

## NPHomework Housing Support Service

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**Type of inspection:**  
Unannounced

**Completed on:**  
14 July 2025

**Service provided by:**  
NPHomework LLP

**Service provider number:**  
SP2008010173

**Service no:**  
CS2008191383

## About the service

NPHomecare is registered to provide a housing support and care at home service. At the time of the inspection, the service was being provided for four people living in their own tenancies across Glasgow.

The service is available to anyone aged 16 or over and is offered to people with a range of conditions including physical disability and learning disability, and to older people requiring support.

The provider's mission statement is, 'To provide high quality, person-centred support to individuals in their own homes, promoting independence, self-management and overall wellbeing'.

## About the inspection

This was an unannounced inspection which took place on 10, 11 and 14 July 2025.

Feedback was provided to the manager on 14 July 2025.

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 three people using the service;
- spoke with two family representatives;
- spoke with four staff and management;
- spoke with one external professional;
- observed practice and daily life;
- reviewed documents.

## Key messages

- People and their families were very happy with the support provided by committed and caring team of staff and management.
- The person-centred culture of the service was evident in the very responsive and flexible approach taken towards meeting people's needs.
- Quality assurance systems needed to be further developed to inform management oversight and direct improvement planning.
- Personal plans should be enhanced to ensure they fully capture the needs of people using 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 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 made an evaluation of good as there were a number of important strengths which, taken together, clearly outweighed areas for improvement. The strengths had a significant positive impact on people's experiences and outcomes.

People using the service had warm and compassionate relationships with staff. It was clear that people trusted staff, who took the time to listen. There was a high level of heartwarming two-way banter, strongly indicating robust relationships had developed over time. There was effective relationship-building between staff and people supported, promoting wellbeing. People were supported by staff who knew their needs and preferences well.

One person commented that the pace of support from staff was exactly what they wanted: 'They ask what I need.' They were able to compare this with support they had received in the past which had been, 'like a whirlwind.' 'They tell me what's going on,' the person commented, and added, 'I feel in control.' They felt they were actively involved in managing their support which emphasised self-worth and independence.

The service addressed emerging health needs effectively. In a two-pronged approach for a person who had developed memory difficulties, the service had encouraged medical appointments for options to address the issue through different medication, but had also introduced a range of strategies to support the person's memory. In combination these had improved the person's ability to deal with any potential memory problems, improving independence and engagement. Staff emphasised the potential issues that could arise if a person's health needs were not addressed promptly. This enabled people to make informed choices about treatment that would benefit them, for example by maintaining their mobility to keep them as independent as possible in the future.

Staff sensitively assisted people with communication when required and requested. This included encouragement for people to confirm spoken words by means of text on their phone. People said that they were reassured by support to attend medical appointments because staff could remember and record what had been discussed and agreed. People were enabled to engage with others, and could rely on important information being captured by staff to keep them healthy and well.

People shared examples of being able to use their support time flexibly. One person commented that the service was, 'very supportive of what I want to do.' The flexible approach from the service assisted people to maximise their independence with a positive effect on their wellbeing.

A survey of people's views about their support had been conducted which showed very high levels of satisfaction with the service.

The service was highly regarded by people's families. In a comment echoed by an external professional, a family member said, 'they go above and beyond.' Further comments from families were: 'My relative is thriving with the support'; 'They are absolutely brilliant'. Family were reassured that their loved ones were supported with care and compassion to meet their needs and wishes.

## How good is our staff team?

## 4 - Good

We made an evaluation of good as there were a number of important strengths which, taken together, clearly outweighed areas for improvement. The strengths had a significant positive impact on people's experiences and outcomes.

People experienced consistency of support from an established team who knew them well. Staff worked well together and responded flexibly to cover support when colleagues were absent. The manager knew people using the service well and provided support during periods of staff absence. People said that they always knew who was coming to support them. They were always informed if there were to be any staff absence and who to expect instead. One person said that in all the years they had been using the service there had never been any missed support. Families and people supported were assured of a stable and reliable service.

Appropriate recruitment checks were completed for new staff. An induction process consisting of online training meant staff felt equipped them to do their job well. This was augmented by extensive shadowing of experienced colleagues so new staff could become familiar with people's needs and preferences first hand. This meant people could be assured that all staff supporting them would be aware of how to meet their needs and wishes.

Records of staff training were held within their individual file. A training matrix for the whole team would enable improved management oversight and planning of professional development and refresher training. The service should develop this to ensure that staff training is complete and up to date in the range of topics required to continue to support people well and to keep them safe. We reworded a previous area for improvement to reflect this. (see area for improvement 1).

Staff had regular support and supervision. A staff member said that their supervisor gave them, 'constructive criticism and suggestions,' to improve their skills. Observations of practice were undertaken by management to ensure that staff maintained their skill levels. Whilst these observations were recorded in detail in individual's files, they were not brought together under one quality assurance heading to allow for oversight and any potential service-wide training needs to be identified and addressed. The service should include any lessons learned within a quality assurance framework to inform future training needs and plans so that people can continue to be supported well.

