

# The Christian Community Action Support Team known as CCAST Highland Housing Support Service

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Announced (short notice)

**Completed on:**  
26 September 2024

**Service provided by:**  
Christian Community Action Support  
Team Highland

**Service provider number:**  
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**Service no:**  
CS2024000030

## About the service

The Christian Community Action Support Team known as CCAST Highland is a housing support service operating in the Tain area. Support is provided to adults in their own homes.

The service registered with the Care Inspectorate in February 2024. CCAST Highland is a registered charity and provides community based support alongside running a community hub and food bank, this inspection was for the Housing Support service. CCAST Highland has an office base in Tain.

## About the inspection

This was a short notice announced inspection which took place on 24 September 2024. 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 registration information, information submitted by the service, and intelligence gathered since registration.

In making our evaluations of the service we:

- spoke with three people using the service or their relatives.
- spoke with three staff, board members and management.
- reviewed documents.
- spoke with professionals who know the service.
- reviewed questionnaire responses.

## Key messages

- The service was led by an experienced manager.
- Some improvements should be made to ensure personal plans are outcome focused and reviewed regularly.
- Formal quality assurance processes should be embedded within the service.
- People supported by the service were treated with dignity and respect.
- As part of this inspection, we assessed the service's self-evaluation of key areas. We found that the service was not yet undertaking self-evaluation. We discussed the benefits of self-evaluation and how this approach should be adopted to support improvement in the service.

## 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?	4 - Good
How good is our leadership?	4 - Good
How good is our staff team?	4 - Good
How well is our care and support planned?	4 - Good

Further details on the particular areas inspected are provided at the end of this report.

## How well do we support people's wellbeing?

4 - Good

We evaluated this key question as good where several strengths impacted positively on outcomes for people and clearly outweighed areas for improvement.

People spoke highly of the support they received from CCAST Highland and the positive impact it had on their lives. People told us support was provided in a sensitive manner and they were treated with dignity and respect.

The service had built good working relationships with professionals and stakeholders; this meant people benefited from support by staff who had good knowledge of local processes and referrals and who were able to support with these confidently (e.g. benefit advice). One professional told us:

"They go above and beyond to treat everyone as an individual and with respect."

People were given choice and control over their support, and although documentation didn't always detail this, people told us the purpose of support was clearly agreed from the outset. The service arranged visits flexibly around people's needs and worked at a pace which people supported found comfortable, this meant people had time to build trust and confidence with staff. A relative of a person supported by the service told us:

"Without the support from CCAST [my relative] would not be where they are now."

## How good is our leadership?

4 - Good

We evaluated this key question as good where several strengths impacted positively on outcomes for people and clearly outweighed areas for improvement.

The service had an 'open door policy' and people and their relatives told us they felt comfortable approaching CCAST Highland with any queries or concerns. Both the service manager and board of directors had good oversight of the service, and a complaints policy had been developed for the service prior to registration with the Care Inspectorate.

We found the main means of quality assurance was through informal measures. Documentation had previously been developed for quality assurance systems, but was not yet being used. Quality assurance provides an opportunity to monitor and review the quality of service provided to people, and formal systems should be put in place for this (see area for improvement 1).

The service had not yet developed an improvement plan or begun self-evaluation and was currently monitoring service improvement through its regular board meetings. An improvement plan should be developed to guide and monitor service improvements going forward (see area for improvement 2).

## Areas for improvement

1. To ensure the quality of the service is being effectively monitored and reviewed, formal quality assurance systems should be established to monitor and review the quality of the housing support service provided to people.

This is to ensure that care and support is consistent with 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).

2. To ensure the service provides a consistently high standard of care and support, a service improvement plan should be developed, this should be informed by the findings of this inspection and quality assurance within the service.

This is to ensure that care and support is consistent with 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).

## How good is our staff team?

4 - Good

We evaluated this key question as good where several strengths impacted positively on outcomes for people and clearly outweighed areas for improvement.

The longstanding manager of CCAST Highland was the only staff member providing housing support, this ensured staffing was very consistent for people supported by the service, but could present with challenges in the case of staff absences. People told us:

"Having one familiar person to work with helped a lot."

and

"They were very approachable and I could speak about anything with them. They were brilliant, very supportive."

The service's board of directors were supportive and pro-active in their roles, and recognised their overall contribution to the service. Staff supervision was being provided very regularly and staff felt they had access to any training necessary for their role.

Due to the small size of the service, staffing arrangements were agreed informally to work around the commitments of the service and other areas of the organisation. Housing support visits were planned flexibly and staff worked with people to ensure visits were at the right time for them, this meant people received support which was person centred and responsive to their needs. People told us they felt comfortable with staff and were able to build a trusting relationship with them.

## How well is our care and support planned?

4 - Good

We evaluated this key question as good where several strengths impacted positively on outcomes for people and clearly outweighed areas for improvement.

We sampled a number of care plans during the inspection and found that they provided relevant information to guide staff on how to support people's health and wellbeing needs. Risk assessments were used appropriately, and where risks were identified suitable measures were put in place to help protect people.

People told us they were involved in the assessment and planning of their care, and the aims of their support were clear. We could not see clear documentation or reviews of the outcomes which had been agreed with people, however running notes were used to monitor and track people's progress after each visit and were well documented. There was no formal review process in place for people's personal plans if support was provided beyond six months; care and support plans should be reviewed and updated at a minimum of six-monthly intervals, or sooner if required (see area for improvement 1).

It's important that personal plans are easily accessible to people. The service currently uses paper care plans and running notes which are written with people, we discussed how copies of these should always be provided and available to people supported by the service after being agreed.

### Areas for improvement

1. To ensure people are fully involved in decisions about their care and support people's outcomes should be clearly stated in their personal plans. and a review to monitor and track the progress towards these should be held at least every six months, or sooner if required.

This is to ensure that care and support is consistent with Health and Social Care Standards [HSCS] which state that:

"My personal plan (sometimes referred to as a care plan) is right for me because it sets out how my needs will be met, as well as my wishes and choices." (HSCS 1.15)

and

"I am fully involved in developing and reviewing my personal plan, which is always available to me." (HSCS 2.17)

## Complaints

There have been no complaints upheld since the last inspection. Details of any older upheld complaints are published at [www.careinspectorate.com](http://www.careinspectorate.com).

Detailed evaluations

How well do we support people's wellbeing?	4 - Good
1.3 People's health and wellbeing benefits from their care and support	4 - Good
How good is our leadership?	4 - Good
2.2 Quality assurance and improvement is led well	4 - Good
How good is our staff team?	4 - Good
3.3 Staffing arrangements are right and staff work well together	4 - Good
How well is our care and support planned?	4 - Good
5.1 Assessment and personal planning reflects people's outcomes and wishes	4 - Good

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