The Richmond Fellowship Scotland – Angus & Dundee
Housing Support Service
Suite 4
Kirkton Enterprise Centre
Sir William Smith Road
Arbroath
DD11 3RD
Telephone: 01738 440012

Inspected by: Timothy Taylor
Type of inspection: Announced (Short Notice)
Inspection completed on: 9 May 2014
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Service provided by:
The Richmond Fellowship Scotland Limited

Service provider number:
SP2004006282

Care service number:
CS2004062784

Contact details for the inspector who inspected this service:
Timothy Taylor
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Email enquiries@careinspectorate.com
Summary

This report and grades represent our assessment of the quality of the areas of performance which were examined during this inspection.

Grades for this care service may change after this inspection following other regulatory activity. For example, if we have to take enforcement action to make the service improve, or if we investigate and agree with a complaint someone makes about the service.

We gave the service these grades

<table>
<thead>
<tr>
<th>Area</th>
<th>Grade</th>
<th>Rating</th>
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<tbody>
<tr>
<td>Quality of Care and Support</td>
<td>5</td>
<td>Very Good</td>
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<tr>
<td>Quality of Staffing</td>
<td>5</td>
<td>Very Good</td>
</tr>
<tr>
<td>Quality of Management and Leadership</td>
<td>5</td>
<td>Very Good</td>
</tr>
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</table>

What the service does well

This service provides support to people in an effective and proactive way. The promotion of people’s choices comes first and the service is not afraid to take an assessed risk if it means positive outcomes for people. The staff are well trained, supported and monitored and as a result are of a high quality. This service works with people with complex needs and provides them with effective support to reach their potential and attain their goals.

What the service could do better

The service is in the process of developing its support planning documentation, how it involves people in the running of the service and their own lives. Staff are being supported to develop their skills and use them for the benefit of service users.

What the service has done since the last inspection

The service has developed how it balances staff groups in each project to ensure the most effective mix of people. It has continued to provide a high level of support for people and positive outcomes for service users.

Conclusion

This is a high quality service which delivers positive outcomes for the people it supports.
Who did this inspection
Timothy Taylor
1 About the service we inspected

The Care Inspectorate regulates care services in Scotland. Information about all care services is available on our website at www.careinspectorate.com.

This service was previously registered with the Care Commission and transferred its registration to the Care Inspectorate on 1 April 2011.

Requirements and recommendations

If we are concerned about some aspect of a service, or think it could do more to improve, we may make a recommendation or requirement.

* A recommendation is a statement that sets out actions the care service provider should take to improve or develop the quality of the service but where failure to do so will not directly result in enforcement. Recommendations are based on the National Care Standards, relevant codes of practice and recognised good practice.

* A requirement is a statement, which sets out what is required of a care service to comply with the Public Services Reform (Scotland) Act 2010 and Regulations or Orders made under the Act or a condition of registration. Where there are breaches of the Regulations, Orders or conditions, a requirement must be made. Requirements are legally enforceable at the discretion of the Care Inspectorate.

The Richmond Fellowship Scotland (TRFS) is a charitable organisation, providing services for people who have mental health difficulties, learning disabilities, autism, dementia and alcohol-related difficulties. The organisation is divided into four regions, covering the whole of Scotland. The Angus and Dundee service forms part of the North Region.

This service was registered with Social Care and Social Work Improvement Scotland (Care Inspectorate) on 1 April 2011. It provides both housing support and support services (care at home) to adults with a wide range of support needs. The service is subdivided into Angus Supported Living Services (based in Arbroath) and three staff teams in the Dundee area, providing both supported accommodation and outreach support.

The Richmond Fellowship Scotland’s mission is to ‘develop and deliver best personal supports that listen to what people want and achieve what matters for the person’.

