

# Quarriers Village Supported Living Service Housing Support Service

Quarriers Inverclyde Regional Office Quarrier's Village Bridge of Weir PA11 3sx

Telephone: 01505616128

**Type of inspection:** Unannounced

**Completed on:** 21 February 2025

Service provided by: Quarriers

**Service no:** CS2004074187 Service provider number: SP2003000264



#### About the service

Quarriers Village Supported Living Service is a combined housing support and care at home service. It provides support to adults with learning disabilities in Quarriers Village, near Bridge of Weir.

Some of the people who use the service also have physical disabilities and on-going health conditions such as epilepsy. People are supported in their own tenancies within the community. The level and type of support is individually tailored to meet people's needs.

The majority of people have their own independent flats, and a number of people share accommodation.

There were 20 people using the service during the inspection.

### About the inspection

This was an unannounced inspection which took place on 18, 19, 20 February 2025 from 09:30 to 17:00. 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 six people using the service and three of their family/relatives
- · spoke with nine staff and management
- observed practice and daily life
- reviewed documents
- spoke with one visiting professionals.

We also took into account 10 responses to Care Inspectorate questionnaires.

#### Key messages

- People were treated with dignity and respect, and warm relationships between staff and people were evident.

- Staff were committed to their role and fostered good relationships with people using the service.
- People benefitted from a number of meaningful activities and community connections.
- Communications aids and tools were used well to ensure people could express their choices and wishes.
- People's health was well supported including annual health checks.
- Leaders had good oversight of all area of service delivery.
- People using the service had their views taken into account to plan improvements to the service.

#### 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 knew staff well and were supported to build good relationships. People benefitted from a warm, clean home environment. People told us they enjoyed staying in the village. Support was provided with dignity and respect, including for those who may experience stress or distress.

People's health was well supported. Annual health checks by the learning disability nursing team promoted well-being, and nurses also provided access to flu and Covid-19 vaccines. Access to community healthcare was prioritised, including specific support for sleep health, when required. Relatives told us that the staff communicated well with them about their loved one and updated them timeously with any changes. We saw that all health or professional visits were recorded within peoples notes. We asked the service to ensure these were dated for continuity.

A range of communication methods were used to enhance people's independence, such as communication cards. People who were able to be, were fully involved in making decisions. Electronic technology also helped people to maintain their independence. An app was used to assist staff to recognise when people experience pain and manage their medication.

This promoted better health outcomes for some people.

Staff shared information on changes in eating and drinking habits, recording this information when needed, supporting a healthy attitude towards food and drink. People's weights were recorded where necessary, and this information should also be passed on to inform medical professionals about medication dosing where pertinent.

People received individual support for shopping and cooking. People told us they really enjoyed this aspect of their support, regularly making their favourite food and snacks. People's food choices and preferences were recognised and promoted.

Planned events and activities were based on people's preferences, including holidays and drama classes. Successful events like garden parties and summer fetes were held. People were getting the most out of life. We asked people where the service needed to improve and they said 'always have a staff member available who could drive would make it perfect'.

There was a clear system for administering medication, reporting medication errors, regular audits, and staff training. This ensured safe medication management practices.

Policies and processes protected personal property and finances, with regular audits and staff training. People could be confident that their finances were managed well.

Accident and incident records were kept and discussed at meetings, with a lessons-learned approach and staff training provided where recognised. Development plans were up-to-date and informed by feedback. There was a robust complaints policy with easy-read documents ensuring people had access to information in a format they could understand. This meant the service focused on learning and improvement with people being as involved as they wished.

Personal plans we sampled were strengths-based, person-centred, and regularly updated with involvement from people and their families. Risk assessments were used to keep people safe and enable people rather than restrict people's actions or activities. We asked that information in plans no longer relevant should be archived. People were supported well at key transition times as the support strategies documented in personal plans used contributed to this. This helped staff to deliver safe and effective care.

#### How good is our staff team?

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.

5 - Very Good

Staff were committed to their role and fostered good relationships with people using the service. People told us 'the staff are really great, they help me'. A thoughtful approach by the management team to staff wellbeing was evident and staff we spoke with told us they felt valued. The service were fully staffed and no longer relied on use of agency staff. Staff told us they always had time beyond care tasks to spend with people. Relatives told us they were happy with the regular staff 'going above and beyond' for their loved ones. This added to people's sense of wellbeing.

Recruitment was in keeping with 'Safer recruitment through better recruitment' guidance. This assured us that staff were recruited safely. Whilst Human Resources (HR) dealt with all pre employment checks, interviews, induction and probation is completed by management helping new staff feel well supported into the team. Service users could be involved in recruitment selection if they chose maximising their involvement.

Staff compliance rates with mandatory training were good meaning people could be confident staff were well trained in a range of areas. The service did not make person or needs specific training available for all staff. Offering Autism training for all staff would ensure that people benefit from staff who are trained to understand and support individual needs. The management team had recognised this and were planning sessions for staff development. See area for improvement 1. There were staff observations of practice carried out regularly in particular with medication administration. People could be satisfied that staff were competent in these areas.

Leaders used a dependency tool to assess people's needs so staff could be deployed well across the service. Staff told us the rota worked for them and they received their rota in advance to help them plan their working life. Staffing arrangements were right, and we saw that staff worked well together. Staff were clear about their roles and were deployed effectively.

Regular and effective supervision are essential for staff development. Staff meetings were regular, supportive and discussed pertinent issues. These were supported by individual supervision for staff which allowed for reflection and development.

#### Areas for improvement

1. To ensure that people benefit from fully trained staff at all times, the provider should ensure that staff are trained, knowledgeable and competent in person specific training including Autism practice.

This is to ensure care and support is consistent with Health and Social Care Standard which state: 'My care and support meets my needs and is right for me'(HSCS1.19) 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).

# 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 benefit from safeguarding when they decline aspects of their care and support; the provider should ensure that staff are trained and competent in Adult Protection Procedures and are proactive in raising concerns.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS), which state 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) and 'I am protected from harm because people are alert and respond to signs of significant deterioration in my health and wellbeing, that I may be unhappy or may be at risk of harm'. (HSCS 3.21).

#### This area for improvement was made on 29 January 2024.

#### Action taken since then

Adult Protection (AP) was mandatory training for all staff. There was a clear policy setting out how people are kept safe. The provider has maintained a high compliance with AP training for staff. New employees and initial AP training was classroom based to promote competency, thereafter refreshed online.

Staff told us they are confident in raising any concerns and the way in which they do this. Management were able to demonstrate that when concerns were raised the actions they have taken including ongoing concerns for example, when people may decline aspects of their support.

This area for improvement is met.

#### Previous area for improvement 2

To ensure that people benefit from effective quality assurance processes, the provider should review and develop quality assurance processes to ensure that action plans are included and followed up on. Specific measurable achievable realistic and timely (SMART) principles should be used.

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 29 January 2024.

#### Action taken since then

The provider had a wide range of quality assurance (QA) tools being used and clearly demonstrated how these improve outcomes for people. The QA processes were effective. Action plans were live and coherent with actions detailed and who must address these and when. SMART goals were used for all the action plans we sampled. We noted effective leadership and QA including improvement plans drive change and improvement for people using the service.

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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