

Baillieston Community Care Ltd

Housing Support Service

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Type of inspection:
Unannounced

Completed on:
27 March 2023

Service provided by:
Baillieston Community Care Ltd

Service provider number:
SP2003003514

Service no:
CS2003055886

About the service

The Care Inspectorate regulates care services in Scotland. Information about all care services can be found on our website at www.careinspectorate.com

Baillieston Community Care is provided by Baillieston Community Care Ltd, which is a registered charity. This home care service is available to anyone aged 16 or over and is offered to people with a wide range of conditions including adults with physical disabilities, brain injury, learning disabilities and older adults with dementia. At the time of this inspection 150 people were using this service.

About the inspection

This was an Inspection which took place on 21-23 March 2023. 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 10 people using the service and 8 of their family/friends/representatives.
- Spoke with 12 staff and management.
- Observed practice and daily life.
- Reviewed documents.
- Spoke with three professionals.

Key messages

- People experienced high quality care and were respected and valued.
- People receiving care and support and their families were satisfied with the service.
- The staff team who knew peoples' needs and preferences well.
- Personal plans should be improved to reflect support needs and associated risks.
- Staff felt well supported by the responsive and attentive management team.
- Development of quality assurance systems would support ongoing improvement of 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?	4 - Good
How good is our leadership?	4 - Good

Further details on the particular areas inspected are provided at the end of this report.

How well do we support people's wellbeing?

4 - Good

We made an evaluation of good for this key question, as several important strengths, taken together, clearly outweighed areas for improvement. The strengths identified had a positive impact on people's experience.

People can expect to be treated with compassion, dignity, and respect. It was evident people benefited from positive relationships with the staff team. Interactions between staff and people supported were relaxed, warm and kind. This meant that people felt included, listened to, and valued. People could be confident they were supported by staff who knew their needs and preferences. There was a stable staff group who demonstrated a commitment to supporting people to meet their stated outcomes. People who experience care spoke highly of the staff team:

"I really like the staff; they are very good".

"The staff are very good".

"They are super and couldn't ask for anything more".

"I feel involved in my care".

"The staff know me really well".

People's health should benefit from their care and support. People confirmed they were involved in making decisions about their care and that support was delivered in a dynamic and flexible way. This meant that people could be confident the service was responsive to their changing needs.

The service had positive working relationships with other agencies and professionals involved in people's care. This helped people to stay as well as they could.

The provider had introduced an electronic system to support the safe management of medication. This helped ensure people received the right medication at the right time.

We saw some very good examples of person-centred personal plans. However, the level of detail varied, and improvement was needed. An electronic system of personal planning was being introduced. The management team acknowledged further support was required to ensure a consistent approach to assessment and personal planning. This is important to ensure that staff can deliver support to people safely. (See area of improvement 1).

People were enabled to get the most out of life with opportunities to maintain interests and activities that mattered to them. This promoted wellbeing. The provider was involved in a pilot where technology was used to support independent living. We heard about examples where this had impacted positively on people who experience care.

People were told who would provide their care and were contacted where there were unplanned changes to their support arrangements. There was no evidence of missed visits. This meant that people had confidence in the service. Where possible the service management endeavoured to support continuity of care.

People could be confident that staff adhered to current infection prevention and control guidance (IPC). Personal protective equipment (PPE) supplies were available and used appropriately by staff. Managers completed checks to monitor IPC practice. Effective electronic systems ensured staff were kept well

informed about guidance updates. This helped ensure people were protected and reduced the risk of infection.

Areas for improvement

1.
Personal plans should be developed to ensure they reflect peoples identified health and support needs and associated risks.

This ensures that support is consistent with the Health and Social Care Standards: 1.15 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.

How good is our leadership?

4 - Good

We made an evaluation of good for this key question, as several important strengths, taken together, clearly outweighed areas for improvement. The strengths identified had a positive impact on people's experience.

People benefit from a culture of continuous improvement and effective quality assurance systems. The management team worked well together. People spoke positively about managers who were seen as being responsive, approachable, and supportive.

A dedicated compliance officer was employed to support quality assurance within the service. This demonstrated the provider placed value in monitoring standards within the service.

There was a range of audit tools used to assess compliance with expected standards. We saw occasions where the audit system had informed changes in practice, including medication management. However, the quality assurance system could be further developed. Improved analysis of audits and a detailed action plan would support the management team to measure progress and ensure that quality assurance process informed positive change in the service.

We have repeated a previous area for improvement relating to quality assurance. (See area for improvement 1.)

Communication with staff and people who experience care was effective. The provider sought the views of people who used and worked in the service. This allowed for individuals to share their experiences. There was a system in place for recording complaints and compliments. People told us they were confident that any concerns would be listened to and responded to appropriately.

Staff were supported by regular supervision and team meetings. This allowed staff to share their views, reflect on their work and identify positive practice and any training or development needs. This meant staff felt listened to and valued.

The provider had implemented an employee assistance programme and a mental health first aider to support the staff team. We heard from an individual that this had a positive impact on their mental wellbeing. This demonstrated the provider valued the wellbeing of the staff group and supported motivation within the staff team.

The service followed best practice recruitment guidance. A staff training manager organised staff training and induction training for new recruits. This meant that there was good oversight of training and people could be confident that staff were supported to develop the appropriate skills and knowledge to meet their needs.

Areas for improvement

1. The provider should continue to build on their existing approaches to quality assurance to drive forward improvements with their service plan.

This is to ensure care and support is consistent with the Health and Social Care Standards which state that: 'I benefit from a culture of continuous improvement, with the organisation having robust and transparent quality assurance processes'. (HSCS 4.19).

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 provider should continue to build on their existing approaches to quality assurance to drive forward improvements with their service plan. To improve quality, the provider could benchmark the service being delivered against best practice, current legislation and the health and social care standards.

This is to ensure care and support is consistent with the Health and Social Care Standards 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 November 2019.

Action taken since then

The quality assurance system should be further developed. Improved analysis of audits and a detailed action plan would support the management team to measure progress and ensure that quality assurance process informed positive change in the service. This area for improvement is not 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?	4 - Good
1.1 People experience compassion, dignity and respect	5 - Very Good
1.3 People's health and wellbeing benefits from their care and support	4 - Good
1.5 People's health and wellbeing benefits from safe infection prevention and control practice and procedure	5 - Very Good
How good is our leadership?	4 - Good
2.2 Quality assurance and improvement is led well	4 - Good

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