

The Richmond Fellowship Scotland - Highland A Housing Support Service

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Type of inspection:
Unannounced

Completed on:
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Service provided by:
The Richmond Fellowship Scotland
Limited

Service provider number:
SP2004006282

Service no:
CS2004061429

About the service

The Richmond Fellowship Scotland - Highland Service A provides a combined care at home and housing support service to people with learning disabilities, physical disabilities and mental health concerns, living in their own homes. The service provides support from a few hours per week up to 24 hour support arrangements.

The service supports people living in the Inverness and the Ross and Cromarty area.

About the inspection

This was an unannounced inspection which took place between 5 and 12 March 2024. The inspection was carried out by two inspectors 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 five people using the service and six of their family
- Spoke with 12 staff and management
- Observed practice and daily life
- Reviewed documents
- Spoke with visiting professionals

Key messages

- People were happy with the support and care they received
- People's wishes, preferences and interests were known
- People's care and support information was usually kept up to date
- Family members were happy with the service
- Staffing levels have improved and people were now getting more consistent staff teams
- Quality assurance and monitoring checks for people's care and support needs to improve
- The new manager was identifying improvements that will benefit people

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?	4 - Good
How good is our staff team?	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?

4 - Good

We evaluated this as good. The service had a number of important strengths in supporting people's health and wellbeing. There were some areas for improvements and addressing these will help ensure consistently positive experiences and outcomes for people.

Most of the time, people had a stable staff team. Positive relationships had been formed. Family members also emphasised the importance of a steady staff team. People knew and were comfortable with who was supporting them in their home and their community.

People's preferences and interests were known. People were making decisions and were supported to maintain and develop their independence and abilities. If a person felt able for undertaking their own meal preparations, for example, then they would do so. However, if they were experiencing difficulties with their health that day then staff would assist appropriately. People were respected.

People's important relationships and routines were supported. Family and friends were kept up with as suitable, places and activities people liked were part of their week or month. When circumstances had changed for a person or certain routines had stopped, then the staff considered the reasons for this. If a person's was unwell, or had an accident, appropriate steps would be taken such as contacting a person's GP or the NHS. The service had good relationships and communication with other professionals such as social workers and physiotherapists. Generally, people's health and wellbeing needs were given careful consideration and the service aimed to provide as good a support service as it could.

The service usually had good information about people's health and wellbeing needs. A person's support plans and guidance provided staff with helpful information. When a person had complex needs there was useful and detailed information to explain to staff about the person's health or wellbeing condition. In addition, there were good examples of staff recording key support information well such as people's medication support, including what medication was administered, when and whether arrangements in place to monitor this were being done correctly. Information and actions like this helped ensure a person kept well, safe and happy.

There were areas of the support provision that could be better. Not all the necessary documentation and guidance a service required to have in place for a person's support was in place. This included legal documentation and guidance for some specific health needs that could have been beneficial. There were times, too, when the service should have identified that further assessment for a person's health and wellbeing needs would be appropriate. These could be, for example, for diet or communication needs. This was highlighted to the service and we have made an area for improvement regarding quality assurance and monitoring. See below.

People should expect to have their care and support formally reviewed at least every six months as a matter of routine. There were examples of when this had not happened. We discussed this with management and they had recognised that improvements were needed. It was understood that people's care and support needs or risks to them can change and a service has to be very responsive to this. However, there were occasional examples of when the necessary communication, assessment or review had not taken place. See area for improvement 2.

In a few instances, for people's homes there were actions that the service could take that would make sure people's homes were as homely as possible and looked after to the standard that suits their needs and wishes. There was some unnecessary signage and restrictions in people's homes. People's homes are first and foremost their home and the service must always be aware of not letting a person's home feel or be treated like a workplace. The service's new manager was aware of this matter and considering improvements. We have made an area for improvement. See Area for Improvement 3 below.

