

# Hillcrest Homes Tenancy Support Service Housing Support Service

36 Glenmoy Terrace  
Forfar  
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Telephone: 07850230796

**Type of inspection:**  
Unannounced

**Completed on:**  
21 February 2024

**Service provided by:**  
Hillcrest Homes (Scotland) Limited

**Service provider number:**  
SP2004005964

**Service no:**  
CS2004060991

## About the service

Hillcrest Homes Tenancy Support Service is registered to provide a housing support service.

The service is provided by Hillcrest Homes and is situated at 36 Glenmoy Terrace, Forfar and provides short term accommodation for homeless adults and families on behalf of Angus Council

The service also states, in its aims and objectives, that it provides 'a high quality housing support service which enables service users to achieve their own personal goals and aspirations while they live in our accommodation until they are offered permanent accommodation elsewhere'.

## About the inspection

This was an unannounced inspection which took place on 21 January 2024. 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. This report should be read in conjunction with the previous report dated 23 May 2023.

In making our evaluations of the service we:

- spoke with management;
- reviewed the service improvement plan;
- read residents' care plans.

## Key messages

- A comprehensive improvement plan was now in place.
- Areas of good practice which were in place prior to the COVID-19 pandemic were now, or were soon to be, reinstated.
- Further evidence, from future inspections, will show that this has been embedded into practice.

## 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 good is our leadership?	3 - Adequate
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Further details on the particular areas inspected are provided at the end of this report.

## How good is our leadership?

## 3 - Adequate

At the previous inspection we made a requirement in relation to undertaking a fully consultative self-evaluation and, thereafter, compiling a service improvement plan.

This included involving and encouraging people to participate in improving the service. Also, having systems in place which gathers feedback from those who use the service and other relevant people.

The service provider had responded effectively to address these requirements.

(See under 'outstanding requirements' for more detail).

## What the service has done to meet any requirements we made at or since the last inspection

### Requirements

#### Requirement 1

The service must by 27 October 2023, undertake a fully consultative self-evaluation and, thereafter, compile a service improvement plan. The Care Inspectorate document 'Self-Evaluation and Improvement' (September 2019) was sent to assist in this process.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that:

"I can be meaningfully involved in how the organisations that support and care for me work and develop". (HSCS 4.6) and

"I am actively encouraged to be involved in improving the service I use, in a spirit of genuine partnership". (HSCS 4.7).

Also the Code of Practice for Employers of Social Service Workers which state you will:

"Have systems in place to listen to and consider feedback from people who use services, carers and other relevant people, to shape and improve services and the performance of social service workers." (2.3)

**This requirement was made on 25 May 2023.**

#### Action taken on previous requirement

We saw that the manager had put in place a comprehensive improvement plan which took account of resident and stakeholder consultations. Although some points had not been completed we could see that a plan was in place and areas of good practice which were in place prior to the COVID-19 pandemic were now, or were soon to be, reinstated.

Although we considered this requirement to be met, we could see that further evidence was required to

show that it had been embedded into practice. For this reason we are not regrading on this key question and it shall be re-visited naturally through future inspections.

**Met - within timescales**

## 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 good is our leadership?	3 - Adequate
2.2 Quality assurance and improvement is led well	3 - Adequate

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