

Victoria Project Care Home Service

74 Batson Street
Govanhill
Glasgow
G42 7HG

Telephone: 0141 423 0755

Type of inspection:
Unannounced

Completed on:
19 November 2024

Service provided by:
The Mungo Foundation

Service provider number:
SP2003000182

Service no:
CS2003000898

About the service

Victoria Project is a care home registered to provide support to 13 adults with mental health issues. The accommodation comprises of two multi-occupancy houses, one sited in Batson Street and the other in Govanhill Street area of Glasgow. Support staff are available over 24 hours.

The care service is provided by The Mungo Foundation and the accommodation is provided by Govanhill Housing Association.

People supported have their own en-suite bedrooms. There are shared showering facilities. There are communal lounges and kitchen areas that people can access, as well as accessible outdoor areas.

The aims of the service are to deliver quality services that positively impact on the lives of people they support. Supporting and preparing people to develop independent living skills to aid recovery. Ensure the service is sensitive to the needs of the individuals and recognises the differences in people, promoting equality and diversity. The service has good links with other supporting agencies such as, health and psychiatric services and social work services.

At the time of the inspection, there were 12 people being supported by the service.

About the inspection

This was an unannounced follow up inspection to review progress made towards requirements made at a previous inspection. This took place on 19 November, 2024 and 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 four people using the service, two staff members and management.

We observed practice and daily life, reviewed documents including medication training records, cleaning/daily support schedules, environmental action plan and evidence of consultation with residents.

Key messages

Communal areas of the home were freshly decorated and were pleasant and welcoming

Improved cleaning routines ensured residents bedrooms were of a good standard.

Medication support had been reviewed and additional training/observations of practice had been implemented.

People's personal preferences about their medication support was reflected in staff practice.

What the service has done to meet any requirements we made at or since the last inspection

Requirements

Requirement 1

1. By 08 November 2024, the provider, must be responsive to people's needs and support their health and wellbeing by ensuring they receive their prescribed medication as instructed by a medical practitioner.

To do this the provider must, at a minimum:

- a) Ensure all staff who administer medication have received updated training and are assessed as competent to do so.
- b) Ensure medication is managed in a person-centred way.
- c) Conduct regular audits and observations on the quality of recording and staff practice. Where issues are identified, actions are taken.

This is in order to comply with Regulation 4(1)(a) of The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulation 2011 (SSI2011/210).

And

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)

And

"If I need help with my medication, I am able to have as much control as possible" (HSCS 2.23).

This requirement was made on 5 November 2024.

Action taken on previous requirement

All staff had received recent face to face training to better support people with their medication routines. The management team had observed staff practice to ensure competency in all areas including recording. Audits and sampling of practice had been increased and were scheduled to be completed more regularly. This gave people confidence that their medication support would be carried out in accordance with the prescribers instruction.

Feedback from people living in the service confirmed that medication support reflected their personal preferences. This allowed people choice.

Met - within timescales**Requirement 2**

2. By 31 March 2025, the provider must improve the recovery focus of peoples planned support aligned with the services stated aims and objectives.

To do this the provider must at a minimum:

- a) Review all support schedules to ensure the content aligns with individuals identified recovery outcomes. This should be done in consultation with wider health/care teams where appropriate.
- b) Evaluate outcomes achieved through the programme regularly in consultation with service users.

This is in order to comply with Regulation 5(1)a Personal Planning of The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulation 2011 (SSI2011/210).

And

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

"I experience high quality care and support based on relevant evidence, guidance and best practice" (HSCS 4.11)

And

"My care and support meet my needs and is right for me" (HSC 1.19).

This requirement was made on 5 November 2024.

Action taken on previous requirement

This remains within the timeframe to achieve compliance. We will follow up during future inspections.

Not assessed at this inspection**Requirement 3**

1. By 31 March 2025, the provider must ensure that people benefit fully from their support. To do this a robust quality assurance system should be implemented.

To do this the provider must, at a minimum:

- a) Ensure quality assurance is developed to take account of all key areas of service delivery. These should include, but are not limited to, support planning and the environment.
- b) Produce a service improvement plan that is informed by audit findings and service user's feedback and experiences.

This is to comply with Regulation 4(1)(a)(Welfare of users) of The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/210).

And

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

'I experience high quality care and support based on relevant evidence, guidance and best practice' (HSCS 4.11)

And

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

This requirement was made on 5 November 2024.

Action taken on previous requirement

This remains within the timeframe to achieve compliance. We will follow up during future inspections.

Not assessed at this inspection

Requirement 4

1. By 08 November 2024, the provider must ensure people experience an environment that is clean, tidy and well maintained.

To do this the provider must at a minimum:

- a) Ensure all areas of the home are clean and best practice infection, prevention and control guidance is being followed.
- b) Implement robust audits/checks to monitor cleanliness.
- c) Work with external resources/agencies to ensure this is carried out with minimal disruption/anxiety caused to residents.

This is to comply with Regulation 4(1)(a) and (d)(Welfare of users) of the Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/210).

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

'I experience an environment that is well looked after with clean, tidy and well maintained premises, furnishings and equipment' (HSCS 5.24).

This requirement was made on 5 November 2024.

Action taken on previous requirement

The home had been decorated and refurbished to a good standard. Communal areas were more homely and welcoming. Enhanced cleaning routines were in place and staff supported people sensitively to improve their personal living spaces. Consultation and support were evident to manage any potential anxiety or distress caused by decoration processes. Disruption was minimal, people engaged well and were involved in decisions about how they would like their room/home decorated. This made people feel valued. Management audits and overviews of the environment had increased and areas requiring attention were actioned in a timely manner. This offered assurance that the environment would be maintained to a good standard.

Met - within timescales

Requirement 5

2. By 08 November 2024, to ensure that people are supported to live in an environment that is well looked after with clean, tidy and well-maintained premises furnishings and equipment: The provider must submit a detailed environmental improvement and maintenance plan.

This is to comply with Regulation 4(1)(a) and (d)(Welfare of users) of the Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/210).

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

'I experience an environment that is well looked after with clean, tidy and well maintained premises, furnishings and equipment' (HSCS 5.24).

This requirement was made on 5 November 2024.

Action taken on previous requirement

An action plan had been produced and areas of the home requiring decoration/refurbishment was underway. Improved organisational oversight reviewed management audits/overview of the environment and areas requiring attention were escalated and actioned.

The provider offered assurance that this more systematic approach to maintaining a pleasant living environment for people would address any areas identified in a timely manner. This gave people more confidence that the home would provide them with a comfortable, well presented place to live.

Met - within timescales

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

1. To maximise people's recovery opportunities the provider should:

Ensure staff have the skills and knowledge to direct recovery focused conversations/activities.

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

This area for improvement was made on 5 November 2024.

Action taken since then

This area for improvement was not assessed and will be reviewed at the next inspection.

Previous area for improvement 2

1. To ensure that the new system of personal planning/recording is used effectively to set out peoples support needs and how they will be met as well as their wishes and choices. The management team should ensure staff receive appropriate guidance and support.

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

"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" (HSCS 1.15).

This area for improvement was made on 5 November 2024.

Action taken since then

This area for improvement was not assessed and will be reviewed at the next inspection.

Complaints

There have been no complaints upheld since the last inspection. Details of any older upheld complaints are published at www.careinspectorate.com.

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