In addition to general induction training, staff were given training relevant to the needs of the people they supported. Staff told us they worked well together in their teams and supported each other well and had confidence in their team leaders.

Assistant team leaders found the registered manager supportive. We heard that work was done to support the assistant team leaders to have sufficient time to do their admin/office roles where they were previously spending too much time on shift. This meant that they had time to focus on rotas, reviews and staff supervision.

There was support in place for staff when there were challenging times such as bereavement or serious health care needs of people they support. Staff told us they felt that in situations such as these their colleagues and team leads supported them, there was also more formal support available through the provider. This meant that staff did not feel left to deal with challenging situations on their own.

Staff told us they felt confident in their roles and that the training and support for learning was sufficient for them to do their jobs well. There was someone available on call if additional support or guidance was needed. Which meant that staff members were able to get advice and support if needed.

Staff members and families reflected that there was some distance between them and the senior management team. The senior management team had already identified this and had plans to improve communication and build relationships. As this was already identified by the service, we have not made a formal area for improvement.

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 service should continue their planned improvement of medication administration and recording practice, including involving the medication support team and ensuring that paperwork is clear and easy to understand and completed paperwork filed appropriately. Protocols for administering any 'as required' medications should be clearly written and easily accessible by staff.

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

'Any treatment or intervention that I experience is safe and effective' (HSCS 1.24).

This area for improvement was made on 17 July 2023.

Action taken since then

A significant amount of work had taken place to review medication practices since our last inspection.

There was a change to how training was presented to staff and this had improved understanding of protocols for safe administration of medication.

Additional medication counts were being done and work undertaken with the pharmacy to improve the medication recording sheets.

There had been a reduction in medication errors because of this work.

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 staff team?	5 - Very Good
3.3 Staffing arrangements are right and staff work well together	5 - Very Good

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