Areas for improvement

1. To support people to keep safe and experience positive health and wellbeing, the service provider should make sure that, but not limited to, the quality assurance, communication, and reporting systems are effective by ensuring:

- a) improvements in quality assurance activities are sustained, embedded in practice and regularly reviewed across all key areas of the service's care and support to people;
- b) improvements in communication in the service are sustained and embedded in practice so that important information is provided to people, or their representative, and staff, as needed;
- c) review availability of administrative resources to increase capacity of frontline staff to undertake quality assurance activities and
- d) improvements in recording and reporting systems are maintained and regularly reviewed.

This is in order to ensure that care and support is consistent with the Health and Social Care Standards which state that: 'I benefit from a culture of continuous improvement, with the organisation having robust and transparent quality assurance processes' (HSCS 4.19).

2. To ensure people can be confident that all staff have access to the right information about their current care and support needs, the service provider should, but not limited to, ensure:

- a) whenever necessary, health and social care partner agencies are consulted with and their guidance and assessments are sought for enhancing people's support, assisting them to stay safe and well
- b) people's support plans are always kept up to date and improvements in support planning are sustained
- c) the quality of people's care and support is frequently evaluated and recorded and where a person's care needs or risk level changes, such as a change in their health, all care plans are updated accordingly and
- d) all relevant legal, including Adults with Incapacity information, and other important documentation is in place whenever necessary.

This is in order to ensure that care and support is consistent with the Health and Social Care Standards which state that: 'My personal plan is right for me because it sets out how my needs will be met, as well as my wishes and choices' (HSCS 1.16) and 'I benefit from different organisations working together and sharing information about me promptly where appropriate, and I understand how my privacy and confidentiality are respected' (HSCS 4.18) .

3. To make sure people are comfortable in and get the most out of their home, the service provider, should, but not limited to, support people to make all appropriate decisions about their home, how it is used and have their home as homely as possible in accordance with their choice.

This is in order to ensure that care and support is consistent with the Health and Social Care Standards which state that: 'I am supported to understand and uphold my rights' (HSCS 2.3) and 'If I experience care and support where I live, people respect this as my home' (HSCS 3.2).

How good is our staff team?

4 - Good

We evaluated the staff team as good. There were many strengths and only some areas to make improvements in. Staff aimed to be flexible and worked well as a team.

There were a lot of favourable reports on staff, their positivity and on the assistance they provided. People often got support that was just right for them and their wishes and preferences were known and followed.

Some comments on staff were:

- 'I get on perfect with them.'
- '...has a laugh and banter. They listen to me.'
- 'I am happy with the staff and how they manage, they do a good job, no complaints.'
- '...good rapport, feels they work as a team together now.'

From people and family, there were some comments that showed that they thought the service had been improving in the last year. The staff team, overall, had become more stable and there was less turnover of staff than before. This made a big difference to people's wellbeing and experience of their support.

Staff were recruited following careful procedures. Their suitability for a care and support role was assessed, interviews took place and appropriate checks undertaken. Induction for new staff was also seen to be helpful. People can trust that their support staff were recruited safely.

Staff were able to explain their roles and responsibilities well. They aimed to work well as a team and communication within the service was said to be satisfactory. Staff were insightful and considered carefully the needs and wishes of people. Staff were often matched to the person they would be supporting. People can be reassured that their staff members had person centred values and commitment to enhancing their day and week.

For training, supervisions and team meetings it was recognised that improvements could be made. Encouragingly, the new manager was giving this thoughts and saw the benefits for staff and people in addressing the aspects of the service's staff support. Sometimes, for instance, a staff member went for a long period with no supervision meeting. Issues like this can impact on the quality of people's support and potential improvements can be overlooked and not happen.

Occasionally staff commented on not getting their rotas in good time. This impacted on people as well as many liked to be able to look ahead and know which staff would be supporting them. Generally, senior support workers lacked time for some of their responsibilities and were stretched due to providing direct support to people. This was not ideal and we have made an area for improvement for this. See below.

Areas for improvement

1. To support people's health and wellbeing, the service provider, should, but not limited to, make sure that relevant staff have sufficient time, development and support for organising people's care and support arrangements and carrying out quality assurance activities by:

- a) closely monitoring the staff deployment and time available for senior support workers to fulfil all their duties and where there is not adequate time address this and
- b) considering the further support and training areas for senior support workers needed.

