

## Glasgow South East Registration 2 Housing Support Service

Living Ambitions  
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**Type of inspection:**  
Unannounced

**Completed on:**  
2 September 2024

**Service provided by:**  
Living Ambitions Ltd

**Service provider number:**  
SP2003000276

**Service no:**  
CS2023000181

## About the service

Glasgow South East Registration 2 was registered with the Care Inspectorate on 14 June 2023. The service provides a housing support and care at home service to people with learning disabilities and people who are on the autistic spectrum. The service is provided in people's homes and in the community. The provider is Living Ambitions Limited.

At the time of the inspection, the service supported 11 people to live in their own homes or shared homes, of which there are four across the east of Glasgow.

## About the inspection

This was an unannounced inspection on 27 and 28 August 2024. Feedback was provided on 2 September 2024. The inspection was carried out by one inspector from the Care Inspectorate. This was the first inspection of the service

To prepare for the inspection we reviewed information about this service. This included registration information, information submitted by the service and intelligence gathered throughout the inspection year.

In making our evaluations of the service we:

- visited three of the four homes
- spoke with five people using the service
- spoke with staff and management
- observed practice and daily life
- reviewed documents.

## Key messages

- People were supported by staff who knew them very well.
- People's health needs were escalated to health professionals when needed.
- The service had a robust quality assurance system in place.
- Staff had access to training specific to the needs of the people they were supporting.
- Personal plans were person-centred and it was clear independence was promoted.
- As part of this inspection, we assessed the service's self-evaluation of key areas. We found that the service had made positive progress in completing their self-evaluation. The service should continue to develop this approach to support improvement.

## 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?	5 - Very Good
How good is our staff team?	5 - Very 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.

People should expect to experience warmth, kindness and compassion in how they are supported and cared for. During the inspection, we visited people in their homes and witnessed kind and caring interactions between people and staff team members who were supporting them. Staff knew people well and were able to use this knowledge to offer very good person-centred support. We observed warm, kind and respectful relationships between staff and people supported. This helped people to feel valued as individuals.

People were enabled to get the most out of life and get involved in a wide range of activities they enjoyed. This was evident through people's care plans. People were supported to visit local amenities and places of their interest. This wide range of activities and events was evaluated regularly to ensure that it met people's needs and wishes. This allowed people to feel respected and heard.

A range of communication techniques was used to ensure that everyone who wished to, could communicate their hopes, aspirations, wishes and preferences. Personal support plans sampled were person-centred and detailed what was important to people to enable staff to provide safe, effective and consistent care.

Risk assessments were in place which detailed and directed staff on any hazards identified. Training bespoke to care needs ensured that people received the right care and support. Staff training with specific healthcare conditions had also been facilitated to ensure that staff were up-to-date with best practice guidance. This ensured that people were being supported by a well-trained workforce.

People benefited from support to access community healthcare and treatment from competent trained practitioners. Staff recognised changing health needs and shared this information quickly with the right people to ensure that people's health and wellbeing needs were being met. There were clear protocols in place to guide and inform staff on how to support people with any conditions they had. Records were kept of when concerns were raised, or any updates provided to health professionals and any advice or changes that had been made. This meant that people were supported in a relevant and appropriate manner.

There was a robust procedure in place for medication administration which was appropriately documented. Staff supported people as required and people's dignity was respected. This improved health outcomes for people and kept them safe.

## How good is our leadership?

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.

The service had very good systems in place to monitor the quality of the service. There was a range of audits completed and the actions from these informed the service improvement plan. All documents were stored on a shared drive ensuring the registered manager had oversight of all information. Each of the homes had their own development and action plans which allowed a tailored approach and helped to improve outcomes for people supported.

The development and improvement plans covered quality of care and support, staffing and leadership and management. They contained detailed information about what the issues and risks were and what the planned course of action was. They also detailed who was responsible, set timescales and records of the progress for each action. This provided clear oversight of the service and its improvement journey. The provider's external quality team provided regular reports and action plans where any improvements were highlighted. This ensured people benefited from a service that continually reviewed its practices.

Accidents, incidents and complaints were reviewed regularly with a lessons learned approach applied to ensure people were kept safe and practice improved where needed. All accidents and incidents had been recorded, managed and reported in line with legislation.

We were able to see oversight of staff training. There was a training action plan in place which detailed each individual course and the compliance levels. It informed the team exactly who was due to complete training on each course available. The management team had trackers in place which provided oversight of staff members' professional registration and their supervision.

Staff received regular supervision and observations of practice which highlighted both good practice and areas for development. We could be confident that staff were working to the standards which the management team expected, and any issues would be picked up and addressed promptly.

Staff should feel confident to give feedback and that they are listened to and valued. Carers we spoke with were all positive about their experience working for the service and felt supported to carry out their role to the best of their ability. The manager was described as supportive, approachable and readily available either in person or at the end of the phone, when needed, and that all feedback was constructive and helpful.

## 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 for the service were working well. The service had taken account of the importance of matching staff to people, along with considerations of compatibility and continuity. Many staff had worked in the service for some time and knew people's needs well. Staff demonstrated detailed knowledge and skills when supporting people. People could be confident that staff were recruited in a way which had been informed by all aspects of safer recruitment guidance.

People using the service, and staff, benefited from a warm atmosphere because there were good working relationships. There was effective communication between staff as there had been regular team meetings. This had created opportunities for discussion about their work and how best to improve outcomes for people.

All staff spoke positively about their experience of working within the service. They felt supported within their roles and felt they worked well together as teams. Staff spoke positively about their team colleagues, the importance of good team working, and the flexibility needed to enable people to have as much control of their day-to-day life as possible.

## 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.

The service used a digital platform to plan, record and coordinate care. The care planning software allowed staff to record at the point of care, saved time and provided accurate notes. Personal plans were person-centred. They promoted independence and gave good insight into people's lives including their life history and how they liked to spend their time. Detailed risk assessments informed the plans and promoted positive risk taking for people. Risk assessments and safety plans were used to enable people rather than restrict people's actions or activities. This mix of person-centred information and clear guidance helped staff to support people effectively.

People received six monthly reviews of their care which the service had oversight of. There was information available about who the person wished to have involved in their review meeting and the level of involvement they wished to have. Reviews set out people's outcomes and goals.

People were enabled to get the most out of their day with options to develop and explore their interests and aspirations. People had photographs in their plans which captured their favourite activities and preferences. This showed that people were able to lead and direct their care and support in a meaningful way.

Legal documentation was in place in people's personal plans. This helped inform staff of who should be consulted in relation to people's care. The service had begun to develop future care plans for people. There was a plan for this to continue to be developed and we were confident it would be. This would ensure that there was a detailed plan in place which noted people's wishes for end of life care.

## Complaints

There have been no complaints upheld since the service registered. Details of any upheld complaints are published at [www.careinspectorate.com](http://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 leadership?	5 - Very Good
2.2 Quality assurance and improvement is led well	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 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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