

The Richmond Fellowship Scotland - East & West Dunbartonshire Supported Living Services

Housing Support Service

Unit A Campsie Softnet Centre
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Telephone: 01416119499

Type of inspection:
Unannounced

Completed on:
10 October 2025

Service provided by:
The Richmond Fellowship Scotland
Limited

Service provider number:
SP2004006282

Service no:
CS2004061347

About the service

The Richmond Fellowship Scotland - East & West Dunbartonshire Supported Living Services is registered with the Care Inspectorate to provide a combined housing support and care at home service.

The service is offered to individuals who have mental health issues, learning disabilities, adults with alcohol related brain damage and acquired brain injury, autism spectrum disorders and older people.

Packages of support range from a few hours each week to 24-hours each day.

The service aims to develop and deliver high quality community-based services that listen to what people want and support them to live a happy, safe and fulfilling life.

About the inspection

This was an unannounced inspection which took place on 8, 9 and 10 October 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 eight people using the service
- spoke with 14 staff and management
- observed practice and daily life
- reviewed documents
- communicated with visiting professionals.

Key messages

- The service was well led and managed by a responsive and accessible management team.
- Appropriate staffing levels ensured effective one-to-one support.
- Staff supported each other and worked well as a team to ensure people were well cared for.
- A wide range of activities and opportunities were available, thoughtfully aligned with individuals' preferences and choices.
- The provider worked in collaboration with other professionals to achieve positive outcomes with people.
- Risk assessments should be consistently updated and reviewed to remain relevant.
- Care plans maintained in individuals' homes and those stored in the office must be consistent and accurately reflect the same information.

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?	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 demonstrated compassion and a strong understanding of individuals' needs and outcomes. The service made a meaningful difference in people's lives, supporting them to achieve their goals. Feedback and observations confirmed consistently high standards of care, enabling individuals to live well in their own homes. Staff were warm, respectful, and person-centred in their approach, fostering trust and positive relationships that contributed to excellent outcomes.

People were supported to pursue a wide range of meaningful activities beyond structured routines, including gym visits, trampolining, and walks in the park. These choices were self-directed, reflecting a person-led approach. Some comments were, "I do not like to stay in the house for long periods, so I welcome staff coming in every day, it is good for morale and well being," and "I enjoy getting out of my care home a couple of times a week."

Staff effectively managed complex health, social, and emotional needs. In one case, early relationship-building led to improved outcomes for an individual with particularly complex needs. Staff demonstrated strong awareness of each person's baseline, enabling early identification of health concerns and timely interventions. This proactive approach contributed to improved health outcomes.

Staff appeared confident and competent in their roles. They were well-supported by management, which enabled ongoing development and consistent delivery of high-quality care.

Outcomes for individuals were very positive, with several examples of people regaining and sustaining good physical and mental health. People knew who to speak to if they had concerns, indicating a culture of openness and trust. Some comments from people were, "My support got me through the my Dad's funeral my support helped comfort me," "Feel safe, staff inspire me to be confident and I feel secure when they are present," and "My meal supports which have helped me to stay well, and friendly ear to listen when I am struggling mentally."

While the majority of risk assessments and care plans were current, there were inconsistencies in their maintenance. It is recommended that the service ensures alignment between care plans held in individuals' homes and those retained in the office, to promote continuity and accuracy in care delivery."

Effective collaboration with external professionals ensured continuity of care and timely access to specialist input. Staff were praised for their engagement and professionalism. Legal consents and documentation were in place, demonstrating compliance with relevant legislation. Despite some challenging discussions with the Health and Social Care Partnership (HSCP), feedback about managers and staff was notably positive. As a result of managers' advocacy skills, individuals received increased support hours to better meet their needs.

Audits were carried out effectively in key areas, such as medication management, helping to ensure care was delivered safely and responsively. These audits led to improvements such as clearer documentation of medication administration and quicker identification of missed doses. This contributed to safer outcomes for individuals receiving care.

How good is our staff team?

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 had regular opportunities to engage with colleagues and management through both online and in-person team meetings. These sessions were well attended and served as a valuable platform for discussing practice-related matters, promoting shared understanding and clear communication across the team.

Staff rotas and feedback were reviewed and showed that people were happy with current arrangements. People experiencing care advised that staff were regularly available and responded well to their needs, with examples showing care and reassurance at various times of the day and night.

It was noted that issuing rotas further in advance would support staff in better managing personal commitments, such as childcare and health appointments, thereby promoting improved work-life balance.

Supervision was used effectively to support staff development, both personally and professionally. While feedback was generally positive, there is scope to enhance the depth of developmental conversations. This would help demonstrate meaningful progress and support staff in meeting their Post Registration Training and Learning (PRTL) and Continuing Professional Development (CPD) requirements for the SSSC.

Training provided was broad and available, delivered through a combination of online platforms and face-to-face sessions. Competency-based training was available in key areas such as medication administration, moving and handling, and choking response. Staff inductions were carried out in-house and in a timely manner, equipping new team members to perform their roles effectively. Feedback highlighted the welcoming and supportive nature of the management team, with one staff member stating, "I can't believe how supportive the manager is, always at the end of the phone."

Staffing arrangements were informed by assessments of people's needs and were sufficient to allow time for meaningful engagement, whether through activities or informal conversation. Current staffing levels were considered appropriate to meet the needs of individuals.

Staff morale had notably improved, attributed in part to the positive influence of the two managers currently in post. Spot checks were conducted and recorded with substantial detail, particularly regarding staff interactions with individuals. Outcomes from the checks were discussed with staff to ensure continual improvement in practice and delivery of care.

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 ensure that quality assurance processes are carried out effectively and in a timeously manner which achieves improvements in the provisions of the service. To do this the provider should:

- a) routine and regular management audits are being completed across all areas of the service being provided;
- b) clear timescales are devised where deficits and/or areas for improvement have been identified; and
- c) action plans are regularly reviewed and signed off as complete once achieved by an appropriate person.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS), 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 area for improvement was made on 18 April 2023.

Action taken since then

Quality assurance audits were carried out regularly to promote improvement. Actions were in place with dates for completion identified. Managers and team leaders monitored the actions and improvements had been completed.

This area for improvement was met.

Previous area for improvement 2

To promote good outcomes for people, the provider should develop, record, link and evaluate the quality of staff practice. This includes, but is not limited to:

- a) supervision records, annual appraisals and direct observations which show evaluation of staff skills and feedback from people using the service; and
- b) team meetings which are formally recorded and used to capture staff views and needs and involve direct engagement with people attending the service.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that: 'I have confidence in 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).

This area for improvement was made on 18 April 2023.

Action taken since then

Staff participated in regular supervision sessions that incorporated reflective practice. Team leaders conducted observations and spot checks to monitor and enhance staff performance. While the process was well established, the recording of supervision sessions could be improved to better evidence meaningful dialogue, rather than brief entries. Team meetings were held consistently, with strong staff engagement. Staff described these meetings as a safe and supportive space to share views, contributing positively to team building and service development.

This area for improvement was met.

Previous area for improvement 3

People should have confidence that their personal support plans are right and meet their current needs. The provider should ensure regular and consistent reviews of people's support plans.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that: 'My care and support meets my needs and is right for me' (HSCS 1.19).

This area for improvement was made on 18 April 2023.

Action taken since then

Care plans were of good quality and person centred. Reviews of care plans took place within the appropriate timescales. We advised that the care plans kept in people's homes and in the office should reflect each other and be updated simultaneously.

This area for improvement was met.

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?	5 - Very Good
3.3 Staffing arrangements are right and staff work well together	5 - Very Good

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