Type of inspection:
Unannounced

Completed on:
25 June 2018

Service provided by:
Scottish Borders Council

Service no:
CS2004057792

Service provider number:
SP2003001976
About the service

The service has been registered since 2002.

Galashiels Resource Centre is an integrated service for adults whose lives are affected by mental health issues. They offer a recovery focused service which includes therapeutic activities, individual support and social groups, as a “stepping stone” to increase knowledge and support people to develop their skills to help improve their well being. The aim is to support people through their recovery towards the next step of “moving on” to live as actively and independently as possible in their own community.

Galashiels Resource Centre is in a central location, with all the amenities of the town close to hand and with good access to public transport. The service is provided from a large stone-built two storey property with good garden space to the rear used for recreation and woodwork and which is tended by service users.

The aim of the service is to “offer assessment with a view to treatment and support of people’s needs to enable them to maintain their community presence, maximise their quality of life and feelings of well-being, and gain a personal recovery at a level they are comfortable with, ultimately aiming to reduce or eliminate periods of ill health.”

What people told us

People were very happy with the support they received and the difference this had made to their lives. Comments included:

*The staff greet you on arrival and they know everyone’s names and this also engenders the feeling of safety throughout the centre. I am treated extremely well by all the staff. I am made to feel welcome and involved in everything that happens. Everyone is so welcoming and caring. The staff explain everything we do and the reason/purpose behind it. All paperwork involving me is shared with me and I feel comfortable that they know and can explain exactly what they’re doing/planning. I am asked how I feel about things and I am very happy with everything they do and I feel listened to. The GRC is a lifeline for people like me who suffer mental health problems”.

“I feel well supported by everyone at the centre. My key worker is always available when I use the centre and always has time to speak to me. We have regular meetings on how I am doing and what more can be done to help me in my recovery. The centre has a great atmosphere and I get a sense of security there”.

“The service often helps me with things initially but they often push me to do things independently which is very good”.

“The staff seem to know what they are talking about when it comes to the issues I have and the help I need”.

“I am often asked if there is anything they could do differently to improve the service and I feel they do take into consideration the things I say”.

“The service helps me through rough days, allows me to attempt new things, mix with people and challenges me to try more often instead of running away”.

“I did the dealing with distress course and I felt very understood. The staff teaching this knew a lot”.

“I have completed several really useful courses through GRC which have been very helpful. Staff are always really welcoming and friendly and they understand my anxieties and worries. They do not judge or criticize me and I feel encouraged and valued. I am aware that the support offered by the centre is time limited and I am working at achieving goals out with”.

Self assessment

We are not requesting self-assessments from providers for this inspection year. Issues relating to quality assurance, acting on feedback from people using the service and the quality of the service’s improvement plan are considered throughout the inspection.

From 1 April 2018 the new “Health and Social Care Standards have replaced the existing Care Standards. These Standards seek to provide better outcomes for people who experience care and services should now be familiarising themselves with these. Services must now take account of the new standards, and work with staff and the people they support to implement these effectively.

From this inspection we graded this service as:

<table>
<thead>
<tr>
<th>Category</th>
<th>Grade</th>
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</thead>
<tbody>
<tr>
<td>Quality of care and support</td>
<td>5 - Very Good</td>
</tr>
<tr>
<td>Quality of environment</td>
<td>not assessed</td>
</tr>
<tr>
<td>Quality of staffing</td>
<td>not assessed</td>
</tr>
<tr>
<td>Quality of management and leadership</td>
<td>4 - Good</td>
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</table>

What the service does well

The service continues to provide very good, recovery focused support which promotes positive outcomes for people as a “stepping stone” to improve their mental health and well being. The support provided enabled goals to be planned for each person to support them to regain their existing skills, strengths and abilities.

There were various groups provided to enable people to meet their goals and outcomes including animal care volunteer, gardening, art, the café, and anxiety management as some examples. Group sessions ran over a set period of time and from evaluations of these we could see how outcomes had improved for people.

The combination of groups and one to one support promoted positive outcomes for people towards their recovery, including increasing contact with others, learning new skills, and building confidence and self-esteem. People spoke positively of the outcomes they had achieved and told us;

“This service is helping me build self-confidence, self-esteem and looking towards a greater degree of independence. The groups and tasks are all working towards me feeling better about myself”.