Based on the findings of this inspection this service has been awarded the following grades:

- **Quality of Care and Support** - Grade 5 - Very Good
- **Quality of Staffing** - Grade 5 - Very Good
- **Quality of Management and Leadership** - Grade 5 - Very Good
This report and grades represent our assessment of the quality of the areas of performance which were examined during this inspection.

Grades for this care service may change following other regulatory activity. You can find the most up-to-date grades for this service by visiting our website www.careinspectorate.com or by calling us on 0845 600 9527 or visiting one of our offices.
2 How we inspected this service

The level of inspection we carried out
In this service we carried out a low intensity inspection. We carry out these inspections when we are satisfied that services are working hard to provide consistently high standards of care.

What we did during the inspection
This report was written after an inspection which took place on 07-09 May 2014. As requested by us, the service sent us an annual return. The Care Inspectorate wrote to the service to request completion of the self assessment form which was duly completed.

40 questionnaires were sent to the service to distribute to service users and 14 were returned.

In this inspection we gathered evidence from the following sources:-

- Interviews with 4 staff
- Interviews with 6 service users
- Interviews with 2 relatives
- Interviews with area and project managers
- Interview with 1 visiting health/social work professionals
- Inspection of personal plans
- Inspection of records
- Inspection of policies and procedures
- Observation of staff practice.

Grading the service against quality themes and statements
We inspect and grade elements of care that we call ‘quality themes’. For example, one of the quality themes we might look at is ‘Quality of care and support’. Under each quality theme are ‘quality statements’ which describe what a service should be doing well for that theme. We grade how the service performs against the quality themes and statements.

Details of what we found are in Section 3: The inspection
**Inspection Focus Areas (IFAs)**

In any year we may decide on specific aspects of care to focus on during our inspections. These are extra checks we make on top of all the normal ones we make during inspection. We do this to gather information about the quality of these aspects of care on a national basis. Where we have examined an inspection focus area we will clearly identify it under the relevant quality statement.

**Fire safety issues**

We do not regulate fire safety. Local fire and rescue services are responsible for checking services. However, where significant fire safety issues become apparent, we will alert the relevant fire and rescue services so they may consider what action to take. You can find out more about care services’ responsibilities for fire safety at www.firelawscotland.org
What the service has done to meet any recommendations we made at our last inspection

All recommendations had been met

The annual return

Every year all care services must complete an ‘annual return’ form to make sure the information we hold is up to date. We also use annual returns to decide how we will inspect the service.

Annual Return Received: Yes - Electronic

Comments on Self Assessment

Every year all care services must complete a ‘self assessment’ form telling us how their service is performing. We check to make sure this assessment is accurate. The Care Inspectorate received an extensively detailed and fully completed self assessment document from the service provider. We were very impressed with the way this had been completed and with the information they had provided under each theme that we were inspecting.

Taking the views of people using the care service into account

6 service users were spoken with during the inspection and 9 care service questionnaires were returned to the inspectorate. The views expressed were generally very positive about the service. Here are some of the things residents said:-

- I get on very well with my keyworker.
- I feel safe here.
- The staff support me when I go out.
- I enjoy lots of activities including chair aerobics, literacy classes and shopping.
- I am invited to review meetings and they listen to my views.
- They have helped me to be more independent than I used to be.
- We are going to the safari park on a trip; we decided we wanted to do that.
- They treat me with dignity and respect here.
Taking carers' views into account

Two relatives were interviewed during the inspection. Generally comments were very positive about the service and especially the staff. Here are some quotes that reflect the views expressed:-

- We are very happy with the service.
- They are good communicators and will ring us to discuss any issues.
- Our son is happy so we are very happy.
- Yes we attend regular review meetings.
- We are made to feel welcome when we meet staff.
- It is working well - this is an excellent service.
- TRFS treat people well and want what is best for them.
3 The inspection

We looked at how the service performs against the following quality themes and statements. Here are the details of what we found.

