

Hansel Supported Living Services Housing Support Service

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Type of inspection:
Unannounced

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10 July 2025

Service provided by:
Hansel Alliance

Service provider number:
SP2003000261

Service no:
CS2004073923

About the service

Hansel Supported Living Services is registered to provide housing support and care at home to adults with learning disabilities living in their own tenancies. The service is provided by Hansel Alliance.

At the time of the inspection, 53 people were being supported by the service. Individual support ranged from a few hours a week to 24-hours a day.

About the inspection

This was an unannounced inspection which took place on 1, 2, 3, 4 and 9 July 2025 between the hours of 08:45 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 seven people using the service and seven of their family
- spoke with 12 staff and management
- observed practice and daily life
- reviewed documents
- we also received responses to our surveys from 16 people supported, 15 staff members and four professionals.

Key messages

- People were positive about those who cared for them.
- Independence was promoted.
- People had access to a range of social activities and experiences.
- The service had ongoing issues with staff recruitment.
- Staff access to supervision should improve.

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?	3 - Adequate
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 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 this inspection we observed kind, caring and fun interactions between people and the staff supporting them. People we spoke with were positive about their supports, telling us that being supported by Hansel Supported Living Services helped them build on their independence while also being able to socialise with their friends, so they didn't feel isolated and alone. One person told us about the support staff had given him to be able to go to college and get a job. Families spoke of the 'excellent' care their loved ones received and the positive impact the service had to their quality of life.

We sampled personal plans and found these contained relevant information about people's health and wellbeing needs. There was detailed information and recordings of when staff had noticed changes in people's health and/or wellbeing, what action they took, and the outcome. The service was in the process of moving documentation onto an online system. At the time of inspection, recording charts and daily notes were completed on this. They were completed well and provided a clear and detailed log of people's health and what they had been doing. This was accessible to relatives. One relative spoke positively about the impact this had as they were able to monitor their loved one's care, health and wellbeing.

People could be confident that their medication was well managed. Medication administration records were completed appropriately. Protocols were in place for 'as required' medication to guide staff on when these should be administered. Documents were kept in health booklets which also contained guidance specific to each individual to ensure that people received their medication the way that was right for them.

The service ensured they kept people informed about their supports. Those supported received rotas to tell them who would be supporting them and when. These were person-centred and were created in a way to meet the person's needs and abilities through use of photos, pictures of particular tasks or times of day, depending on the needs of the person. If there were any changes to these, people were kept up to date. Those we spoke with were able to tell us exactly who kept them up to date when changes took place. This meant that people felt involved and informed about their care.

The service demonstrated a real drive to ensure people felt included and were able to build and maintain friendships. They held monthly 'Tenants Aloud' meetings where those supported were able to meet and plan a range of social activities in small groups, larger groups, day trips, holidays, and parties. Everyone was invited and able to take part and attend if they wished. People told us they really enjoyed the activities and that they could try new things with their friends.

How good is our staff team?

3 - Adequate

We evaluated this key question as adequate, where strengths only just outweighed weaknesses.

The service benefitted from a staff team who were passionate about their roles and ensuring the people they cared for got the most from their supports. It was clear that the team genuinely cared for those they were supporting and knew them well.

The service was experiencing staff recruitment and retention issues which led to the team being significantly short staffed. Despite this, the team were dedicated to ensuring people were able to receive their supports. This meant that people's outcomes had not been impacted by the staff shortages. However, we were concerned about the long term sustainability of this, the impact this was having on staff wellbeing and the potential risk to people's outcomes. We spoke with staff across the service and also received a number of responses to our survey. The majority of staff told us about the difficulties in the service due to staff shortages.

We were able to see the service had a tracker of staff supervisions. Staff had not received supervision and observation of practice in line with organisational policy. This meant that staff practice was not being monitored frequently enough and opportunities to address practice issues, such as updating training, were not being discussed. We were able to sample a few completed supervisions and observation of practice that had been carried out, and found these to be well completed. They provided opportunities for managers to discuss areas of good practice as well as areas for improvement with staff. However, further work was required to ensure managers had sufficient time with staff to promote and maintain standards (see area for improvement 1).

Staff training records showed that training was not consistently up to date. Due to the staffing issues, managers had experienced difficulties in ensuring that staff completed their updates for essential and core training. Staff were also limited on time to complete training due to the staffing issues within the service and prioritising people's supports. This meant that staff practice was not always up to date or complete which had potential to lead to poorer outcomes for people. We discussed with the managers the importance of ensuring staff understood their responsibilities in ensuring that training was kept up to date, to maintain their knowledge and skills, and to ensure they upheld their conditions of registration with the Scottish Social Services Council (SSSC) (see area for improvement 2).

Areas for improvement

1. The provider should ensure that staff are supported, and have access to effective supervision and observations of practice. This is in order to support effective practice and ensuring learning and development requirements are achieved and maintained.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that:

'I experience high quality care and support because people have the necessary information and resources' (HSCS 4.27); and 'I have confidence in people because they are trained, competent and skilled, are able to reflect on their practice and follow their professional and organisational codes' (HSCS 3.14).

2. The provider should ensure that staff receive appropriate training and keep core and essential training up to date in order to continue to meet service users' needs at all times.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that:

'I have confidence in people because they are trained, competent and skilled, are able to reflect on their practice and follow their professional and organisational codes' (HSCS 3.14); and 'I experience high quality care and support based on relevant evidence, guidance and best practice' (HSCS 4.11).

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.

During the inspection, we sampled personal plans and found these to be person-centred. They provided a clear overview of the person and their life, their likes and dislikes, and provided clear guidance on how they liked to be supported with a real focus on people's abilities. These were developed with people and their families.

We found that the service had fallen behind with carrying out their six-monthly formal reviews. This meant that we could not be clear that the person or their family were involved in reviewing the plans or setting future outcomes and goals (see area for improvement 1). We were reassured when people's needs changed, personal plans were updated accordingly. Families we spoke with told us they were kept up to date with their loved ones' care.

Personal plans were sampled. They did not identify people's outcomes and goals (see area for improvement 1). People and their families were able to tell us about outcomes they had achieved, such as going on holiday, going to college and volunteering opportunities; however, personal plans did not always reflect these.

Areas for improvement

1. To ensure that people and their families are involved in directing care and support, the provider should ensure six-monthly reviews are carried out in order to:

- ensure people and their families continue to be involved in their care and support
- support people to identify outcomes and goals that they wish to work towards
- ensure people and their families are involved in reviewing their personal plans.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that:

'I am fully involved in developing and reviewing my personal plan, which is always available to me' (HSCS 2.17); and 'If I am unable to make my own decisions at any time, the views of those who know my wishes, such as my carer, independent advocate, formal or informal representative, are sought and taken into account' (HSCS 2.12).

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?	3 - Adequate
3.3 Staffing arrangements are right and staff work well together	3 - Adequate
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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