This is in order to ensure that care and support is consistent with the Health and Social Care Standards which state that: 'My needs are met by the right number of people' (HSCS 3.15) and 'My care and support is provided in a planned and safe way, including if there is an emergency or unexpected event' (HSCS 4.14) .

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

To ensure people's care is stable and provided in a planned and safe way and they are able to get the most out of life, the provider should, but not limited to, ensure:

- a) ensure there are always sufficient staff available, to support people to achieve their outcomes, through regular participation in activities and being supported to maintain their interests;
- b) continue to recruit to staff vacancies;
- b) continue to ensure supported people and families are kept informed about who will be providing their care on a day to day basis.

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

- 'My needs are met by the right number of people' (HSCS 3.15), and
- 'I experience stability in my care and support from people who know my needs, choices and wishes, even if there are changes in the service or organisation' (HSCS 4.15).

This area for improvement was made on 21 July 2023.

Action taken since then

This area for improvement was met. There was a clear improvement in staff numbers and there was less turnover of staff than before. A stable staffing situation benefitted people.

Previous area for improvement 2

To ensure that people can have confidence in the staff and their care and support needs are met, the provider should ensure, but not limited to, ensure;

- a) when people require support with medications, either prescribed or "over the counter", there is an appropriate medication plan and risk assessment in place to fully guide staff
- b) staff should have updated training on "over the counter" medications as per the provider's policy and procedures.

This is in order to ensure that care and support is consistent with the Health and Social Care Standards which state that:

'Any treatment or intervention that I experience is safe and effective' (HSCS 1.24).

This area for improvement was made on 21 July 2023.

Action taken since then

This was met. We found that the service provider had taken the necessary steps to achieve improvement and were confident that this will continue to be the case. People got good support with their medication.

Previous area for improvement 3

To ensure people are kept safe and their health and wellbeing are promoted by the service having effective quality assurance, communication, and reporting systems, the provider should, but not limited to, ensure:

- a) improvements in quality assurance activities are sustained, embedded in practice and regularly reviewed across all key areas of the service's care and support to people;
- b) improvements in communication in the service are sustained and embedded in practice so that important information is provided to people, or their representative, and staff, as needed;
- c) review availability of administrative resources to increase capacity of frontline staff to undertake quality assurance activities
- d) improvements in recording and reporting systems are maintained and regularly reviewed; ensuring that they comply with all legal responsibilities, including submission of notifications to the Care Inspectorate in accordance with its notification guidance.

This is to comply with Regulation 4 (1)(a) (Welfare of users) of The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/210).

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which states that: 'I benefit from a culture of continuous improvement, with the organisation having robust and transparent quality assurance processes' (HSCS 4.19).

This area for improvement was made on 21 July 2023.

Action taken since then

This area for improvement was not met. We have revised this area for improvement to help ensure the service provider takes the necessary actions to make further improvement. This will help make sure that quality assurance, recording and communication is meeting people's needs and assisting them to stay safe and well and getting the most out of life. Please see Key Question 1 'How well do we support people's wellbeing?'.

Previous area for improvement 4

To ensure people can be confident that all staff have access to the right information about their current care and support needs, the provider should, but not limited to, ensure:

- a) people's support plans are always kept up to date and improvements in support planning are sustained
- b) the quality of people's care and support is frequently evaluated and recorded and where a person's care needs or risk level changes, such as a change in their health, all care plans are updated accordingly.

This is in order to ensure that care and support is consistent with the Health and Social Care Standards which state that: 'My personal plan is right for me because it sets out how my needs will be met, as well as my wishes and choices' (HSCS 1.16).

This area for improvement was made on 21 July 2023.

Action taken since then

This was not met. We have revised this area for improvement. Please see Key Question 1 'How well do we support people's wellbeing?'.

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?	4 - Good
1.3 People's health and wellbeing benefits from their care and support	4 - Good

How good is our staff team?	4 - Good
3.3 Staffing arrangements are right and staff work well together	4 - Good

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