Quality Theme 1: Quality of Care and Support

Grade awarded for this theme: 5 - Very Good

Statement 1
We ensure that service users and carers participate in assessing and improving the quality of the care and support provided by the service.

Service strengths
This service had a very good level of participation for service users. Here are some examples of the strengths:

- TRFS has a participation policy which outlines that the involvement of the individuals they support, their carers and families is important and lets them know the many ways they can become involved in the process. The service publicises its participation strategy and encouraged service users to get involved.
- Service users who receive outreach support get a chance to feed back on the quality of care they receive when they undertake their weekly chat with their key worker. These are meetings to plan and review ongoing care and include questions on quality of care. This gave service users the opportunity to comment on how they felt their care package was going and to discuss how it might be improved. This group of service users got their support plans reviewed on a 3 monthly basis. This, again, gave people and their representatives a chance to influence how their care was delivered. Interviews with service users and carers confirmed they attended regular reviews and that these meetings were open for discussion.
- Service users who live in the group supported accommodation benefited from regular tenants meetings which encouraged people to have their say and to decide what they wanted to happen. One of the units visited by the inspector had decided that a trip to a local sealife centre was what they wanted and that they wanted to set up a regular time to all meet and play dominoes in the sun lounge.
• TRFS also sets aside a participation fund which service users can apply for to improve their social lives. One accommodation had got money to convert their foyer into a social area that people used for meeting socially and pursuing various shared activities. This process encouraged service users to participate in improving their own lives and had been a positive benefit to them.

• Annual ‘How Well Are We Doing’ surveys are sent out and service users return them anonymously. The service then devises action plans as a result of feedback gained. This information went into local service development plans and was fed back to service users via newsletters and at meetings.

• Carers also received an annual survey which gathered their views and also acted on any feedback that required an improvement.

• The service had a well publicised complaints procedure with copies in the foyer of the units and the offices visited by the inspector. Service users all got a copy when they began receiving a service and when interviewed knew who they would speak to if they had a complaint. This policy was available in a variety of formats including read or pictorial.

• When the service was recruiting new staff service users were involved. They contributed questions they would like to see asked and often met informally with candidates.

The inspector was impressed with this service’s commitment to participation. It was also clear, from observation of staff practice, that they had good relationships with service users and knew how to promote effective communication. Without these attributes participation would not be effective and the staff are to be commended as is the service.

**Areas for improvement**

The service should further develop its involvement of service users in recruitment where people are interested. This will help develop service user participation and their personal skills. There is also an opportunity to involve carers and family more although it is acknowledged that this is dependent on service user consent.

**Grade awarded for this statement:** 5 - Very Good

**Number of requirements:** 0

**Number of recommendations:** 0
Statement 3
We ensure that service users’ health and wellbeing needs are met.

Service strengths
The service had a good level of care provision for service users. Here are some examples of the strengths:-

- Each service user had an agreed support plan which outlined how the service was going to support them. These contained good detail on how people were to be supported, relevant risk assessments such as for people at risk of falls, diabetes, isolation and aggression. It was clear from support plans that there was involvement from external health professionals such as local mental health team, speech and language therapy and psychiatry for those that needed this kind of support. On one visit to a unit the inspector observed staff liaising with a visiting mental health nurse in relation to supporting a service user.
- It was clear that this service supported people to live their lives as independently and fully as they wanted. In interviews service users spoke positively about the support they received and several said that they had improved their lives since TRFS had begun supporting them. One person felt that they had improved so much they were ready to get a flat of their own in the community. Activities of support included assistance with appointments, shopping, attending groups such as seated exercise, literacy classes and to go on holiday.
- Staff were trained to support service users to take their medication and clear about protocols in relation to certain sorts of drugs such as sedatives and those medicines to be taken as required (PRN).
- When interviewed service users felt that they were well supported and that they had good relationships with staff. Carers who were spoken with felt the service were good communicators and that service users had improved under the support of TRFS staff.
- There was evidence of service users receiving annual health checks, attending dentists, opticians and preventative screening clinics. This enabled service users to live as full lives as possible.
- Staff, at interview, confirmed they were aware of infection control measures and had access to personal protection equipment in relation to infection control such as gloves aprons and shoe protectors.
- It was clear in the communal units that staff promoted social interaction and activities among tenants where they wanted it. This benefitted service users by increasing their social lives and building their social skills.
It was clear that this service provided a high level of support and care to people with a range of complex physical and mental health needs and that service users were benefitting as a result. The inspector was also impressed with the way the service was not afraid to take planned and agreed levels of risk if it benefited service users to live a fuller life.

