

Baillieston Community Care Ltd

Housing Support Service

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Type of inspection:
Unannounced

Completed on:
25 July 2025

Service provided by:
Baillieston Community Care Ltd

Service provider number:
SP2003003514

Service no:
CS2003055886

About the service

Baillieston Community care is a Housing Support and Care at Home service provided by Baillieston Community Care Ltd, a registered charity. The service is available to anyone aged 16 or over and is offered to people who have a wide range of conditions including physical disability, acquired brain injury, learning disability and dementia. At the time of the inspection 156 people were using the service.

The provider's mission statement is: 'We provide a bespoke service enabling you to live well at home'.

About the inspection

This was an unannounced inspection which took place on 22, 23 and 24 July 2025. The inspection was carried out by three inspectors from the Care Inspectorate.

Feedback was provided to the Chief Executive and the Service Manager on 25 July 2025.

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 12 people using the service;
- spoke with four family representatives;
- spoke with 16 staff and management;
- spoke with five external professionals;
- Reviewed 19 care inspectorate questionnaires returned by people using the service or carers;
- Reviewed 15 care inspectorate questionnaires returned by staff
- reviewed documents.

Key messages

- People were very happy with the support they received from a caring and compassionate staff team.
- The person-centred culture of the service was evident in the responsive and flexible approach taken towards meeting people's needs.
- The service was pro-active in supporting staff wellbeing.
- The service was led by a responsive leadership team committed to ongoing development.
- The service offered assistive technology to help people to maintain independence and feel safe in their own home.

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?	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.

People were very happy with the support they received. One person told us they had been, 'happy with the care from the start,' another that their carer was, 'great, reliable, knows me and my issues well.' 'Personal care is a big deal for me,' one person said, 'But I feel comfortable with [carer]'. People were supported by staff who knew their needs and preferences well.

People were supported in a range of household tasks and social activities. We observed staff sensitively supporting people according to their needs and encouraging them to make choices. Staff supported people in ways that maximised their skills and sense of independence. This promoted people's wellbeing and self esteem.

People's health needs were being addressed: 'She [carer] notices changes in me and gets me the appointment I need.' A person who disliked hospitals had been encouraged to make an appointment which they had then been supported to attend. This had resulted in necessary treatment being planned for them. One person who had experienced mental health issues said that their carer had, 'saved my life.' People very much valued the relationships that they had developed with staff, and placed strong trust in them, resulting in positive health outcomes.

People had been protected from financial abuse by the actions of the staff and management. This demonstrated the service worked to keep people safe in their own home and in control of key aspects of their life.

External professionals we spoke to expressed strong confidence in the service. One said, 'They have been diligent and worked wonders.' Another commented that they valued the regular communication from the service. This meant that people could be confident their support arrangements were right for them.

The service had developed a project to use technology in the domestic setting. This helped people to maintain independence and gave them a sense of empowerment and control. One person said that communication technology had helped them by reducing their feelings of isolation. The provider planned to extend the use of technology to benefit people who used the service.

The service also offered the opportunity for people to get together for a large social event twice a year. These events were very popular. People could enjoy socialising with others with a positive effect on wellbeing.

The service regularly sought people's views about their support. There had been initial meetings of a service user focus group. One person said they would like to see this group resumed. We would encourage bringing people together in this way to seek views on specific issues that can then be actioned, further improving people's engagement with the service.

People using the service, family members and external professionals all said that the service went, 'above and beyond.' People told us about support to apply for different housing, of staff offering to take them to visit relatives in hospital, and of staff contacting them outwith their support time to check on how they were doing. More than one person said staff were like family. This spoke highly of the care and commitment of staff. We would encourage opportunities for staff to reflect on practice and on their relationships with people, in order to ensure that support is sustainable and of ongoing benefit to a person's wellbeing.

It was evident people had a very positive experience of the service. In response to the care inspectorate questionnaire, people using the service all either agreed or strongly agreed with the statement, 'Overall, I am happy with the care and support I receive from the service.' One person we spoke to said simply, 'Baillieston's the best.'

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.

Staffing arrangements worked well to meet people's needs. People told us the service was extremely flexible in the support offered. Additional support could be organised, hours changed or used on different days. A professional external to the service told us, 'Support can be adjusted if needed. They are always happy to meet what people need.' The service was very flexible and responsive in meeting people's needs and wishes. There was an electronic system in place to plan and record support times. Records we saw indicated high levels of support taking place at the planned time with no evidence of missed visits. This meant people could be confident of a reliable service responsive to their needs.

