

# Penumbra Aberdeen Mental Health Service Housing Support Service

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**Type of inspection:**  
Unannounced

**Completed on:**  
21 August 2025

**Service provided by:**  
Penumbra

**Service provider number:**  
SP2003002595

**Service no:**  
CS2014329157

## About the service

Penumbra Aberdeen Mental Health Service provides a care at home and housing support service to people in their own home. The service supports people living in the Aberdeen area of Scotland.

## About the inspection

This was an unannounced inspection which took place on 20 August 2025 from 11:30 until 18:00, 21 August 2025 from 09:00 until 16:00 and 22 August 2025 from 09:00 until 14:00. 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:

- reviewed online surveys sent out prior to the inspection. We received feedback from nine people using the service, seven staff members and five stakeholders;
- spoke with six people using the service and five of their family;
- spoke with nine staff and management;
- observed practice; and
- reviewed documents

## Key messages

Staff had good knowledge of people's needs and appeared confident.

People valued the support they received from the service.

Staff worked well together.

There had been learning and development in the service to improve staff practice in recognising thresholds in relation to risk for people and when to intervene.

Most people received support from a consistent team.

People's review meetings should continue to develop to reflect people's views and participation.

## 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 staff team?	5 - Very Good
How well is our care and support planned?	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 valued their support from the service and felt involved in their support. People told us they were enabled to set achievable goals. One person told us "Staff help me with whatever I need or want, which includes my bills, my house, my health and shopping". One person shared that staff facilitated, supported and made a house move possible and this was something the person never thought they would cope with. The connections and relationships enriched people's lives and supported good outcomes. One person told us "I am not seen as a problem; I am seen as a person".

People shared that they trusted staff. Staff advocated for people and liaised with external health professionals when people were unwell or required access to other services.

Most people's support was tailored to people's needs and was flexible. Families appreciated the care and support and the positive outcomes for their relative. One relative told us about the planning and preparation for someone's travel to visit a friend. However, another relative shared concern about lack of progress with some issues. We discussed this with the manager and observed that the service had tried to facilitate further supports for a situation but there had been limited progress. During the inspection further action was taken by the manager to try and access further support.

We observed work has been undertaken by the provider following a complaint. This was evident in staff practice and case recordings. This meant the service was learning and developing from adverse events and incidents. The leadership team was working with staff to ensure any concerns about people's wellbeing was reported. This was also a feature of staff's one to one supervision and helped ensure people got the right support at the right time.

The provider had comprehensive policies and procedures in place. This meant staff had guidance to follow. Staff had a robust induction. Accidents, incidents and safeguarding concerns were reported appropriately with notifications made to relevant agencies. Appropriate risk assessments were in place and people's support plans were detailed reflecting people's preferences. This helped keep people safe.

People's finances were managed safely and appropriately with robust systems and audits in place. The service prompted some people with medication and there were appropriate consents in place for people. The ethos of the service reflected the provider's values; this was evident throughout the service. People's rights were recognised and promoted.

## How good is our staff team?

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 a robust training system in place for staff and there was an induction process in place with a probationary review. The manager had good oversight of staff training. Staff shared that the training available supported their development and confidence. There was a learning culture within the service and if there was specific training staff felt they would benefit from, the manager would request it. We also

observed peer support and training which promoted people's development, for example, a team member developed and delivered coaching training to the staff. The provider had also provided bespoke training following a complaint and staff felt this had a very positive impact on their development. The learning from this would help support good outcomes for people. It was evident that there had been an increase in staff confidence.

Staff had access to regular one to one supervision both formally and informally. This was person led and at an agreed frequency. It helped staff reflect on practice and discuss any issues. It also supported staff wellbeing and any developmental needs. Staff we spoke with valued this and their peer support from colleagues. Morale in the service was good and there was a positive atmosphere.

Team meetings were held and staff shared that they felt valued, listened to and involved in the development of the service.

The provider had safe systems in place for lone working, and this helped support staff wellbeing. There was also access to a support service for staff. Staff told us they felt supported, and one staff member said, "I love my job; it is the best place I have ever worked". The values of staff were evident in the observations of practice and feedback from people using the service. Staff viewed their role as a privilege and were motivated to support people.

Staff practice was regularly observed to ensure staff had the right knowledge, skills and competence to support people. Staff were registered with the appropriate regulatory body, were recruited safely with appropriate paperwork and procedures in place. There was good oversight of this.

## How well is our care and support planned?

## 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 personal plans which provided clear information about people's needs, views, consents and wishes. People were involved in planning their support. There was detailed person-centred information which included signs of someone becoming unwell and people's legal status. This meant staff had the right information about people's needs to provide the right support in the right way.

The care plans included a weekly planner of support. Most people knew who was coming to provide their support, but some people did not. The service should ensure that people are informed if there is a change of staff member if their usual person is not available. This would help prepare people and reduce potential anxiety.

Care records were mostly detailed and included information about how someone was and the outcome from the support. The service should continue to develop this as some recordings did not include this information.

Review meetings were held within the required regulatory timescales and people and their families participated. Most actions from review meetings were followed up timeously but some were not. The service should ensure actions agreed at meetings are followed up to prevent delay and drift. This would help ensure that people's support is adjusted at the right time to meet any changing needs or issues. Most of the review meetings sampled included people's views and participation; this is something the service should continue to develop.

The manager of the service was auditing care plans which identified areas where plans could improve. People were also regularly asked for feedback on the service, and the manager should continue to develop this, update people on the outcome of their feedback and how it contributes to continuous improvement of the service.

## 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 evaluate people's experiences and to support continuous improvement, the provider should ensure that people are consulted on their experience of the service. This should include, but is not limited to, service user consultation, reviews and care planning. The feedback should also be incorporated in the developing service improvement plan to inform and contribute to service development.

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

'I am supported to give regular feedback on how I experience my care and support, and the organisation uses learning from this to improve.' (HSCS 4.8)

**This area for improvement was made on 24 July 2023.**

#### Action taken since then

Since the last inspection work was undertaken by the service to ensure people's experience and feedback on their support is sought, recorded and contributes to the development of the service.

People's feedback is now a feature of review meetings. Most reviews we sampled reflected people's views, however this should continue to be developed.

The feedback is shared with the team and used to make adjustments and develop the service and is part of the service improvement plan. This could be developed further to capture people's outcomes or the changes since obtaining feedback. We were confident this would continue to be developed.

We assessed that this area for improvement was met.

### Complaints

Please see Care Inspectorate website ([www.careinspectorate.com](http://www.careinspectorate.com)) for details of complaints about the service which have been upheld.

## Detailed evaluations

How well do we support people's wellbeing?	5 - Very Good
1.3 People's health and wellbeing benefits from their care and support	5 - Very Good
How good is our staff team?	5 - Very Good
3.2 Staff have the right knowledge, competence and development to care for and support people	5 - Very Good
How well is our care and support planned?	5 - Very Good
5.1 Assessment and personal planning reflects people's outcomes and wishes	5 - Very Good

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