

Riddrievale Service Care Home Service

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Glasgow
G33 2RN

Telephone: 01417 702 320

Type of inspection:
Unannounced

Completed on:
5 August 2025

Service provided by:
The Mungo Foundation

Service provider number:
SP2003000182

Service no:
CS2006137042

About the service

Riddrievale Service is a care home registered with the Care Inspectorate to provide a respite and short break service to a maximum of nine people with learning disabilities and/or physical disabilities.

The service is provided by the Mungo Foundation, a social care charity founded on the principles of social justice and social inclusion and dedicated to caring and supporting vulnerable people in our community.

The accommodation is provided over two levels with several communal spaces and accessible outside space for people to enjoy. Of the nine bedrooms, seven have en suite facilities. There are a further four communal bathrooms.

Riddrievale Service have a minibus to take people from their home or day centre to the service and for social activities. At the time of this inspection visit there were four people being supported at the service.

About the inspection

This was an unannounced inspection which took place between 4 and 5 August 2025. 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 three people using the service and five of their relatives
- spoke with six staff and management
- spoke with two visiting professionals
- observed practice and daily life
- reviewed documents.

Key messages

- Planned work was scheduled to address environmental risks requiring attention.
- People benefitted from good quality support from a dedicated staff team familiar with their needs and preferences.
- People receiving support and their families were very satisfied with the service.
- Staff training and development processes should be improved.
- Personal plans set out people's needs and preferences well.

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?	4 - Good
How good is our setting?	3 - Adequate

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's health and wellbeing should benefit from their care and support. We observed a team of dedicated, compassionate staff who clearly cared for the people they supported. One person told us, "staff are the best." This provided assurance that people felt well supported. Relationships were based on trust. Staff were skilled in understanding and responding to people's individual communication needs. This meant people could be confident they were supported by staff who knew them well.

Feedback from families showed high levels of satisfaction with the quality of care and support that Riddrievalle provided. The service made a positive difference to people's lives. Family members told us, "we are delighted with the service provided," and "the staff are fantastic." This showed families had confidence in the service.

There were good working relationships with external professionals. We received positive feedback. One professional told us they were confident that if they raised a concern, appropriate actions would be taken. This collaborative approach helped keep people well.

People's health benefitted from their care and support. Families confirmed they were involved in decisions about the support provided. One relative told us "communication is good, and I am contacted about any changes." People and those close to them were routinely involved in developing and reviewing their personal plans. This ensured that, as far as possible, people were supported according to their wishes.

People were supported by staff who had the necessary information about their needs and wishes. A communication book and daily staff handovers promoted effective information sharing. Pre and post-admission assessments were undertaken to ensure people received the right care and support.

Personal plans were person-centred and involved those who used in the service. Plans gave staff very good direction about people's support needs and their choices. There was good detail about known risk factors and planned interventions to mitigate these. It was evident that staff knew people well and responded to changes. This helped promote health and wellbeing and ensured people's support was right for them.

Services kept clear and accurate records of daily care and support delivered, as well as people's presentation and wellbeing. Record keeping would be further enhanced by evaluating people's experiences. The management team acknowledged this as an area requiring development and were receptive to suggestions made during the inspection.

Medication was managed well. Appropriate systems ensured people received their medication at the right time, promoting safety and wellbeing.

Meaningful activity and social engagement promote wellbeing. People had opportunities to take part in a range of activities such as crafts, sensory activities, karaoke, day trips, and maintaining connections with the wider community. It was clear people enjoyed attending the service. People told us "Coming here is the best." This helped ensure people got the most out of life.

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

We evaluated this key question as good, where several strengths positively impacted outcomes for people and clearly outweighed areas for improvement.

The well established staff team worked well together. Respectful communication contributed to a welcoming atmosphere and good working relationships. Staff felt listened to and valued as there were opportunities for them to discuss aspects of their work, development, and wellbeing.

People received support from consistent staff who knew them well and had built caring relationships with them. Staff appeared motivated, and good feedback was received from those they supported. One person told us "The staff are the best."

Staffing levels were informed by assessments of people's needs, which were updated using the provider's dependency tool. People could be assured that staffing levels provided staff with sufficient time to offer person centred support.

Staff were registered with relevant professional bodies where required and understood their professional responsibilities.

People could be confident that recruitment followed expected best practice. An induction programme for new employees helped ensure staff were prepared for their role. This included shadowing opportunities.

People should expect staff to be trained, competent, and reflect on their practice. A staff training programme was in place; however, we found that some staff required updates. We were assured that a plan was in place to provide refresher training.

How good is our setting?**3 - Adequate**

We evaluated this key question as adequate. An evaluation of adequate applies where there were some strengths, but these just outweighed weaknesses. While the strengths had a positive impact, key areas needed improvement.

People should benefit from high-quality facilities. The Riddrieval Service provided a welcoming environment, with hallways decorated with photographs of individuals enjoying outings and activities. People benefitted from communal lounge areas, a garden, a cinema, a games room, and a sensory room. However, the hallway appeared tired and in need of redecoration. An environmental improvement plan was in place to address this and ensure Riddrieval remained a pleasant place to enjoy a short stay.

Bedrooms were single occupancy, supporting people's privacy. Of the nine bedrooms, seven had en suite facilities, a further four shared bathrooms were available. Overall, the standard of cleanliness in bedrooms was good; however, some paintwork required refreshment. One en suite bathroom ceiling was water damaged, the external repair work had been undertaken and this area required redecoration. A plan was in place to address this.

During the previous inspection, we made an area for improvement to improve the presentation of the kitchen. Due to the kitchen's state of disrepair the provider had prioritised this for refurbishment. However, plans to upgrade the kitchen had been delayed due to the need for additional priority replacement of pipework to maintain safety. We accept the reason for the delay however, the kitchen had deteriorated further, and posed a potential infection control risk as it could not be cleaned effectively. The management

team agreed to temporary repairs including replacement work tops until the planned kitchen refit could be carried out (See Requirement 1).

The service was supported by dedicated maintenance personnel. Records confirmed that routine checks of equipment were carried out as expected, helping to maintain a safe environment for people.

Requirements

1. By 31 October 2025, the provider must ensure that people experience an internal environment that is well maintained. To do this the provider must, but not be limited to ensure that:

- a) Temporary repairs to the kitchen area are undertaken to allow adequate cleaning and ensure the integrity of work surface.
- b) Planned pipework replacement is completed to mitigate potential risks in the service
- c) The scheduled environmental improvements are progressed

This is to comply with Regulations 4(1)(a)(d) (Welfare of Users) and Regulation 10(a)(b)(c)(d) (Fitness of Premises) 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 state:

"I experience an environment that is well looked after with clean, tidy and well-maintained premises, furnishings and equipment." (HSCS 5.22).

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

The provider should prioritise the completion of kitchen repair work.

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

"I experience an environment that is well looked after with clean, tidy and well maintained furnishings and equipment." (HSCS 5.22).

This area for improvement was made on 30 July 2024.

Action taken since then

The kitchen was scheduled to be replaced. This had to be postponed due to the priority repair work. The provider agreed to make temporary improvements to allow the kitchen to be cleaned.

This area for improvement has been reflected as a requirement and is therefore discontinued.

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?	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?	4 - Good
3.2 Staff have the right knowledge, competence and development to care for and support people	4 - Good
How good is our setting?	3 - Adequate
4.1 People experience high quality facilities	3 - Adequate

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