

TouchBase Dunbartonshire Support Service

59 Springfield Road
Bishopbriggs
GLASGOW
G64 1PN

Telephone: 0141 772 5588

Type of inspection:
Unannounced

Completed on:
21 March 2025

Service provided by:
Sense Scotland

Service provider number:
SP2003000181

Service no:
CS2022000015

About the service

Touchbase Dunbartonshire is a support service which has a building base in Bishopbriggs. The service provides support at the day service and/ or community-based outreach support to people living with learning disabilities and visual impairments. Support is provided to people over a variety of local authority areas. At the time of our inspection the service were supporting 57 people.

About the inspection

This was an unannounced inspection which took place on 17, 19 and 20 March 2025. The inspection was carried out by one inspector from the Care Inspectorate and with the support of an inspection volunteer. To prepare for the inspection we reviewed information about this service. This included registration information, information submitted by the service and intelligence gathered since the service registered with us. This was the first inspection of the service since they had been taken over by Sense Scotland.

In making our evaluations of the service we:

- spent time with nine people using the service and spoke to eight of their family members
- spoke with twelve staff and management
- observed practice and daily life
- reviewed documents
- consulted with three visiting professionals
- received survey results from relatives of people who used the service, staff and visiting professionals.

Key messages

People were being very effectively supported with their health and wellbeing in the day centre and in community-based activities.

Management at the service were established and effective. We asked that some records and documents were more clearly recorded.

The staff team were well trained and effective in their roles.

The building was well laid out and had many positive aspects, however, repairs could have been actioned in a more timely manner.

People's care plans were detailed, thorough and were routinely reviewed.

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

During our visits to the service we spent some time with supported people and observing activities that were taking place. People we met told us they enjoyed coming to the service and spent time doing things that they liked and had chosen. We found that there were a range of activities that were offered both on and off-site. We could see that people were happy and supported well by staff members. Family members gave us positive feedback about the service and appreciated the support that was provided. We also received very positive comments from external health and social care professionals who identified how well the service provided effective care and support to people. Some people were supported in small groups or with a one to one staffing ratio, at times a two to one staffing ratio depending on individual assessed need.

The service was providing very effective specialist support to people who were living with learning disabilities and visual impairments. We saw that there were positive outcomes for people in terms of promoting inclusion and independence. People accessing the service were able to receive support with their own specific wellbeing needs, some of which were complex. This included support with health conditions and medication. We read that at least one person was actively being encouraged to be as independent as possible and self-medicating with staff overseeing. We did suggest to the service that the signing in/ out of medication and timings could be more clearly recorded and management took action on this immediately.

There had not been many accidents or incidents at the service, but those that had happened were documented and reported appropriately. Any adult support and protection concerns were referred to local authorities and relevant notifications were made to us. We felt assured that people's health and wellbeing benefitted from their care and support.

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.

Management at the service were experienced and well-established, running the service before it had been taken over by Sense Scotland. There was a good working knowledge of the service and of the people who were being supported. The service did have some auditing documents that were in use, however, we did feel that some quality assurance processes should be revisited to improve their effectiveness (**see area for improvement 1**). This included making clearer recordings of people's six-monthly review meetings and making sure that actions were evidenced within the documents that were in use.

The service were in the process of gathering feedback from families of people who used the service as part of their internal improvement process. The service did have a complaints log in place and we could see that the one complaint that had been raised had been effectively managed and resolved. There was an improvement plan in place but this could have been better recorded to document the positive work that had been taking place. We did feel that the service could have had more support from the wider organisation in terms of documents, processes and practical supports like maintenance. Overall, quality assurance and improvement was led well, but would have benefitted from clearer and more efficient recording methods.

Areas for improvement

1. Documentation and records should be clearer and provide effective overviews of the service. This should include meeting minutes and action plans showing who is responsible and by when.

This is to ensure that care and support is consistent with Health and Social Care Standard (HSCS) which states 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?

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.

We met staff in a variety of roles across the service who were passionate about their work. This included those who were based at the service and those who were community-based as part of the outreach service. The staff we spoke to, or who returned survey results to us, were positive about their roles and felt well supported. We heard that there were one to one supervision sessions and regular team meetings. We could see that staff were getting involved in review meetings and some auditing processes.

The training statistics we saw were at a good level although some staff felt there could have been more input regarding supporting people with stress and distress. The service assured us that they were able to access training in this area for staff. Staff were all trained in relevant areas such as medication administration, adult support and protection and IPC (Infection Prevention and Control) and we saw that further moving and assisting sessions had been booked in. It was positive to note that the majority of staff were qualified to support people with Rebound Therapy, which is therapeutic use of a trampoline for people with additional support needs.