Regular team meetings took place. This gave the opportunity for staff to contribute towards improving people's support and to be kept up to date on changes. The service should ensure that all team members have access to the minutes from these meetings to maintain consistency of support for people.

Staff worked well together. They stated that management was very supportive as were all their colleagues. This was confirmed by family and others external to the service who spoke highly of staff and management. One said of staff that, 'everyone brings something to the support.' Another said: 'We speak to each other and share ideas. I depend on their judgement. I take a lot of advice from them. They listen to me too. I appreciate every single one of them.' Shared contributions from family and staff meant they were working together to make sure the person enjoyed their best life.

## Areas for improvement

1. To ensure that people have confidence in the organisation providing their support, management should ensure that inhouse quality assurance systems provide an overview of the service. This should include systematically gathering and recording people's opinions about the service and collating these to inform future developments. Records of staff training and practice observations should also be collated to enable oversight and to inform future training needs.

This is to ensure that care and support is consistent with the 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 well is our care and support planned?

4 - Good

We made an evaluation of good as there were a number of important strengths which, taken together, clearly outweighed areas for improvement. The strengths had a significant positive impact on people's experiences and outcomes.

Regular reviews with people considered how they benefit from their support. They established clear outcomes the person wished to achieve in the future. Questions like would the person change anything about their support going forward meant that future plans could be based on people's genuine assessment of their support and what was working well. One person had commented that changes in support timing had meant the pace was better for them: 'My needs are met more as a result.' The service engaged meaningfully with people so that they could be actively involved in designing their support: 'I feel in control of my service'. Reviews recognised people's desire for independence and enhanced their sense of agency and self-management.

People should be confident that their personal plan offers clear direction for staff on how best to support them. staff knew people very well. The respectful content of plans reflected people's needs and preferences, but would benefit from greater detail. The effective strategies and practice that staff employed to maintain people's independence and develop skills - and to help people stay healthy and well - should be captured within personal plans and risk assessments. These should be reviewed and updated to reflect changes in a person's support arrangements (see area for improvement 1).

The service was highly person-centred in its response to individual's expressed preferences as to how staff should record and pass on day-to-day information. Diaries enabled staff to share knowledge and experiences, benefitting a person's support. However, there was some reliance on the management of the service to record and relay information. This method of communication presents a potential risk. Staff should have ready access to all relevant information and have the capacity to update records appropriately. The service planned to explore technology-enabled solutions to facilitate improved daily recording. This would ensure support is delivered as the person would wish, and to keep them safe.

## Areas for improvement

1. To support people's wellbeing, the provider should ensure that all personal plans are clear and comprehensive in directing staff as to how a person's needs and wishes are to be met.

This should include, but is not limited to, ensuring risk assessments highlight people's health needs.

This is to ensure that 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 choices and wishes'.

## 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

To ensure that people have confidence in the organisation providing their support, management should ensure that inhouse quality assurance systems provide an overview of the service and regular communication methods are in place to capture the views of the people who experience care. The management should scrutinise the data and collate the outcome of the quality assurance processes to influence their improvement and development plan and to ensure positive outcomes for people who use the service.

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

**This area for improvement was made on 21 April 2023.**

#### Action taken since then

Questionnaires had been used to gather feedback from people about their views of the service but these had not been scrutinised and collated to contribute to the service's development plan. The manager had also made regular contact with people on a more informal basis. Although people said they appreciated this opportunity, their views had not been systematically recorded to inform future developments for individuals or for the service. This area of improvement has not been met. Management had also gathered information regarding staff training and observations of practice. This too should be collated as part of a quality assurance process to enable oversight of staff training and to inform development needs. The previous area of improvement has been reinstated and reworded to reflect the additional element of quality assurance that requires to be formalised.

#### Previous area for improvement 2

To ensure that people have confidence in the organisation providing their support, the manager should undertake a recognised qualification to meet the requirements for registration with the Scottish Social Services Council (SSSC), have additional staff support to promote a focus on fulfilling the managerial role and have protected time to undertake this.

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

**This area for improvement was made on 21 April 2023.**

## Action taken since then

The manager has undertaken a recognised qualification to meet the requirements for registration with the Scottish Social Services Council. This was facilitated by the appointment of a senior support worker with management responsibilities. This area for improvement has been met.

## Previous area for improvement 3

To ensure that people are supported by well-trained and competent staff, the manager should re-activate and record when direct observations of staff practice and reflective accounts are completed.

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).

**This area for improvement was made on 21 April 2023.**

## Action taken since then

Regular observations of staff practice had been recorded. Opportunities for reflective accounts were provided through supervision sessions and extensively for those staff currently undertaking a professional qualification. 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?	4 - Good
1.3 People's health and wellbeing benefits from their care and support	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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