

# Day Opportunities - Adult Learning Disability Service Support Service

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**Type of inspection:**  
Unannounced

**Completed on:**  
2 May 2025

**Service provided by:**  
Angus Council

**Service provider number:**  
SP2003000043

**Service no:**  
CS2013322238

## About the service

Day Opportunities - Adult Learning Disability Service is a support service and care at home service. The service head quarters are based in Arbroath, with support being provided in community settings across the Angus area.

The service provides flexible packages of care and support to adults with learning disabilities and autism through transition from school into further education, and to meet short-term goals for independent living through enablement.

## About the inspection

This was an unannounced inspection which took place on 23, 24, and 25 April 2025 between 09:00 and 17:00. 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 previous inspection findings, registration information, information submitted by the service, and intelligence gathered since the last inspection.

In making our evaluations of the service we:

- spoke with 14 people using the service and six of their family
- spoke with seven staff and management
- observed practice and daily life
- reviewed documents
- reviewed feedback from visiting professionals.

## Key messages

- Staff were very good at developing meaningful relationships with people.
- People were fully involved in planning their support.
- Leaders had a very good overview of the service.
- The team were improvement-focussed.
- Families had confidence 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?	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 evaluated performance of this key question as very good. The service demonstrated major strengths in supporting positive outcomes for people, with opportunities being taken to strive for excellence within a culture of continuous improvement.

People experiencing care, their families, and representatives provided overwhelmingly positive feedback about the service. They told us that they were involved at every stage of the planning, delivery, and review of care and support. People felt valued and listened to.

People experienced a person-led service, goals were set in accordance with the things that were important to them and things they wanted to achieve. Some people told us that they had been supported to make friends and new connections in their community, others had gained volunteering opportunities and paid employment. One person told us that they felt accepted and more confident. The service people received contributed positively to their overall wellbeing.

Staff knew people well, they were able to identify changes in people's presentation which might indicate a decline in physical or mental health. Staff had good knowledge of strategies that were in place to positively support people when they experienced stress and distress. This helped reduce the risk of harm for people.

Staff worked closely with health professionals. Their practice was consistent with guidance and information in people's personal plans. People were being supported to make healthy choices around food and remain active through a range of activities.

Staff in the service understood their responsibilities for protecting people. They knew how to recognise, record, and report concerns of potential harm. Families told us that they felt confident that their loved ones were safe.

## How good is our leadership?

5 - Very Good

We evaluated performance of this key question as very good. The service demonstrated major strengths in supporting positive outcomes for people through quality assurance and improvement activity. Opportunities were being taken to strive for excellence within a culture of continuous improvement.

Leaders were visible and had very good oversight of the functions of the service. They understood what was working well, what needed to improve, and how the service should develop in order to meet the changing needs of the people being referred into their service.

There were long-standing, robust quality assurance systems and processes across the learning disability service and leaders had recently put in place a service-specific plan to evaluate and learn from performance. This would contribute positively to ensuring that all aspects of the service were continually assessed.

People's experiences were evaluated through feedback and regular reviews. They were well informed and central to any required changes. This meant that they would continue to receive person-centred care.

Leaders encouraged improvement discussions at team meetings and in staff supervision. This resulted in an improvement-focussed culture where staff were invested in service development.

When we spoke with staff they told us that leaders encouraged and supported opportunities for professional development, encouraged autonomy, and provided constructive feedback through supervisions and appraisals.

The service had not received any complaints. However, people told us they knew how to raise a concern and felt confident that issues would be addressed.

### How good is our staff team?

**5 - Very Good**

We found significant strengths in the staffing arrangements and the way in which the team functioned. We have evaluated this key question as very good.

Staffing arrangements were dynamic. They were informed by information from needs assessments, personal plans, and activity planners. Arrangements were flexible to people's changing needs and the service gave consideration to matching staff with people, wherever possible. This allowed people and their families to build trusting relationships and ensure continued positive engagements with the service.

During periods of transition or where people were experiencing difficulties, input was reviewed regularly to ensure that people continued to receive the right level of support. The service did not use agency staff, gaps in arrangements were filled by the service's own staff who were familiar with the service functions and people experiencing care. This ensured care and support was consistent and stable.

The team were enthusiastic about the service they provided. They appeared invested in the success of the people they supported. There was a very good team culture, all staff we spoke with told us of positive working relationships and feeling supported by leaders. Staff communicated effectively with one another which contributed positively to ensuring that important information was shared across the team.

Staff often lone worked. However they told us that they did not feel isolated as the team connected at the end of each day to check on each other's wellbeing. The service had a wellbeing champion to support the resilience of staff.

### How well is our care and support planned?

**5 - Very Good**

We evaluated performance of this key question as very good. The service demonstrated major strengths in supporting positive outcomes for people, with opportunities being taken to strive for excellence within a culture of continuous improvement.

People reported high levels of communication and engagement with personal planning from point of referral and throughout their journey with the service. They told us that they always felt listened to and that their opinions were valued. One family member said, "I finally feel heard".

Plans were detailed, rights-based, and focussed on reablement and development of independent living skills. There was input from other professionals. For example, speech and language therapy provided information about the best way to communicate with people to support engagement and understanding. Symbols and pictures were used for people if they needed this.

Risk assessment and management was enabling rather than restrictive. Families told us that staff provided them with reassurance around positive risk taking. This meant that people were more likely to experience meaningful and fulfilled lives.

People's plans were managed and stored electronically and people were able to access either electronic or paper copies. Plans were updated and reviewed on a regular basis, with changes noted and agreed with all parties.

During our inspection we discussed the need to record information in relation to people's capacity and any legal frameworks in place to support with decision-making. The service had already identified this as an action and work was underway to include this in people's plans.

## 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 provider to ensure that care reviews for the people who use the service are held a minimum of six monthly.

National Care Standards Support Services, Standard 4: Support Arrangements.

**This area for improvement was made on 18 February 2016.**

#### Action taken since then

Care reviews were taking place at a minimum of six monthly, some reviews took place more frequently in line with the individual's specific service requirements. This meant that people continued to experience care and support that was right for them.

**This area for improvement has been met.**

#### Previous area for improvement 2

The provider to introduce a strategy for evidencing how they are implementing the recommendations contained in the Winterbourne View report.

National Care Standards Support Services, Standard 2: Staffing Arrangements.

**This area for improvement was made on 18 February 2016.**

#### Action taken since then

All staff had received adult support and protection training. When we spoke with staff, they were able to identify signs of concern and knew how to respond, report, and record concerns of potential harm. As a result, concerns would be acted upon quickly and people would receive the right support.

Staff were aware of whistleblowing procedures and felt confident that they could raise concerns with leaders at any time.

**This area for improvement has been met.**

## 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?	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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