

East Renfrewshire Dementia Services Housing Support Service

The Richmond Fellowship Scotland 65a Main Street Neilston GLASGOW G78 3NH

Telephone: 0141 880 7170

Type of inspection:

Unannounced

Completed on:

27 March 2024

Service provided by:

The Richmond Fellowship Scotland

Limited

Service no:

CS2012310841

Service provider number:

SP2004006282



Inspection report

About the service

East Renfrewshire Dementia Services is a combined care at home and housing support service registered to support adults and older people living with dementia. The service is based in Neilston and supports people throughout East Renfrewshire. The provider is The Richmond Fellowship Scotland.

Care and support can be provided in people's own homes and/or in the community. The service aims to support people to maintain their independence at home, access their local communities, and engage with local services, activities, and social groups. Staff also support people's relatives and carers through facilitating peer support and social opportunities as well as signposting to other useful local services.

There were 47 people using the service at the time of this inspection.

About the inspection

This was an unannounced inspection which took place between 26 and 27 March 2024. Two inspectors 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 three people using the service and six of their friends and family members
- spoke with six members staff and management
- observed practice and daily life
- · reviewed documents.

Key messages

- People had access to meaningful stimulating and therapeutic activities.
- The service was innovative in how it met people's desired outcomes.
- Support was flexible and tailored to meet people's needs and wishes.
- People were supported by familiar staff who were skilled and experienced.
- Relatives and unpaid carers received important support and advice.
- A robust quality assurance system ensured the service performed at a consistently high standard.

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?	6 - Excellent
How good is our leadership?	6 - Excellent

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

How well do we support people's wellbeing?

6 - Excellent

We evaluated this key question as excellent because people benefitted from innovative and high-quality support that resulted in outstanding outcomes.

People using the service and relatives gave positive feedback about East Renfrewshire Dementia Services. People told us that staff were particularly kind, caring, and reliable. People were supported by staff who had a thorough understanding of their needs and wishes. And, importantly, the service was flexible with people determining who supported them and at which times as far as possible. This continuity developed strong, trusting relationships.

In addition to the valued continuity, there was significant praise for staff. Several relatives made reference to staff demonstrating positive values - using words such as 'bond', 'love', and 'family' - that had enhanced people's lives. This demonstrated the service's culture of compassionate care in which people experienced empathy, dignity, and warmth in a person-centred way.

We met people whose lives had been improved through their support. For example, a person who was living without support and at risk of harm was now engaged with local social groups, formed meaningful friendships, and was an active member of their community. They spoke proudly about their routine of activities and relationships and how this had developed their confidence. A family member told us about how their loved one, who has significant cognitive decline, memory loss, and low mood, remembers and celebrates their regular visits with staff. Their support was described as uniquely benefitting the person's physical and emotional wellbeing.

The service was creative and innovative in how it met people's outcomes. People who wanted to form relationships in the community had access to regular group activities. This included Singing for the Brain, which were musical sessions that promoted people's memory, self-expression, and friendship. There were Creative Breaks in which people had day trips to familiar places of interest, theatre productions, and music shows. The service was developing intergenerational work in which people met with an author to create short stories about their lives and then visit nurseries and schools to discuss their life experiences. These activities were particularly creative and were both fun and therapeutic with multiple benefits to people's physical and mental wellbeing.

People who could not or did not want to engage in activities in the community received meaningful one-to-one visits from staff. This involved creating reminiscing boxes, reading, singing, and various sensory activities. An annual sunflower competition was particularly popular for people living at home who took real pride in growing flowers and sharing experiences with peers. A family member told us "The visit from staff is the highlight of the week. They don't just sit around, they really get to know [person's name], do things they enjoy, and it brings so much to their life".

The high-quality support offered family members reassurance and periods of respite from their caring role. Additionally, family members received advice, emotional support, and signposting to essential services. This assistance continued even after people using the service passed away, which underlined the service's commitment and positive values. There were also Creative Breaks for relatives which included day trips, and theatre and musical productions. This promoted their social inclusion and fun at particularly challenging times.

Every person using the service had a personal plan, known as a care plan. These contained all important information on people's needs and how to keep them safe. Plans were also highly outcome focused. They captured what people wanted to experience and achieve in life, set individual plans on how to meet these goals, and were frequently reviewed to ensure support was successful. This approach meant that enhancing people's life experiences remained the priority of the service.

How good is our leadership?

6 - Excellent

We evaluated this key question as excellent because leaders had developed an innovative and high-quality service that resulted in outstanding outcomes for people.

We received positive feedback about the service's management team. Leaders were seen as knowledgeable, pro-active, and approachable. A skilful balance of management being professional and organised whilst establishing an open and inclusive culture had been achieved. This promoted high standards of practice, communication, and morale across the service.

Management supported staff development effectively with a robust recruitment, induction, and training programme. This meant that staff had comprehensive training and support to meet people's needs well. There was a system of direct observations that ensured staff were implementing learning from training in practice. Additionally, staff had frequent supervision meetings with leaders to discuss practice and any issues within the service. These meetings were supportive and encouraged reflection to continuously improve practice. The effective approach to staff development promoted consistently high-quality experiences for people.

There was a particularly stable workforce and the majority of staff had worked at the service for some time. There were no signs of complacency, however, as staff continued to demonstrate high levels of motivation and creativity. Staff had real insight into people's life histories, needs, and wishes. Management and staff created individual resource maps, highlighting places of interest for people in their local community, to promote their social inclusion and new life experiences.

Leaders demonstrated genuine interest in the opinion of people and their relatives. There were regular questionnaires sent to people to gather their views on their service, including quality of activities, communication, and staff performance. Management completed thorough analysis of feedback, and followed up any comments or new ideas to ensure people had a meaningful voice and influence.

There was a robust quality assurance system that highlighted any issues with accidents or incidents, adult protection issues, and care planning. Any identified issues were promptly resolved to improve people's experiences. The service liaised with external agencies and professionals where appropriate to ensure people were safe and well.

Management completed a comprehensive self-evaluation of the service in line with the Care Inspectorate's quality framework. This assessed what was going well in the service and what could improve, and was developed using the opinion of people, relatives, and staff as well as quality assurance data. A service improvement plan had been developed to ensure that the service continued to perform at a high level and provide people with excellent outcomes.

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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?	6 - Excellent
1.1 People experience compassion, dignity and respect	6 - Excellent
1.2 People get the most out of life	6 - Excellent
1.3 People's health and wellbeing benefits from their care and support	6 - Excellent

How good is our leadership?	6 - Excellent
2.2 Quality assurance and improvement is led well	6 - Excellent

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