

## Riverside Project Care Home Service

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**Type of inspection:**  
Unannounced

**Completed on:**  
16 November 2022

**Service provided by:**  
Talbot Association Limited

**Service provider number:**  
SP2003000185

**Service no:**  
CS2003000940

## About the service

The Talbot Association's Riverside Project is based in Govan and is close to local shops and transport links and is registered to provide support and accommodation to 12 adults with a history of homelessness and mental health problems.

The project aims to build clients' self-esteem and be part of the community. There were 11 people using the service during this inspection.

The project is indistinguishable from other properties in the area, purpose built, with accommodation on three levels. People who use the service have their own bedroom, with en-suite facilities. There are two communal rooms. One is used for smoking, TV and playing pool the other for meals and relaxing.

People who use the service have access to the service's mini bus for outings and appointments.

## About the inspection

This was an unannounced inspection which took place on 16 November 2022 to review progress made on previous requirements. The inspection was carried out by one inspector from the Care Inspectorate. To prepare for the inspection we reviewed information about this service. This included previous inspection findings, information submitted by the service and intelligence gathered since the last inspection. In making our evaluations of the service we spoke with two people using the service. We also spoke with two staff and management. We observed practice and daily life and reviewed appropriate documents.

## Key messages

People living in the service felt safe and well cared for

There were improved opportunities for people to become involved in activities of their choosing.

A service improvement plan had been developed to support better outcomes for people.

Management audits had been built upon to monitor and improve delivery of key areas of support.

## What the service has done to meet any requirements we made at or since the last inspection

### Requirements

#### Requirement 1

By 31 October 2022 the provider must support people to get the most out of life and promote people's health and wellbeing.

To do this, the provider must as a minimum:

- ensure people are supported to maintain and develop interests, activities meaningful to them. This would include ensuring resources, transport and staff are available to facilitate activities of people's choosing.

This is to comply with Regulation 4(1) (a) and (d) (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 which state that: 'I can choose to have an active life and participate in a range of recreational, social, creative, physical and learning activities every day, both indoors and outdoors.' (HSCS 1.25)

**This requirement was made on 5 May 2022.**

#### Action taken on previous requirement

People living in the service were involved in regular meetings and supported to share their views and suggestions on how they would like to spend their time. Specific staff had been identified as activity coordinators and helped develop a weekly activity planner following feedback from people. This helped people to feel valued and listened to. Regular social events took place including pool competitions, film nights and raffles. People confirmed they looked forward to socially interacting with each other. Minibus outings took place monthly and offered people a chance to visit areas of interest including the seaside. People enjoyed these and looked forward to future trips.

Keyworkers had protected time to spend with residents individually and support them to use local facilities.

The manager had linked in with local resources to explore and access more community based activities. This helps people feel connected with their community.

## Met - outwith timescales

### Requirement 2

By 31 October 2022 the provider must develop a meaningful service improvement plan. To achieve this, the provider must as a minimum:

- a) seek the views and feedback of people using the service and their families of how they would like the service to develop;
- b) develop the staff training/development programme which meets the current and future needs of people using the service and the stated aims and objectives of the service; and
- c) build upon existing quality assurance systems to ensure care and support contributes to positive outcomes for people.

This is to comply with Regulation 4(1)(a)(d) and 10(2)(b) of The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011.

This is 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)

**This requirement was made on 5 May 2022.**

### Action taken on previous requirement

A service improvement plan had been developed. The manager had sought input from people using the service and their families through formal questionnaires and more informal feedback sessions. An ongoing feedback programme was in place to ensure the plan remained relevant to people's current views. The manager agreed to evaluate and update the improvement plan more regularly.

Staff training opportunities had been improved and had been identified based on changing needs of people living in the service. This included dementia and mental health awareness. An external facilitator had been sourced by the provider and delivered sessions on promoting meaningful activities and nutrition. This supported staff to have the necessary skills/knowledge to support people to achieve personal goals and help them to keep well. The manager planned to further develop a training matrix with the input of the staff team. Through reflection at staff forums and care planning reviews, the future needs of people would be identified and met by accessing appropriate learning and development opportunities.

Management audits were in place to monitor and support improvements in key areas of service delivery such as the environment. External provider audits enhanced the quality assurance process by reviewing practices around medication support and health and safety. The manager had begun to develop additional recording tools to coordinate all key information/actions from audits and evidence it impacting positive change through the service improvement plan. This would ensure a more cohesive overview of care and support delivered and help ensure positive outcomes for people living in the service.

## Met - outwith timescales

## 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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