

The National Autistic Society - Central Scotland Services Housing Support Service

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Unannounced

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Service provided by:
The National Autistic Society

Service provider number:
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CS2007162782

About the service

The National Autistic Society - Central Scotland Services is a combined Housing Support and Care at Home service. It comprises supported living and community outreach. The supported living service is located in Springburn where supported people live in a modern tenement block and there are flats for five people. Staff are available on-site at all times.

There are currently 12 people receiving the outreach service in the community. People are supported in their own homes and in the wider community. The level of support and types of activities depends on people's assessed needs and outcomes. The service's main office base is located in the centre of Glasgow.

The service aims "to create a positive caring environment that promotes development, independence and life skills." Supported individuals are "encouraged and supported to develop skills through a range of experiences where emphasis is given to social skills, the development of meaningful recreational and leisure activities, group living and a commitment to ensuring they learn for life".

About the inspection

This was an unannounced inspection which took place between 5th and 10th October 2023. One inspector carried out the inspection. To prepare for the inspection we reviewed information about this service. This included previous inspection findings, registration and complaints information, information submitted by the service and intelligence gathered throughout the inspection year.

To inform our evaluation we:

- spoke with five people using the service and three of their friends and family members
- spoke with eight staff and the management team
- observed practice and daily life
- reviewed documents.

Key messages

- People had warm, supportive relationships with their staff team.
- There was a person-centred culture in which people had activities that were meaningful to them.
- People had dedicated staff teams who knew their needs and preferences well.
- Staff had suitable training to meet people's individual needs.
- The management team provided effective quality assurance to promote very good outcomes for people.
- Improvements should be made to how the service reports accidents and incidents to external agencies.

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 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?

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.

The service had established a person-centred culture in which people were able to spend their time doing activities that were truly meaningful to them. This resulted in positive outcomes for people across the service.

We spent time with a person who was supported to develop their independence skills. They had learnt how to complete daily living tasks such as maintaining their own home and cooking fresh meals, which they shared with friends and family. This gave the person a real sense of achievement and confidence.

People who had previously been socially isolated had been supported to develop a healthy routine of activities that met their needs. For example, people attended social clubs, went swimming and to the gym, and started voluntary employment opportunities. People, and their relatives, told us how these achievements had significantly improved their physical and mental health.

The Covid-19 pandemic and associated restrictions had impacted some people's routines and wellbeing. The service responded to these challenges well. People who experienced stress and distress were supported by the provider's own professionals which included positive behaviour specialists and speech and language therapists. People developed effective support strategies to reduce their anxieties and redevelop healthy routines and positive experiences.

People were supported by their own dedicated staff teams, and the service completed compatibility assessments between people and their workers. This was invaluable for people's wellbeing, and promoted good communication, rapport, and trust. The familiarity of staff and the well-established routines offered people a level of predictability and consistency which was important to them. We felt the service skilfully balanced predictability and creativity. Whilst people had specific activities that they enjoyed, they were also encouraged sensitively to try new experiences, which offered new and exciting life opportunities.

We were impressed by the service's ability to advocate for people and their rights. This included people accessing appropriate health care, engaging with the wider community and public services, and expressing their individual identity and wishes.

Every person supported by the service had a personal support plan which was of a high standard. Plans captured people's identity, likes and dislikes, and the outcomes they wanted to achieve in life. People's needs, which were varied and complex, were assessed, planned, and evaluated well. Specific communication, sensory, and other additional needs were fully captured to ensure staff supported people in a way that was effective for them.

We did note that the service was changing its style of support planning, and, in some isolated cases, there was some information that was out of date. We asked the management team to review plans to ensure all information was accurate, which will help maintain the service's high standards of practice.

How good is our leadership?**4 - Good**

We evaluated this key question as good, where several strengths impacted positively on outcomes for people and clearly outweighed areas for improvement.

The service had a new management team since our last inspection. This comprised a mix of experienced workers who had been promoted and externally appointed leaders. Feedback about the new management team was positive, and leaders were seen as knowledgeable, approachable, and with strong values.

The management team supported new workers with a thorough induction process. Staff completed comprehensive training and extended shadowing opportunities with people. This offered ample time and space for workers to understand people's unique needs and develop a level of trust. This person-specific induction process was important for people and their relatives who rely upon skilled and familiar staff.

Staff had access to comprehensive and relevant training. Compliance rates with training courses were generally high, and we were pleased to see a strong mix of online and face to face training. This high level of classroom training ensured staff were able to ask questions, discuss issues and receive clear guidance during training and development.

Leaders supported staff with frequent and good quality supervision meetings. These are important forums in which workers can discuss any practice issues, receive support and guidance, and management can offer constructive feedback on performance. We reviewed supervision minutes and felt these were particularly reflective and supportive. This helped develop an informed, consistent workforce with positive values and high morale.

The community outreach service had introduced a new digital communication system, replacing a paper-based written format. This meant that management had access to instant information, had greater insight into what was happening across the service, and could respond to issues more effectively. Workers told us that this was a welcomed initiative, and they felt well supported by management whilst working in the community.

Leaders completed quality assurance across the service including audits of accidents, incidents, care plans, and people's outcomes and experiences. Audits helped produce a comprehensive service development plan that highlighted how the service could further improve. We felt this was generally effective, and we shared some ideas on how to make improvement plans more inclusive of the views of people and relatives.

We noted that the service did not always notify us of reportable events such as accidents and incidents. Whilst issues were managed well at service level, it is important that external agencies, such as the Care Inspectorate, are promptly notified of issues. This allows agencies to support the service in reducing risks to people. The management team responded swiftly to our findings. We shared our guidance, received appropriate notifications during our inspection, and agreed clear expectations moving forward.

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
1.1 People experience compassion, dignity and respect	5 - Very Good
1.2 People get the most out of life	5 - Very Good
1.3 People's health and wellbeing benefits from their care and support	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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