

The Richmond Fellowship Scotland - Borders Intensive Support Service Housing Support Service

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Type of inspection:
Unannounced

Completed on:
2 February 2023

Service provided by:
The Richmond Fellowship Scotland

Service provider number:
SP2004006282

Service no:
CS2012314110

About the service

The Richmond Fellowship Scotland - Borders Intensive Support Service is registered to provide a service to people with a learning disability living in their own homes and in the community.

The office is situated in a small apartment complex and the service provides intensive support to six people living in the adjacent flats. Support is also provided to people living in the community within the Scottish Borders.

At the time of the inspection a service was being provided to nine people.

About the inspection

This was an unannounced inspection which took place on 31 January and 1 February 2022 between 09:30 and 17:15. 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, registration information, information submitted by the service and intelligence gathered since the last inspection. In making our evaluations of the service we:

- spoke with four people using the service and three family members
- spoke with staff and management
- observed practice and daily life
- reviewed documentation
- spoke with visiting professionals

Key messages

- People built trusting relationships with staff and were treated with respect.
- People were encouraged and supported to make decisions in their day to day lives.
- People were fully included in assessing and reviewing their own care and support.
- The service worked well with other health and social care professionals to ensure positive outcomes for people.
- Clear guidance was in place to manage risk and maintain people's safety.
- The provider promoted a culture of continuous learning.

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 leadership? | 4 - 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.

Staff members were considerate and helpful in the way they engaged with people experiencing care. We observed staff discussing a range of different issues with people, including guidance about how to avoid conflict in difficult situations. People told us that staff listened to them and helped them if they needed support. This meant that people were respected and valued and benefitted from building trusting relationships with staff.

Staff supported people in a way that helped them to increase and maintain independence as well as learning new skills. People were encouraged to make day to day decisions and choose how to spend their time. Support was provided within and outside their home environment and people had opportunities to pursue their interests and hobbies. One person told us they were happy as they were learning to maintain their bike. Other people were planning a holiday together. Therefore people led active lives and were encouraged to achieve their full potential.

The manager and staff strived to ensure the service was person centred and focused on meaningful outcomes for the people they support. People were supported to attend meetings and reviews where they could give feedback about their experiences. Staff consulted regularly with those supported about any potential changes they wanted in their lives, and everyone had access to advocacy services. People felt listened to, involved in assessing their own needs and included in the support they had to achieve positive outcomes.

The service demonstrated its close work with specialist professionals to ensure that risks and decisions were considered using a multi-agency approach. Visiting health and social care professionals told us that the service was well managed, communication was good and that they held the staff team in high regard. This confirmed that people's care and support was based on best practice and current guidance.

There were plans and processes in place to ensure people's health and wellbeing benefitted from safe infection prevention and control (IPC) practice. Individualised support plans were in place and were in the process of being updated. Staff had access to supplies of Personal Protective Equipment (PPE) as required. We were assured that the service had the necessary systems and resources in place to safely manage the potential spread of infection.

How good is our leadership?

4 - Good

We evaluated the performance of the service as good in relation to this key question as there were important strengths which, taken together, outweighed areas for improvement.

The provider had completed a service evaluation which established what was working well and what could be developed. The evaluation was effective in identifying improvements and the impact of support on the lives of those experiencing care. People could be confident that the provider promoted a culture of continuous improvement in which people's outcomes were primary drivers for change.

The service's improvement plan had clear focus areas and measurable outcomes. Focus areas included the development of social and recreational opportunities for people and further training for staff. A variety of staff members had responsibility for specific areas of the plan, empowering staff in various roles to develop new ideas. This meant that people were supported by staff who were accountable for carrying out the necessary actions for improvement.

The manager and senior staff carried out regular supervision and observations of staff practice. We saw that the manager promoted reflective practice and staff were given comprehensive feedback from their supervisor. Staff told us that they were well supported by senior staff and had good training opportunities. People experiencing care could be assured that staff were skilled, competent and were able to reflect on their practice.

Various audits were carried out in the service by the manager and senior staff. We saw that actions plans were developed with specific targets and realistic timescales for changes and updates to be completed. Audits included checks of people's personal finances, medication and support plans. Whilst good management processes were in place across the service, we discussed improvements with the provider about further safe keeping of people's personal money. The manager took immediate action to consider enhanced security measures.

See area for improvement 1.

Areas for improvement

1. To further support people to manage their finances, the provider should implement additional safekeeping measures. This should include, but is not limited to:

- Enhancing locked storage facilities where money is stored.
- Allocating responsibility for accessing money to named staff at specific times.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that: 'If I need help managing my money and personal affairs, I am able to have as much control as possible and my interests are safeguarded' (HSCS 2.5).

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.

Support plans were individualised, outcome focused and used to inform effective care and support. People experiencing care, and where relevant their families, were involved in developing their plans and people's outcomes were regularly reviewed. This ensured that people were included in making decisions about their current care.

Support was planned in a way that promoted choice and control, whilst taking account of the challenges and risks in people's lives. Legal parameters were detailed, and clear protocols were in place for staff to follow. We were confident that sufficient guidance was implemented to enable decision making and at the same time keep people safe.

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 |
| 1.2 People get the most out of life | 5 - Very Good |
| 1.3 People's health and wellbeing benefits from their care and support | 5 - Very Good |
| 1.5 People's health and wellbeing benefits from safe infection prevention and control practice and procedure | 5 - Very Good |
| How good is our leadership? | 4 - Good |
| 2.2 Quality assurance and improvement is led well | 4 - 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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