

Hopeman Avenue Service Care Home Service

29 Hopeman Avenue Thornliebank Glasgow G46 8SG

Telephone: 01416 202 267

Type of inspection:

Unannounced

Completed on:

31 October 2025

Service provided by:

The Richmond Fellowship Scotland

Limited

Service no:

CS2003054761

Service provider number:

SP2004006282



Inspection report

About the service

Hopeman Avenue Service is a registered care home that accommodates up to eight adults with mental health problems. At the time of this inspection the service was supporting eight people.

The home is based in the Thornliebank area of Glasgow and is of modern design with individual bedrooms with en-suite facilities, two lounge areas, communal kitchen, and utility room. One of the lounges had been refurbished to provide a games room and the other smaller lounge was designed to offer a quieter environment where people could relax.

The service is staffed 24 hours a day with staff sleepover support during the night. The staff team comprises of a team leader and support workers, supported by a service manager.

About the inspection

This was an unannounced inspection which took place between 29 October and 31 October 2025. 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 and complaints information, information submitted by the service and intelligence gathered throughout the inspection year. During inspection we:

- · spoke with six people using the service
- spoke with five staff and the management team
- fathered the views of three external professionals
- · observed practice and daily life
- · reviewed documents.

Key messages

- Peoples' health and wellbeing benefitted from effective assessment and monitoring of their needs and pro-active collaboration with external professionals and services.
- · People were listened to, respected, and valued.
- The service provided person-centred care to all residents based on their assessed needs and wishes.
- · People participated in a wide range of activities of their choosing.
- The service was responsive to people's evolving needs.
- The staff team worked well together to help people achieve their ambitions.

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
How good is our setting?	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 made an evaluation of very good for this key question. There were some major strengths in supporting positive outcomes for people, with very few areas for improvement.

Staff were compassionate, supportive, and clearly committed to supporting agreed outcomes for people and always showed dignity and respect. Examples of this were when a person became upset when discussing a difficult matter and staff shared the moment, and provided reassurance and positive support, encouraging conversation by referring to art the person had made. Another person spoke about the importance of their art in helping their mental wellbeing and how they were encouraged and supported to do this in the home and also attend classes. Peoples' achievements were recognised and celebrated, and their artwork was displayed around the home. Peoples' religious and cultural beliefs and choices were respected and valued. This meant that people experienced positive outcomes because of the care and support they received.

Some people living in the home had voluntary placements or activities which they told us they enjoyed and made them feel valued.

Comments from residents included:

"I can get my room the way I want- they're great."

"Staff are good people."

"I feel safe at Hopeman."

People's health and wellbeing needs were being met through positive collaborative working with external agencies and intervention of various health and social care professionals e.g. district nursing and CPN, GP, psychiatrist, and Adult Mental Health Team. This meant that the service was prepared to respond in the event that a person's health or well-being deteriorated.

Professionals we spoke to confirmed that the service consistently provided high quality care, in particular in relation to a peoples' changing needs.

Comments from professionals we spoke with included:

"I have nothing but praise for the service...they have gradually built-up trust with my client."

Personal plans were outcome focussed, detailed, and person-centred. People took ownership of their personal plans and the care they received. Any associated risks were assessed and reviewed, with multidisciplinary input, if someone was deemed at risk of harm to themselves or from others. Identified risks were sensitively managed, using the least restrictive options, and assessments were regularly reviewed. This kept people safe, without unnecessary restrictions. Agreed protocols to keep people safe were clear and concise and demonstrated collaborative working with external support such as CPNs and Police. This promoted safety and independence.

[&]quot;They are very centred around the person, advocating and reaching out for supports."

[&]quot;Very effective at promoting independence while keeping people safe."

[&]quot;Always coming up with solutions- I would champion the service."

People who may have been potentially excluded or isolated were sensitively encouraged, in a well-planned way, to overcome barriers and become fully participating members of their local community. Peoples' religious and cultural beliefs and choices were respected and valued. This gave people a sense of belonging.

Medication was managed well. There were clear systems and protocols in place to ensure that people received their medication safely. If people refused their medication, there were both proactive and responsive agreed strategies in place to minimise any potential harm. Medication was administered in a dignified way and reflected peoples' choices.

