

GMD Community Services Housing Support Service

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Telephone: 01236 426892

Type of inspection:

Unannounced

Completed on:

14 December 2018

Service provided by:

GMD Community Services

Service provider number:

SP2007009392

Service no:

CS2007164062

About the service

GMD Community Services registered with the Care Inspectorate in August 2011 and became an active service from 2 April 2014. It is registered as a combined housing support and care at home service. This service supports a wide range of adults and older people.

The service's mission statement was -

'For all individuals to be given choice and control whilst maintaining independence and participation in how they wish their care to be delivered.'

At the time of inspection the service was providing care and support to 35 people.

What people told us

We received a total of five questionnaires as part of our inspection of the service. These were completed by people who use the service and/or their relatives. On reviewing these questionnaires we found that 100% of responders completing the question were overall happy, with the quality of the service provided.

People who chose to comment in their response told us:-

"We have been receiving the services of GMD for some time and we have found all the carers to be friendly, courteous and sympathetic to our needs. We enjoy the company of the carers. All in all a great team".

"This firm really does care and if there is a problem, then it is sorted out immediately. The girls really do care and go to any length to help. They are always cheery which also goes a long way. Without doubt each one is a little gem".

As part of the inspection, we visited people in their own home where they made the following comments:-

"The lassies are awfae good, no complaints, it's always the same carers. No complaint or concerns, I've never had to phone the office".

"They are all quite good and they will wait extra time if needed and they usually arrive on time. So far they have never missed a visit. They are very good".

"I love them they are wonderful its working brilliantly. They are never late or missed a visit and its always the same carers. The manager is very helpful and I can text them at any time and the lines of communications are good. My relative is very happy with the staff and I sense he is relaxed and comfortable with them. I would phone the manager if I wanted to make a complaint or raise an issue".

Self assessment

Services are no longer required to submit a self assessment.

From this inspection we graded this service as:

Quality of care and support

4 - Good

Quality of staffing	not assessed
Quality of management and leadership	4 - Good

What the service does well

Staff provided a good quality of care with compassion, professionalism and with a sound value base. People spoke highly of the staff and the quality of care. Staff had developed meaningful and reliable relationships with people who received care from a consistent, reliable staff team.

Staff said they received a comprehensive training programme which equipped them with the skills and knowledge, to ensure they could provide sufficient care to support people's health and wellbeing needs. The training was provided through a combination of online and face to face training courses.

Staff we spoke with told us they were in a cohesive team who ensured all visits took place on time and unforeseen circumstances were managed together. Records indicated that visits were made punctually and no missed visits were apparent. This helped to ensure people's visits took place in line with their needs.

People we spoke with indicated that staff were keen to know what they needed and often went beyond agreed support levels, to ensure people were comfortable and safe.

We found staff attended regular supervision with management and took part in planned team meetings. We were satisfied that people's needs were being met.

Staff said the management team were supportive and were always available to give sound advice. Management sometimes helped out as a result, of unforeseen circumstances when required

We saw evidence of service reviews taking place and people informed us the service would advocate on their behalf where difficulties or concerns arose.

People told us that any new staff involved in their service were introduced to them prior to their first lone visit.

This meant people were always familiar with who was to provide care. People told us that staffing rotas were issued in advance of the service support visits, to ensure people knew who was to support them.

We were satisfied that the service was submitting appropriate notifications to the Care Inspectorate and was complying with legislation.

What the service could do better

We said at the last inspection, that support plans and review records were often lacking in detail and key information about people's care needs and how people were to be supported with any medical conditions they may have. To ensure people's health needs are met information within these plans should be comprehensive, outcome-focused and personalised.

We found at this inspection that care plans were detailed and informative with clear guidance for staff on how to support people, however, some were task focussed. There was still some work to be done to personalise plans and to make them person centred.

We will continue to monitor how this is progressing at future inspections.
This recommendation will be repeated. (See recommendation 1)

We said at the last inspection that some risk assessments we sampled were inaccurate and did not give staff clear, personalised guidance on how to prevent harm and manage risk effectively. These documents should be more focused, succinct and personalised to ensure specific and appropriate action can be taken by staff, to reduce the risk of harms. It appeared staff communicated well with each other regarding people's care needs, however, this information should be replicated in updated, detailed plans and assessments.

We found at this inspection from the risk assessment that we saw they did not always identify where there was the potential for harm for example it said to use a 'moisturiser'. It was not clear what this was, who it was for or how it was to be used.

There was still some to do to improve risk assessments.
We will continue to monitor how this is progressing at future inspections.
This recommendation will be repeated.

(See recommendation 2)

We said at the last inspection, that we were confident people were getting the medication they needed the service policy and procedure should be brought into line with best practice. This should consider how people can be supported to take their medication through prompting, assisting and administering when required. The service's medication support practice should be reviewed accordingly.

After discussion with management it was apparent that the service also needed to incorporate 'as required' medication protocols into their systems, to ensure staff are supporting people to take this type of medication in line with their needs, medical guidance and best practice. We shared appropriate guidance with the service during the inspection.

