

The Disabilities Trust Community Services (Scotland) Housing Support Service

Glasgow

Type of inspection:
Unannounced

Completed on:
3 April 2025

Service provided by:
The Disabilities Trust

Service provider number:
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Service no:
CS2017357906

About the service

The Disabilities Trust Community Services (Scotland) is a combined care at home and housing support service for adults who have an acquired brain injury. The provider is The Disabilities Trust.

The service is a large, detached property situated between Glasgow and Bishopbriggs. The house is comprised of four bedrooms, three of which have ensuite and shower facilities, shared kitchen and living room, and a private garden. There are local amenities nearby and good transport links to the city centre.

People are supported to live in the community with 24-hour support available from staff based at the accommodation. There were three people being supported at the time of this inspection.

About the inspection

This was an unannounced inspection which took place between 1 and 3 April 2025. One inspector carried out the inspection. 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.

To inform our evaluation we:

- spoke with two people using the service
- spoke with four members of staff and management
- observed practice and daily life
- reviewed documents.

Key messages

- People were supported to achieve positive outcomes.
- People had active lives at home and in the community.
- There was strong rapport observed between people and staff.
- People were supported by a stable and caring staff team.
- Personal plans should be reviewed more often to ensure they reflect people's needs.
- Communal spaces, such as the living room, should be more homely.

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 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?

5 - Very Good

We evaluated this key question as very good because there were major strengths which supported positive outcomes for people. There were very few areas for improvement.

People were supported by the service to achieve positive outcomes. We met people who previously lived in long-stay hospitals and care homes who were now enjoying greater independence in their own home. People had more autonomy and were supported to develop their daily living skills by cooking meals and completing laundry with assistance. This enhanced people's skills and confidence.

People were active in their communities and engaged in voluntary employment, attended clubs, and used local amenities such as restaurants, libraries, and social events. This further improved their physical and emotional wellbeing. We noted that people experienced fewer periods of stress and distress and self-harm since moving to the service.

The management of people's health conditions was professional and effective. People's medication was administered reliably and when people needed input from external health agencies, this was arranged promptly. We saw evidence of staff advocating for people's rights when they felt people needed further medical intervention. This helped to keep people safe and well.

People had the opportunity to express their views on the service. There were regular house meetings, involving all tenants, and one to one sessions between people and their key workers. People suggested new activities, events, and food and drink, which staff then introduced. This gave people a sense of influence and belonging in the service.

People's bedrooms were bright, well presented, and personalised. Rooms had items and furnishings that were meaningful to people. This further demonstrated the person-centred nature of the service. We did feel, however, that communal spaces lacked a personal touch. The living room was clean and functional but lacked any personal items or furnishings to promote warmth or personality. Whilst this didn't necessarily impact outcomes, we felt people's wellbeing would be further enhanced by improving the environment. Management agreed this was now an opportunity to include people and develop communal spaces to further improve the service.

How good is our staff team?

5 - Very Good

We evaluated this key question as very good because there were major strengths which supported positive outcomes for people. There were very few areas for improvement.

People were supported by an experienced and stable staff team. A review of rotas confirmed that a consistent pool of workers supported people each day. This promoted familiarity and strong rapport in the service. There were occasions when agency workers were needed, and the service employed consistent agency staff to ensure people had continuity in their support.

We observed staff practice and saw warm, caring, and fun interactions with people. Staff had intimate knowledge of people's health and social needs, and what was important to them. People appeared happy and motivated when communicating with their workers.

This very good practice was supported by a robust training programme. Staff completed a thorough two-week induction, which could be extended where needed, and a probationary period to ensure they had the appropriate skills and knowledge to work with people. Workers then had comprehensive ongoing training to promote sustained good practice in the service.

Staff had regular one to one meetings, called supervisions, with their line manager to discuss their performance, development needs, and wellbeing. A employee assistance and benefits system further promoted staff wellbeing and morale. Workers told us they enjoyed their job, had positive relationships with supported people, and felt supported by management.

We did note that the frequency of team meetings had reduced over the last year. There were no records of any recent meetings, which are important forums for management and staff to discuss any issues and suggestions within the service. Management agreed to reintroduce these meetings and produce minutes and action plans to support further improvement.

How well is our care and support planned?

4 - Good

We evaluated this key question as good because there were important strengths which supported positive outcomes for people and clearly outweighed areas for improvement.

Every person supported by the service had a personal plan, known as a support plan, which detailed their health and social needs. The plans, which were digital, were comprehensive and contained ample information about people's needs and wishes.

There was a person-centred approach which highlighted what was important to people, their preferences, and how they wanted to be supported in an individual way. People's health conditions, and how to manage them, were highlighted well and gave staff clear guidance on how to support people effectively.

Plans had risk assessments that captured potential risks in people's lives and how to minimise them to promote their wellbeing. Legal documents were completed and stored appropriately. This helped to keep people safe and well.

People should have six monthly reviews to ensure they are satisfied with their support and confirm that plans are accurate. This had not been fully achieved. We asked the service to ensure every person had a review within agreed timescales to sustain people's very good outcomes.

People did have monthly meetings with their keyworkers to discuss what they want to achieve from their support. This was a good example of outcome-focused practice. We noted that the minutes of these meetings was inconsistent, and staff felt people's engagement in these meetings had reduced in recent months. We asked the service to review its approach to keyworker meetings. There was a standard template and the language used was overly formal and not fully consistent with a supported living service. The provider operates hospitals and care homes and the language was more appropriate for these settings. Management agreed to improve its approach to keyworker meetings which, when fully utilised, have the potential to further enhance people's lives.

What the service has done to meet any areas for improvement we made at or since the last inspection

Areas for improvement

Previous area for improvement 1

The service will improve the quality assurance of personal plans. The evaluation of plans will be more frequent and comprehensive. There will be particular focus on the development of more specific and detailed risk assessments, as well as six-monthly person-centred reviews. This will further enhance people's safety, inclusion and opportunities.

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

This area for improvement was made on 26 February 2024.

Action taken since then

The service had introduced digital plans which highlighted people's needs well including more robust and person-specific risk assessments. There were frequent audits of people's digital plans. However, the service had not yet introduced a programme of six-monthly person-centred reviews. Therefore, this area for improvement had not been fully met and will be repeated.

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 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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