**Areas for improvement**

In some areas support plans would benefit from clearer organisation so that new staff can see easily what care a person requires. See recommendation 1.

It was felt by the inspector that support plans would be even more effective if they contained an overall statement on outcomes for people. (New paperwork for support plans is due from TRFS and is said to contain such an outcome centred view but this has not been implemented yet). See recommendation 1.

**Grade awarded for this statement:** 5 - Very Good

**Number of requirements:** 0

**Number of recommendations:** 1

**Recommendations**

1. Support plans should be well organised so that the live care plans are easily accessible to staff and that these support plans contain statements on agreed outcomes for service users.

   **NCS 4 Housing Support Services - Housing Support Planning.**

   You will be fully involved in developing your personal plan and in any later reviews. You will receive copies of these that have been signed and dated by the housing support service provider.

   1 Your personal plan will set out the way the service is shaped to meet your needs.
Quality Theme 3: Quality of Staffing
Grade awarded for this theme: 5 - Very Good

Statement 1
We ensure that service users and carers participate in assessing and improving the quality of staffing in the service.

Service strengths
Please see Quality Theme 1 statement 1 for information in relation to this statement.

Areas for improvement
Please see Quality Theme 1 statement 1 for information in relation to this statement.

Grade awarded for this statement: 5 - Very Good

Number of requirements: 0
Number of recommendations: 0
Statement 3
We have a professional, trained and motivated workforce which operates to National Care Standards, legislation and best practice.

Service strengths
The inspector was impressed with the high level of knowledge and professionalism of the workforce at this service. Here are some of their strengths:-

- Staff at the service had a high level of training. Training records and staff interviews confirmed that all staff had been through an induction programme when they began work and that this included core training such as values, learning disability awareness, medication training, moving and handling, health and safety and adult protection. Staff also received training that they had identified as being useful for them. One staff member gave an example of autism training for when a service user needed support in this area. The service also provided vocational awards such as SVQ. Staff interviewed felt that if they identified a training need it would be addressed if it benefited their work role. This allowed staff to be confident in supporting people.
- Staff with supervisory roles also got training to enable them to manage effectively. Training quoted by staff as having been received was supervision training, support planning training and coaching and mentoring. This ensured managers were confident to ensure staff were being effective in their support roles.
- Extensive interviews with staff showed that they were all aware of the National Care Standards and could apply them to their work role. All spoken with confirmed they had been given SSSC codes of practice. It was clear from supervision records that the service was active in tackling practice issues. The service had a comprehensive set of policies and procedures which lay out expectations of good practice for staff.
- Staff all stated that they felt that they were supported to do their job and their ideas were valued by management. All felt they were part of a team that was supportive. They felt they had the proper equipment to carry out care tasks and enough time to do their allotted jobs. There was enough time for handover of information when they came on shift and there were team meetings. Service users and carers who were interviewed were also very enthusiastic about the staff and highlighted their sensitivity, support, friendliness and flexibility.
- All staff confirmed they got regular supervision at which they could discuss their ideas, their performance and the people they cared for. They also received annual appraisal to help them develop as professional workers.
- Observation of staff practice undertaking a variety of tasks with service users showed them to be confident, relaxed and professional in their approach.
The inspector was impressed with the quality and commitment of the staff interviewed. They demonstrated practice that was person centred and innovative: always looking for ways around a problem if it benefited the people they worked with.