Staff had the right skills to support people well. The service had an induction programme for new staff consisting of some days of face to face training followed by shadowing of support for staff to get to know people's needs and preferences. All staff who responded to the care inspectorate questionnaire agreed very strongly that their training had equipped them to perform their role. There was a training programme in place and staff we spoke to confirmed they had regular training and refresher training. A professional external to the service said, 'They find a really good way of connecting and engaging with people. There is a good level of skill in the staff to manage this well.'

Staff felt informed and consulted and had regular opportunities to reflect on their role and development needs. Staff reported regular support and supervision and team meetings took place. Multiple team meetings in quick succession offered the opportunity for as many staff as possible to attend. Minutes of meetings indicated a supportive environment had been created for people to ask questions and make contributions. The format for supervision encouraged reflection and staff development. Staff told us they found supervision useful. Sample supervision notes were recent and future dates had been planned. This meant staff felt well supported and listened to.

The service monitored support times and had systems in place to address the typical issues that arose affecting people's support such as staff absence. People using the service and staff confirmed that there was a high level of consistency in staffing and in the timing of support. However, management had recognised and acknowledged concerns expressed by both people using the service and staff about the timing and consistency of support. Systems had been put in place to improve communication to people using the service and staff regarding any changes. Management should monitor and evaluate the success of this approach. Timely communication with people using the service and with staff would only enhance the key working arrangement of right person, right place, right time.

Staff said that although they could be working on their own, they did not feel isolated in their role. They spoke of accessible and supportive management, and supportive colleagues. Through staff portals and blogs the management shared information about what was happening in the service including strategic and policy issues so that staff felt up to date and informed. The service facilitated support groups for staff to come together for mutual support. Staff very much valued this opportunity to have a safe space to talk about issues. Staff also highlighted that they had received sensitive support with personal issues. One member of staff said, 'They care about my wellbeing. I'm not just a number.' This meant staff felt valued.

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.

The service was transitioning to an alternative electronic format for personal plans and notes. They were in discussion with the software provider to amend the system so that it more accurately captured the information relevant to people using the service. Staff continued to have access to existing plans. The service should ensure that whatever the system adopted, personal plans continue to have the right content with the right detail for staff to refer to when needed in order to offer people the support that is right for them.

Personal plans were respectfully written with the necessary and sufficient level of detail. There were sections including 'please do' and 'please don't' to highlight people's preferences. Information on triggers for anxiety minimised the possibility of distress. Information on positive behavioural support was included in people's plans. One external professional told us, 'People are achieving good outcomes. Needs are getting met according to the agreed plan.' Risk assessments linked with safe systems for supporting people. They covered a variety of potential risk areas and were regularly reviewed. Plans provided the information staff needed to support people safely and according to their wishes and needs. This meant people could be confident their care arrangements were right for them.

We saw information within plans regarding people's health needs and how to keep people safe and well. This included procedures for appropriate moving and handling, assisting with mobility and posture, and maintaining skin integrity. People could be confident that their plan worked to help keep them safe and promote good health and wellbeing.

Daily notes completed by staff were largely task-oriented. Whilst short periods of support are not necessarily opportunities to capture people's mood, for longer support times more commentary about a person's mood and responses would inform future support. This would help demonstrate people benefitted from their planned care interventions.

One external professional commented about the service, 'We have regular reviews, look at care planning, go over outcomes, make sure people's needs are being met.' Person-centred reviews focussed on outcomes under a range of different headings. These included discussing if the current plan was working, if the person was happy with the quality of care, and reviewing desired outcomes. A particular strength was the record of follow up to ensure that any recommendations as a result of the review would be actioned. This meant people could be confident the review process would lead to the agreed changes which would benefit their support.

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

Personal plans should be developed to ensure they reflect peoples identified health and support needs and associated risks.

This ensures that support is consistent with the Health and Social Care Standards: 1.15 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.

This area for improvement was made on 27 March 2023.

Action taken since then

Plans highlighted specific health and support needs for people. Risk assessments contained sufficient information to support people safely. The review process contributing to care plan updates contained specific health-related categories for discussion and addressed any deterioration that might prompt a review of risk assessments. This area for improvement has been met.

Previous area for improvement 2

The provider should continue to build on their existing approaches to quality assurance to drive forward improvements with their service plan.

This is to ensure care and support is consistent with the Health and Social Care Standards 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 27 March 2023.

Action taken since then

Significant effort had been put into improving quality assurance, including key areas of monitoring support times and medication. Systems were in place to respond to anomalies which drove improvement. 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.

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?	5 - Very Good
5.1 Assessment and personal planning reflects people's outcomes and wishes	5 - Very Good

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