Independence and cooperation were sensitively encouraged. People were supported to develop life skills such as the budgeting, shopping, and preparation of food, cleaning and other domestic activities as part of their daily life. There was ready access to food and drinks. People could dine together if the wanted to.

People's wellbeing and confidence were enhanced as the service promoted a person-centred approach to meaningful activities. Each person had agreed their activities could change if and when they wanted. People enjoyed a range of their chosen activities, including art, cooking, shopping, playing darts and pet therapy. The service had recently started a relaxation group which was well received by residents. This promoted people's physical, mental and spiritual wellbeing, independence, choice, and sense of achievement.

How good is our staff team?

5 - Very Good

We made an evaluation of very good for this key question. There were some major strengths in supporting positive outcomes for people, with very few areas for improvement.

There was a small, dedicated and committed staff team working in the service. This meant that staff and residents knew each other well and staff were able to recognise and respond to changes in peoples' wellbeing. Relationships and interactions we observed were respectful, caring and genuine. This promoted peoples' dignity and self-esteem. Values were evident in practice, and there was a caring and collaborative culture. This created an open and honest environment, which helped people talk about their problems and work toward solutions. Discussions and interactions we observed assured us that relationships were based on trust. This meant that people felt included, listened to, and valued.

Staff were committed to helping people achieve their outcomes and get the most out of life. There was a good mix of skills and experience within the team. Staff knew people well, and were skilled at sensitively supporting people's needs, wishes and evolving needs and wishes.

Support was provided in a dynamic and flexible way to meet peoples' changing circumstances.

The staff and management team were creative in the coordination of support and supported each other to help people achieve their outcomes. Staff told us they could rely on each other. This created an inclusive and collaborative culture, promoted open and honest communication, and offered people, relatives, and staff opportunities to express their views. Regular resident and team meetings and informal discussions provided forums for this.

Staff we spoke with told us that they felt well supported by the manager and their colleagues. The manager was based in the home, and staff told us that the management team were approachable, and accessible, and able to support both with professional development and with personal issues. Staff demonstrated a shared value-base and commitment to the residents, through their approaches and interactions. Staff received regular formal and informal supervisions which they valued, and which encouraged their reflection and professional development.

How good is our setting?

5 - Very Good

We made an evaluation of very good for this key question. There were some major strengths in supporting positive outcomes for people, with very few areas for improvement.

The home was maintained to a high standard and was homely and clean. Which promoted peoples' wellbeing. People we spoke with took great pride in their bedrooms, which were personalised and individual

Communal areas offered a comfortable and homely environment for people, and standards of cleanliness of furniture, and flooring throughout the home were very good. Residents were actively involved in the routine cleaning and maintenance of their rooms. Staff supported residents to ensure that these high standards were maintained.

One of the communal lounges had been improved and provided a relaxing area for residents. This was well furnished and decorated to a high standard and provided an inviting space for residents to get together and socialise, for example residents enjoyed a recent Halloween party and quiz. There was also a nail bar for residents to use.

During the inspection, we shared our findings and observations regarding the state of repair of the communal kitchen. Some cupboard doors were loose, panelling around the sink area was grubby and worn, drawers were missing, and the environment was dishevelled. However, appliances and surfaces were clean and there was evidence of regular ongoing cleaning.

The provider and management team had identified these environmental improvements as priority, had regularly been communicating with the landlord to progress renovation of the kitchen since the last inspection. Plans for these works have now been agreed, and a start date of April 2025 has been set. It is expected that these works will take around eight weeks. We were assured that the provider and management were taking appropriate steps, with the landlord, to expedite this.

Bedrooms were spacious and personalised. People were encouraged to decorate and furnish their private spaces the way they wanted, and people were genuinely proud of their rooms. Rooms were well appointed and decorated to a high standard. We highlighted some flooring that was worn in one person's bedroom, however, were assured that this had been identified by the management team and was being addressed with the landlord of the premises.

The accommodation is on one level with easy access to a spacious and enclosed garden area at the rear of the property which offered access to fresh air and a private outdoor space. A smoking shelter was also provided for the use of residents. This was regularly cleared and was well maintained.

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

How good is our setting?	5 - Very Good
4.1 People experience high quality facilities	5 - Very Good

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