**Areas for improvement**

The Service has a variety of plans in place to increase staff skills set, they are going to train people in wellness recovery action plans, dementia champions and communication.

**Grade awarded for this statement:** 5 - Very Good

**Number of requirements:** 0

**Number of recommendations:** 0
Quality Theme 4: Quality of Management and Leadership
Grade awarded for this theme: 5 - Very Good

Statement 1
We ensure that service users and carers participate in assessing and improving the quality of the management and leadership of the service.

Service strengths
Please see Quality Theme 1 statement 1 for information in relation to this statement.

Areas for improvement
Please see Quality Theme 1 statement 1 for information in relation to this statement.

Grade awarded for this statement: 5 - Very Good

Number of requirements: 0

Number of recommendations: 0
Statement 4

We use quality assurance systems and processes which involve service users, carers, staff and stakeholders to assess the quality of service we provide

Service strengths

The service had a very good quality assurance system supported by its provider Angus Council and from within the service itself. Here are some of the strengths identified:-

- It is clear that the health and wellbeing of service users was at the core of what this service does with its person centred and detailed approach. (The information for this can be found in Quality Theme 1 statement 3).
- The service had a good level of participation whereby service users, staff and other stakeholders can have an input into what the service delivers. (The information for this can be found in Quality Theme 1 statement 1).
- The service had effective systems in place to support staff, to develop their skills via training and supervision - they also involve staff in developing the service. (The information for this can be found in Quality Theme 1 statement 3).
- It was clear from interviews with senior staff that they were expected to attend a variety of external meetings and forums which contributed to them being well informed of current and best practice in the areas of mental health and learning disability. Managers went to local forums and wider management meetings within TRFS and were supported by the wider resources of the organisation.
- Each segment of this service had its own local development plan. These were often innovatively displayed on the wall of an office or unit so that all staff and service users could see what was being developed. These plans were informed by tayside locality plans which in turn were informed by national TRFS development plans. Tayside is currently developing a skills audit for a skills toolkit for use by staff.
- Regular audits were carried out of support plans, staff functions and other key performance indicators. This ensured that the organisation monitored the quality of all its individual services and the outcomes for service users.

The inspector was impressed with the way this service was proactive and creative in the way it monitored quality and its provision of services. There was evidence of the use of advocacy to ensure service users got the choices they made addressed.
**Areas for improvement**

The service should ensure that all parts adhere to the monitoring and auditing of support plans. There had been some disruption to this due to staff changes.

**Grade awarded for this statement:** 5 - Very Good

**Number of requirements:** 0

**Number of recommendations:** 0
4 Other information

Complaints
No complaints have been upheld, or partially upheld, since the last inspection.

Enforcements
We have taken no enforcement action against this care service since the last inspection.

Additional Information
None noted.

Action Plan
Failure to submit an appropriate action plan within the required timescale, including any agreed extension, where requirements and recommendations have been made, will result in the Care Inspectorate re-grading a Quality Statement within the Quality of Management and Leadership Theme (or for childminders, Quality of Staffing Theme) as unsatisfactory (1). This will result in the Quality Theme being re-graded as unsatisfactory (1).
### 5 Summary of grades

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<thead>
<tr>
<th>Quality of Care and Support - 5 - Very Good</th>
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<tr>
<td>Statement 1</td>
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<td>Statement 3</td>
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<tr>
<th>Quality of Staffing - 5 - Very Good</th>
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<tr>
<td>Statement 1</td>
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<td>Statement 1</td>
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<td>Statement 4</td>
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### 6 Inspection and grading history

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<th>Date</th>
<th>Type</th>
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<tr>
<td>Management and Leadership</td>
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All inspections and grades before 1 April 2011 are those reported by the former regulator of care services, the Care Commission.
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