We found that the identified staffing levels were being met and that supports were being provided by regular staff who were familiar with people and their support needs. This had allowed people and staff to build up trusting relationships. Within the building there were identified staff who were responsible for certain tasks and cover for breaks had been considered. Some staff and families did mention that staffing was less effective during periods of sickness absence and annual leave. We were aware that some recent recruitment had taken place to help resolve this. We felt that staffing arrangements were right and staff worked well together.

How good is our setting?

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 building was well laid out and made good use of several types of rooms within the facility whilst having the bonus of all being accessible on one level. This included sensory rooms and a kitchen as well as well stocked music and art rooms. The variety of spaces included communal areas and smaller spaces that could be used as breakout areas when needed. People who were using community-based services could also access the building when needed, and this was beneficial for supported people and staff. We saw people enjoying the outdoor space which had sensory features and gardening areas. Accessible toilets and a specialised Rebound Therapy room kitted out with a trampoline and safety padding added to available facilities. Both of these had been upgraded since the change of registration of the service.

We did ask the service to relook at some areas of the flooring and tiling in the toilets and some plumbing work was due to take place on the week we visited.

The building was routinely inspected for health and safety purposes and we could see that this was fed back to the wider organisation. It was not always clear what actions were taken by the wider organisation and some repairs seemed to take a long time to be actioned. We read of a lighting issue at reception that had been ongoing for sometime. As this issue had potential impact on the visually impaired people accessing the service, we felt that this should have had remedial action sooner rather than later (**see area for improvement 1**).

We found the building to be clean and hygienic with PPE (Personal Protective Equipment) supplied. The service had domestic support and support staff were contributing to the high standards that were being maintained. In general, the atmosphere was bright and welcoming and displays of artwork and personal touches made pleasant surroundings whilst being fit for purpose. People accessing the service were benefitting from high quality facilities.

Areas for improvement

1. The wider organisation should be more responsive to required repairs that have been identified. In particular, the service should take action on a lighting issue that they have identified as an ongoing concern as it relates to the specific support needs of people accessing the facilities.

This is to ensure that care and support is consistent with Health and Social Care Standard (HSCS) which states that: 'The premises have been adapted, equipped and furnished to meet my needs and wishes' (HSCS 5.16).

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.

We sampled care plans across both aspects of the service and found that the majority of care plans were thorough and detailed. These included people's support needs, communication methods and strategies for providing effective support. Reports were produced yearly that showcased people's achievements and included photographs of activities that were being enjoyed. Targets were agreed with people and their family members, with the reports detailing how these were being worked towards. Care plans were being reviewed for each person and updated as required. We asked the service to make clearer recordings of what had been agreed and discussed at six-monthly reviews.

The service were working collaboratively with people, families, external professionals and other support services. People were able to access whichever part of the service met their needs best, either building-based, community outreach or a hybrid of both. It was positive to note that building-based services were still routinely accessing community facilities and inclusion had an important role. Assessment and personal planning reflected people's outcomes and wishes.

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 leadership?	4 - Good
2.2 Quality assurance and improvement is led well	4 - 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
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

To find out more

This inspection report is published by the Care Inspectorate. You can download this report and others from our website.

Care services in Scotland cannot operate unless they are registered with the Care Inspectorate. We inspect, award grades and help services to improve. We also investigate complaints about care services and can take action when things aren't good enough.

Please get in touch with us if you would like more information or have any concerns about a care service.

You can also read more about our work online at www.careinspectorate.com

Contact us

Care Inspectorate
Compass House
11 Riverside Drive
Dundee
DD1 4NY

enquiries@careinspectorate.com

0345 600 9527

Find us on Facebook

Twitter: @careinspect

Other languages and formats

This report is available in other languages and formats on request.

Tha am foillseachadh seo ri fhaighinn ann an cruthannan is cànan eile ma nithear iartras.

অনুরোধসাপেক্ষে এই প্রকাশনাটি অন্য ফরম্যাট এবং অন্যান্য ভাষায় পাওয়া যায়।

یہ اشاعت درخواست کرنے پر دیگر شکلوں اور دیگر زبانوں میں فراہم کی جاسکتی ہے۔

ਬੇਨਤੀ 'ਤੇ ਇਹ ਪ੍ਰਕਾਸ਼ਨ ਹੋਰ ਰੂਪਾਂ ਅਤੇ ਹੋਰਨਾਂ ਭਾਸ਼ਾਵਾਂ ਵਿਚ ਉਪਲਬਧ ਹੈ।

هذه الوثيقة متوفرة بلغات ونماذج أخرى عند الطلب

本出版品有其他格式和其他語言備索。

Na życzenie niniejsza publikacja dostępna jest także w innych formatach oraz językach.