We found at this inspection that a new medication policy had been developed which addressed the issues identified above and complied with the latest Care Inspectorate best practice publication.

We are satisfied that the previous recommendation has been met.

However, we were concerned with how medication was being recorded in practice. For example, we saw that '6' medications were recorded as having been administered however, there was no record of which medication had been administered.

In addition, we found that a medication which requires to be administered at a set time i.e. Parkinson's was being administered early.

This should be discussed with the GP/Pharmacist to ensure medication is administered correctly.

This recommendation has been reworded.

(See recommendation 3)

We said at the last inspection that the management audit system was unclear, although a tool was in place, this should be reviewed and redesigned to ensure it is more effective. To ensure people's support is being properly provided, the audit systems should clearly detail what was audited and actions taken to improve provision. The system should also ensure that all elements of support are consistently scrutinised on a regular basis, for all the people being supported.

We continue to have concerns about the service system of audits at this inspection. For example, there was no audits in place to monitor the quality of information in care plans, missed or late visits.

This recommendation will be repeated.

(See recommendation 4)

We said at the last inspection that the audit process should specifically include regular audits of all medication support records. To keep people safe service management should regularly satisfy itself that medication support is being provided properly. It was suggested during inspection this audit could be done monthly.

We found at this inspection that the overview of medication did not comply with best practice guidelines.

We signposted the service to The Care Inspectorate publication, 'Guidance about medication personal plans, review, monitoring and record keeping in residential care services', for information and guidance.

This recommendation will be repeated.

(See recommendation 5)

We thought that it would help staff to develop by introducing regular spot/competence checks to observe practice, promote discussion and advise on best practice.

We thought that staff would benefit from having an awareness of 'The keys to life' Scotland's learning disability strategy, which is focused on improving the quality of life for people with learning disabilities.

We would like to see a 'development plan' to show how the service is planning to improve.

We thought that the service should review the system of supervision and appraisal to ensure it is fit for purpose going forward.

We signposted the service to the Scottish Social Services Council (SSSC) publication, 'The Framework for Continuous Learning in Social Services' for information and guidance.

We thought that staff would benefit from having access to specialised training, for example , Parkinson's, dementia.

We signposted the service to the The Knowledge Network, Scottish Social Services Council and NHS Education for Scotland for 'Promoting Excellence' - the education framework for all social services staff working with people with dementia for information and guidance www.knowledge.scot.nhs.uk/dementia

We signposted the service to the Scottish Social Services Council (SSSC) website for 'Step into leadership' Leadership learning pathways for Scotland's social services for information and guidance.

We signposted the service to the Institute for Research and Innovation in Social Services (iriss) publication 2015 'achieving effective supervision' for information and guidance.

Requirements

Number of requirements: 0

Recommendations

Number of recommendations: 5

1. The service should ensure its care plans are comprehensive in detail, to ensure staff are aware of all conditions and have sufficient information to provide all elements of care and support needed.

These plans and subsequent review documentation should be outcome-focused and person-centred.

Health and Social Care Standards My Support, my life

1: I experience high quality care and support that is right for me

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.

2. The service should ensure that risk assessments are accurate, regularly reviewed and provide sufficient information, to allow staff to reduce any identified risks of harm to people being supported.

Health and Social Care Standards My Support, my life

1: I experience high quality care and support that is right for me

2: I am fully involved in all decisions about my care and support

2.6 I am as involved as I can be in agreeing and reviewing any restrictions to my independence , control and choice.

3. The service should review its medication procedure to ensure the administration of medication complies with best practice. Each medication should be recorded individually and where indicated medication should be administered at the prescribed time.

We signposted the service to The Care Inspectorate publication, 'Guidance about medication personal plans, review, monitoring and record keeping in residential care services', for information and guidance.

Health and Social Care Standards My Support, my life

1: I experience high quality care and support that is right for me

1.24 Any treatment or intervention that I experience is safe and effective.

4. The service should review its audit processes, to ensure all aspects of the service are audited for all people being supported. It should evidence what was audited and detail any actions taken to improve.

Health and Social Care Standards My Support, my life

4: I have confidence in the organisation providing my care and support

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

5. The service should ensure all medication support recordings are audited on a regular basis and improvements made where issues are identified.

Health and Social Care Standards My Support, my life

4: I have confidence in the organisation providing my care and support.

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

1: I experience high quality care and support that is right for me.

1.24 Any treatment or intervention that I experience is safe and effective.

Complaints

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

Inspection and grading history

Date	Type	Gradings
11 Jan 2018	Unannounced	Care and support 4 - Good Environment Not assessed Staffing Not assessed Management and leadership 4 - Good
24 Nov 2016	Announced (short notice)	Care and support 5 - Very good Environment Not assessed Staffing 5 - Very good Management and leadership 4 - Good
18 Nov 2015	Announced (short notice)	Care and support 4 - Good Environment Not assessed Staffing 4 - Good

Date	Type	Gradings	
		Management and leadership	3 - Adequate
5 Dec 2014	Announced (short notice)	Care and support Environment Staffing Management and leadership	4 - Good Not assessed 4 - Good 4 - Good

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