

## JCS Wellbeing Hub Support Service

Walton Community Care Centre  
May Terrace  
Giffnock  
G46 6LD

Telephone: 0141 620 1800

**Type of inspection:**  
Unannounced

**Completed on:**  
26 October 2023

**Service provided by:**  
Jewish Care Scotland

**Service provider number:**  
SP2005007546

**Service no:**  
CS2003000153

## About the service

Jewish Care Scotland's Wellbeing Hub provides both a registered day service, which runs once a week, and care at home. The service is provided by Jewish Care Scotland to adults and older people from the Jewish Community. The service aims to reduce loneliness and isolation and to increase feelings of wellbeing.

At the time of the inspection, 25 people used the registered services. This was through attending the day service, receiving care at home or a combination. A maximum of 40 people can attend the centre at the same time.

## About the inspection

This was an unannounced inspection which took place from 24 to 26 October 2023. 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 nine people using the service and two of their family
- spoke with seven staff and management
- observed practice and daily life
- reviewed documents.

**Key messages**

- The service provides a high level of person-centred care.
- The support is highly valued by the people who use the service.
- The staff team are enthusiastic and caring.
- Management monitor the quality of service provision and there is a culture of continual improvement.

**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?	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 had the choice of attending a group building based service once a week, one-to-one home visits or both. We saw that both options were delivered in a person-centred way where the person receiving support had choice of activities as well as being able to exercise choice over the staff member who was supporting them when it came to one-to-one visits. This meant that people were respected as people who could make their own decisions.

People were overwhelmingly positive about the support they receive and the interactions they have with the members of staff. People told us that they really looked forward to attending the day centre and their care at home visits. People had nothing but praise for the staff with one saying: "They are wonderful" and a second person stating; "Nothing is too much bother." In turn, staff we spoke to were enthusiastic about their work and put the person at the centre of the care they provided. This meant that people had positive relationships with staff who treated them with kindness, respect and dignity.

The social interaction provided by attending the Thursday session was valuable to people. Social support was the focus of both the Thursday day centre and the one-to-one home visits. Where appropriate, people were supported to maintain or regain aspects of their physical health, such as strength and mobility, by being supported to exercise. The individual social support allowed people to access their local community as well as the wider Jewish community. This was important for people who wished to maintain that important part of their lives and needed some support to do so.

In addition to social interaction, the service also provided opportunities to access information and advice that may not otherwise be accessible to people. For example, hearing tests and talks from the scams prevention team. This meant that the support people received benefitted their health and wellbeing.

We reviewed care notes for people supported by the service and saw that any issues or concerns identified during social visits were acted upon. This was done by making appropriate referrals to other professionals or making contact with the other organisations who work alongside the person. This showed that staff acted on concerns and that the service worked well with other professionals.

## How good is our leadership?

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 completed a self-assessment and a service improvement plan. These were based on the Care Inspectorate's Quality Framework. The improvement plan reflected realistic goals for the service and incorporated feedback from staff and people who use the service. The service was responsive to supporting people as issues arose, as well as to requests. Chair exercise classes were put in place as a result of requests from people attending the service. This demonstrated that the service was keen to continually improve and sought feedback from stakeholders on how to do this.

We saw that the service had very good methods for ensuring that regular checks took place. This included audits of internal policies, staff training and ensuring staff supervision and appraisals had been completed. These ensured that information was accurate, up to date and of good quality. This robust system ensured that people using the service received care that was well planned and monitored to ensure its quality.

We saw that there were regular audits of care plans; this meant that information in care plans was kept up to date to ensure that care was provided based on up-to-date information about the person's needs. Reviews were carried out with the supported person and their families, and they were asked to comment on progress towards meeting their intended goals. This meant that people were supported based on up-to-date and accurate information about them.

There were regular team meetings and supervision was carried out regularly and staff said it was of benefit. Staff members said they felt well supported and the culture was one of openness and supporting each other. Staff members mentioned times where they had challenges on shift and senior staff were always available to talk to them.

Staff members reported that they felt they were listened to and consulted, and their ideas and suggestions were listened to and heard. This open culture extended to the people who use the service, who reported that they would raise any concerns they had. Management, including senior management, were visible at the Thursday sessions, ensuring that there was a clear and easily available line of communication.

## 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 for all those using the service should be completed without further delay and the monitoring of outcomes for people who use the service should be used to inform six monthly reviews of care.

National Care Standards, Support Service, Standard 4: Support Arrangements.

**This area for improvement was made on 24 April 2018.**

#### Action taken since then

All people using the service had care plans in place. These included outcomes and personal goals. Plans were reviewed six-monthly and part of this plan included monitoring progress made towards goals.

**This has been met.**

#### Previous area for improvement 2

The service should ensure that all staff received adequate induction into their role to prepare them for it and that staff training is provided in line with the aims and objectives of the service.

**This area for improvement was made on 24 April 2018.**

## Action taken since then

The service had implemented a thorough induction plan which included shadowing and mandatory training. Each new staff member must complete an induction which is signed off by management when staff have evidenced their competence in each area.

**This 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](http://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?	5 - Very Good
2.2 Quality assurance and improvement is led well	5 - Very Good

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