“Since I have been there my life has improved immensely and I know things will only get better and better with all that GRC provides”.

“My confidence has improved since I started using the centre. I struggled before going out by myself but this is slowly improving”

The support was provided by a consistent and stable staff team who were well supported within their role. Specific training enabled staff to facilitate outcomes focussed sessions, such as anxiety management, dealing with distress and mindfulness based living well course. These promoted positive outcomes for people by increasing their knowledge to provide them with the skills and strategies to manage throughout their recovery journey.

The support was very much based on people’s strengths and existing skills and staff enabled people to reach their goals and believed in their potential. We saw very good examples where people had made significant achievements such as securing employment, going on holiday and accessing college as progression to their long term goal of their chosen career. People were complimentary of staff and comments included;

“Staff are always welcoming and friendly. They understand my anxieties and worries and they do not judge or criticize me. I feel encouraged and valued by GRC. I feel supported and I feel heard. Staff are consistent, gentle and they always take the time to explain things if needed. I am treated with respect and courtesy”.

“I feel supported and heard am treated with respect and courtesy. Staff are consistent, gently and they take time to explain things if needed”.

**What the service could do better**

We have repeated a recommendation made at the last inspection about monitoring service user’s recovery journey. The service had recently started using a new system which would demonstrate people’s identified support needs and outcomes which would be regularly reviewed. We consider this will be much more effective in capturing the very good outcomes for people we found throughout this inspection.
(Recommendation 1)

A recommendation was made at the last inspection about staff training. The way in which staff training is recorded, monitored and planned continues to need improvement. Not all training attended had been entered on the plan, and the recording of training over and above the mandatory was not included. This recommendation has been repeated.
(Recommendation 2)

A recommendation has been repeated about quality assurance within all areas of the service to enable improvements to be identified. There remained a lack of effective quality assurance systems or audits in place to enable the service to identify what it did well or where it could improve. The service should consider how they can undertake a “self-evaluation” of the service taking into account the new Health and Social Care Standards.
(Recommendation 3)

There will be a period of time where the service will be without a manager until a new appointment is made. We have asked the service to advise us how the service and staff will be effectively supported during this time.
**Requirements**

**Number of requirements:** 0

**Recommendations**

**Number of recommendations:** 3

1. The service provider should ensure that individual service user’s recovery journey is monitored, reviewed and evaluated. This should include a clear overview of how the service user has progressed toward, or meeting their desired goals and outcomes.

This is to ensure 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 1.15)

2. The provider should ensure that it has a comprehensive staff training plan in place and that this links into staff supervision and appraisal. This should include training identified, planned, attended and when due for renewal.

This is to ensure care and support is consistent with the Health and Social Care Standards which state that “I have confidence in the people because they are trained, competent and skilled, are able to reflect on their practice and follow their professional and organisational codes". (HSCS 3.14)

3. The service provider should develop and implement a system of audit to ensure effective oversight and monitoring of all aspects of the service. The system should enable areas for improvement to be identified and appropriate action taken.

This is to ensure 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)

**Complaints**

There have been no complaints upheld since the last inspection. Details of any older upheld complaints are published at [www.careinspectorate.com](http://www.careinspectorate.com).
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<thead>
<tr>
<th>Date</th>
<th>Type</th>
<th>Gradings</th>
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<tbody>
<tr>
<td>9 Feb 2016</td>
<td>Unannounced</td>
<td>Care and support 4 - Good</td>
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<td></td>
<td></td>
<td>Environment 4 - Good</td>
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<td></td>
<td></td>
<td>Staffing 4 - Good</td>
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<td></td>
<td></td>
<td>Management and leadership 4 - Good</td>
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<td>20 Mar 2013</td>
<td>Unannounced</td>
<td>Care and support 5 - Very good</td>
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<td></td>
<td></td>
<td>Environment 5 - Very good</td>
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<td></td>
<td></td>
<td>Management and leadership 5 - Very good</td>
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<tr>
<td>23 Nov 2010</td>
<td>Announced</td>
<td>Care and support 5 - Very good</td>
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<tr>
<td></td>
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<td>Environment Not assessed</td>
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