

The Richmond Fellowship Scotland - South Lanarkshire 1 Housing Support Service

The Richmond Fellowship Scotland
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Type of inspection:
Unannounced

Completed on:
19 March 2026

Service provided by:
The Richmond Fellowship Scotland
Limited

Service provider number:
SP2004006282

Service no:
CS2004061323

About the service

The Richmond Fellowship Scotland - South Lanarkshire 1 is registered to provide a housing support and care at home service for people with learning disabilities and mental health problems.

At the time of inspection, 94 people were being supported by the service. Support ranged from 15 minutes to 24 hours per day for people living within East Kilbride, Cambuslang, and Rutherglen.

The service has an area manager who has overall responsibility for the service. Local team managers have responsibility for a team of senior support workers and support staff.

About the inspection

This was an unannounced inspection which took place between 17 and 19 March 2026 between 09:30 and 18:00. The inspection was carried out by two inspectors from the Care Inspectorate.

To prepare for the inspection, we reviewed information about the service. This included previous inspection findings, notifications submitted by the service and other intelligence held by the Care Inspectorate.

During the inspection we:

- spoke with 12 people experiencing care and support
- spoke with five family members
- spoke with 13 staff and management
- spoke with visiting professionals
- reviewed documentation

Key messages

- Strong, trusting relationships with staff helped people feel safe, comfortable and valued in their day-to-day lives.
- Health and wellbeing needs, including complex conditions, were well supported, helping people stay as well as possible.
- Opportunities for outings, holidays and community activities meant people could enjoy active and meaningful lives. One person said, "I love going on my holidays."
- A consistent focus on independence supported people to make choices, build confidence and maintain control over their routines.
- Families felt informed, involved and reassured about the care provided. One relative told us, "I honestly cannot sing their praises enough."
- Safe medication practices, including clear use and monitoring of 'as required' medication, supported positive health outcomes.
- Stable staffing and good teamwork meant people received consistent care from staff they knew and trusted.

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.

People experienced care and support that promoted both their health and their overall wellbeing. Staff knew people well and built strong, trusting relationships. During visits we saw people relaxed and comfortable in the presence of staff, with interactions that were warm and natural. This helped people feel safe, respected and confident to express their wishes. One person told us, "they are my family", while another said, "they help me with everything I need." This showed that people felt secure and well supported in their daily lives.

Care plans were detailed and reflected what matters to people, not just their health needs. Tools such as "hopes and dreams" and "important times of the year" captured relationships, interests and meaningful events. This meant staff could support people to stay connected to family, celebrate important occasions and take part in activities that brought enjoyment. People told us, "I love going on my holidays", which showed that support extended beyond basic care and helped people live full and active lives.

Staff consistently promoted independence. We observed people being supported to take part in everyday tasks and make choices about their routines. Staff described their role as "doing things with people, not for them." This approach helped people maintain control over their lives and build confidence.

People's health needs were well understood and managed. Care plans provided clear guidance, including for people with complex needs. Risk assessments set out what staff should look for and how to respond, helping ensure people were supported safely. Health monitoring tools supported early identification of changes, and staff worked well with health professionals to respond appropriately. Families spoke positively about how staff respond to people's needs, with one relative telling us "they are so attentive to my brother and always ensure he gets the help he needs." This reflected a caring and responsive approach, where people received the right support at the right time, helping them feel safe, reassured and well looked after.

Medication was managed safely. Records were accurate, and staff understood the medicines people were prescribed and how to support them. When additional medication was needed, clear guidance helped staff make appropriate decisions. Families told us they were kept informed, which helped them feel reassured about how their relative's health needs were being supported. This contributed to people's comfort and wellbeing being maintained.

The service also supported people to improve their health. For example, one care plan showed how staff supported a person with diabetes to follow dietary guidance, resulting in improved weight, cholesterol and blood pressure. This demonstrated clear positive outcomes from the support provided.

Some areas could be strengthened. Not all care plans had been fully updated following reviews, and the care planning system made it harder to record smaller changes as they happen. We discussed this with the manager, who recognised the issue and provided assurance that this is something they will take forward. Strengthening how updates are recorded and shared will help ensure plans always remain current and continue to guide staff effectively.

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.

Staffing arrangements supported people to receive consistent, reliable care from staff who knew them well. Rotas were planned to promote continuity, which helped people feel settled and reduced anxiety, particularly for those who found change difficult. Families told us their relatives benefited from familiar staff, although some highlighted that changes in staffing could occasionally cause distress. Overall, continuity of care supported strong relationships and better outcomes for people.

Staff felt well supported and valued. They described managers as approachable, responsive and visible. One staff member told us "I love working here and it's the most rewarding job I've ever had," and "there's an open-door policy and we're encouraged to contribute ideas." This positive culture helped staff feel confident and motivated, which directly benefited the people they support.

Teamwork was strong across the service. Staff supported each other during busy periods and communicated well within their designated teams. Managers were described as visible and supportive, providing reassurance and practical help when needed. This created a positive working environment where staff felt able to ask for help and share responsibility.

A clear set of values underpinned practice. Staff consistently spoke about promoting independence and ensuring people had a voice. The focus on "doing things with people, not for them" was evident in practice and reflected a shared understanding of how to support people to live as independently as possible.

Recruitment processes were safe and followed good practice. Staff files showed appropriate checks, including PVG, references and right-to-work verification, were completed before employment. New staff completed induction and training before working alone. This ensured people were supported by staff who were prepared and competent.

Staff demonstrated good knowledge and confidence in their roles. They understood their responsibilities in areas such as adult protection, medication and responding to changes in health. During visits, we observed calm, respectful care that promoted dignity and wellbeing.

Training and development were well supported. Staff completed both mandatory and service-specific training relevant to the needs of the people they support, including areas such as medication, adult protection and supporting people with complex health needs. Induction, shadowing and competency checks helped new staff build confidence, while ongoing monitoring of training ensured staff skills remained up to date. This supported safe and consistent care.

Management oversight was strong and consistent. Regular supervision, observations, training monitoring and team meetings provided structure and accountability. These systems helped managers maintain oversight of practice and supported staff to reflect and improve.

Professionals described the service as responsive and easy to work with. They highlighted strong relationships and consistent communication, which supported positive outcomes for people.

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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