

Care and Support Service (South) Housing Support Service

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Unannounced

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Service provided by:
South Lanarkshire Council

Service provider number:
SP2003003481

Service no:
CS2004069053

About the service

Care and Support Service (South) is a support service for people with a learning disability. The provider is South Lanarkshire Council.

The service aims to provide a high quality care service that supports people to stay in their own tenancies as valued members of the community. To enable people to lead as independent a life as possible.

At the time of this inspection, the service was being provided to 25 people in their own tenancies across the South Lanarkshire area. Some of these tenancies were shared tenancies.

We visited people supported in the East Kilbride and Blantyre areas of South Lanarkshire.

About the inspection

This was an unannounced inspection which took place between 10 and 14 March 2025. 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 registration information, information submitted by the service and intelligence gathered since the last inspection of the service.

In making our evaluations of the service we:

- spoke with seven people using the service
- spoke on the phone with four family members/representatives
- spoke with 14 staff and management
- received feedback from one professional
- observed staff practice
- reviewed documentation
- reviewed questionnaire feedback from one family member.

Key messages

- People supported benefited from positive relationships with staff who knew them well.
- Staff were compassionate, kind and motivated to support people in the best way.
- Relatives made very positive comments about the quality of the support people received and the staff delivering this.
- People benefited from a responsive staff team who sought advice from healthcare and social work professionals for people's changing needs.
- Improvements were needed to some aspects of people's medication support.
- Staff delivering care felt happy and well-supported in their roles.

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

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| 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.

We observed positive, caring and nurturing relationships between staff and people being supported. Staff supported people at an appropriate pace and involved each person when delivering support.

Staff demonstrated genuine empathy and compassion when talking to us about the people they supported. Demonstrating a value base that had the people they support at the heart of the work they do. Each person's achievements were acknowledged and celebrated. This meant people were valued for their individuality and treated with dignity and respect.

We heard many examples of the positive impact support had made to people and their families:

"The staff are kind to me."

"I have been supported to eat healthier."

"[Person supported] is happy in the service, we are happy with the staff and they know their needs well."

"Communication is good, if there are any changes, i.e. GP contacted for house call as staff were concerned about [person supported] and I have been kept updated re visits/advice given."

"I am able to take part in care reviews and we cover [person supported] care plan and I feel part of this, my views are listened to and taken on board".

People were encouraged and supported to pursue their hobbies and interests, for example attending the gym, football, cinema, shopping, Enable club, meals out, concerts, days out and cooking. This helped people develop new skills and opportunities to support in their local communities.

Staff practice was informed by support plans and associated risk assessments. This meant staff took an enabling approach which considered and minimised risks.

People benefited from staff who took a proactive approach to promote their health and wellbeing. This included following up health appointments and health screenings. When health or care professionals were required, the service responded by making appointments and referrals to the correct professional.

Medication records reviewed were mainly in good order. It is important for people who have prescribed "as required" medication for any planned health appointments and/or stress and distress episodes to have non-pharmacological support before considering its use. We found protocols to guide staff in the use of people's prescribed "as required" medication were not always in place (see area for improvement 1).

Feedback from an external professional indicated that there was genuine commitment from staff and management to provide high standards of care and support. "They've always been open to learning and reflecting on situations to see how to best support the service users. The management team have always been very responsive to issues within the service, they readily share information with me in a timely manner and have a good level of communication."

Care reviews were taking place and included those receiving a service and/or their representatives as appropriate. This helps to empower people to be involved in any decisions regarding people's care.

People's legal status was recorded and used to inform current and future decisions relating to each person's health.

Areas for improvement

1. To ensure that medication records are completed in line with best practice guidance. "As required" medication protocols should be in place for anyone prescribed "as required" medication and should include which non-pharmacological intervention strategies to be used prior to administration of medication.

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 medication, I am able to have as much control as is possible' (HSCS 2.23).

How good is our staff team?

5 - Very Good

We evaluated this key question as very good because there were major strengths that promoted positive outcomes for people.

There was positive morale across the service and people described it as being a great place to work. A member of staff shared: "I feel very valued by the team, and get regular feedback from the manager and the staff I am working with." Staff shared that management were always accessible and promoted an open-door policy.

The staff team were motivated and worked well together creating a warm atmosphere within the environment we observed. Staff were flexible and supported each other when required. This ensured that people enjoyed continuity in their care with minimal disruption, leading to very good outcomes.

The manager's assessment of how many staff hours were required to provide safe and effective care was mainly derived from the local authority commissioned hours. This was reviewed on a regular basis. Staff were matched to individuals, and in small teams, to help provide consistency of support. This helped to ensure people were supported by staff they know to provide continuity of care.

We received many positive comments from relatives and representatives about staff. Relatives told us: "Staff providing the care are great" and "I would give them all a medal if I could".

People should have confidence that the staff who support them are trained, competent and skilled. Newly appointed staff members received an induction programme and this provided them with an overview of the service and essential training. They were encouraged to provide feedback of their induction to improve this for any future new recruits.

We found that staff were knowledgeable about their role and had opportunities to undertake a range of relevant in-person and online training in a range of areas appropriate for their role. Staff told us that they felt that their training had equipped them well for the support they provided. The management team had an overview of the training and supported staff to attend any of the required training.

Supervision, appraisals and observations with staff took place and staff were encouraged to reflect on their learning and professional codes. This helped to ensure staff undertook the necessary training and learning to maintain their professional registration.

Staff consistently told us that the management team were approachable and open to listening to any concerns they may have.

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

Care plans should reflect the changing needs of people using the service, reviews should be used to inform how people's care needs are changing. Where people have a diagnosis of dementia, this should be clearly reflected in their care plan, along with information about how to reduce any stress they experience and how to respond to any distressed behaviours.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that: "My future care and support needs are anticipated as part of my assessment" (HSCS 1.14).

This area for improvement was made on 20 May 2019.

Action taken since then

There was evidence from the care plans we sampled that they had been reviewed and updated on a regular basis. When there had been any changes to a person's health and/or any diagnosis, the plans sampled recorded these.

There was information about any stress and distress the person might experience and how this should be responded to by the staff team to help reduce these.

This area for improvement has been met.

Previous area for improvement 2

Staff supervision notes should be filed and stored promptly in accordance with data protection legislation and best practice.

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 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 20 May 2019.

Action taken since then

There was evidence of staff supervision notes being stored in an electronic drive that only the manager and coordinators had access to for safe filing and storage of these in line with data protection best practices.

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

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| 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 |

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| 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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