

Ark Forth Valley Housing Support Service

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Telephone: 01259 404 125

Type of inspection:
Unannounced

Completed on:
5 September 2025

Service provided by:
Ark Housing Association Ltd

Service provider number:
SP2003002578

Service no:
CS2004073951

About the service

Ark Forth Valley is a combined housing support and care at home service. It is registered to provide a service to people with learning disabilities, physical disabilities and mental health conditions living in their own home and in the community. The service registered with the Care Inspectorate in April 2011.

People receive support ranging from a few hours a week to 24-hour support. Some people live alone or with family, while others live in a "house of multiple occupancy" (HMO). This is accommodation where people have their own tenancy within a shared house and share some facilities and staff. At the time of this inspection the service supported 25 people.

The service has its main office base in Alloa. It is managed by the operations manager, with two care and support managers who oversee services in Grangemouth and Alloa respectively.

About the inspection

This was an unannounced inspection which took place on 3, 4 and 5 September 2025. The inspection was carried out by two inspectors from the Care Inspectorate.

To prepare for the inspection we reviewed information about the service. This included registration information, previous inspection findings, information submitted by the service, and intelligence gathered since the last inspection.

In making our evaluations of the service we:

- Visited people who lived in the House of Multiple Occupancy (HMO).
- Visited a further six people in their own homes across Grangemouth and Alloa.
- Spoke on the phone with a person who was supported by the service.
- Reviewed questionnaire feedback from one relative, three employees, and three external professionals.
- Spoke with managers and staff.
- Observed staff practice.
- Checked health recordings, support plans, quality assurance activities, and a variety of other documents.

Key messages

- The service supported people to have good health and wellbeing outcomes.
- Leaders and staff were responsive to any changes in people's health.
- The service had well established relationships with external health professionals.
- Future care planning could be enhanced.
- Health documents in people's homes would benefit from being checked to ensure they were accurate and up to date.
- The provider should consider how to build capacity to allow leaders to spend more time monitoring staff practice, in order to improve the consistency of staff practice and ensure people are experiencing high quality support at all times.

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

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| How well do we support people's wellbeing? | 4 - Good |
| How good is our staff team? | 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 overall evaluation of good for this quality indicator as there were a number of important strengths which clearly outweighed areas for improvement. The strengths had a significant positive impact on people's experiences and outcomes. However, improvements were required to maximise wellbeing and ensure that people consistently had experiences and outcomes which were as positive as possible.

Quality Indicator 1.3 People's health and wellbeing benefits from their care and support

People's health and wellbeing was generally well supported by leaders and staff working in the service. Feedback from people using the service was generally good. Some comments from people included:

"I am very happy with my support."

"The staff have really supported me with my emotional health."

"I am supported to go to all my appointments."

The service had well established links with a variety of health professionals. We received good feedback from them. Some comments from health professionals included:

"ARK staff are really good at reporting concerns."

"I have found staff to be extremely person centred."

"The staff appear committed and well informed."

Staff worked with health professionals to support people to overcome any anxieties they had around health interventions, including accessing health screenings. This practice had led to good health and wellbeing outcomes for people who were supported by the service. Recording in this area could be enhanced, particularly around supporting people who faced ongoing barriers accessing health services. Care planning should capture the nature of the barrier; what staff were doing to support the person overcome it, and other steps staff could take to support good health outcomes if the barrier could not be overcome. Leaders in the service were receptive to this feedback. We will check progress at our next inspection.

People benefited from the input of internal specialist health support. The provider employed a practice development lead who was providing one to one support and guidance for people using the service and staff. People who had received this support gave very positive feedback on how much they had benefited from it. One person said it had given them more understanding of their health condition. It had also given them the confidence to help produce guidance for their staff. The practice development lead had previously given support and guidance to another person who was supported by the service. This had also resulted in improved health and wellbeing outcomes for that individual.

Staff had received training in key areas including medication management, moving and assisting and epilepsy support. Leaders monitored training in the service to ensure staff had completed all the necessary training, including refresher training. Compliance from staff was generally good although we noted some areas where staff were overdue refresher training. We were confident leaders were aware of this and taking steps to address it.

The recording of medication administration was generally good. We noted different documentation in place in some areas of the service. Some records did not allow staff to record carers notes on the reverse.

These allow staff to record the result of any 'as required' medications. Staff were not regularly recording the result of pain relief medication. Guidance on when to administer this medication could be enhanced. This is important where people have limited verbal communication or do not know they would benefit from taking pain relief medication. Other records including body maps to support the safe administration of topical medications could be improved. We therefore made an area for improvement around health documentation in the service. **(See area for improvement 1)**

Future care planning in the service could be enhanced. Some people had received support from the service for many years. It is important that leaders and staff consider people's future support needs as they age. This may include making adaptations to the physical environment or providing staff with training and guidance now, in anticipation of people's future needs. We made an area for improvement about this. **(See area for improvement 2)**

Areas for improvement

1. To support people's health and wellbeing, the provider should ensure health documentation is accurate, up to date, and follows current best practice guidance.

This should include, but is not limited to, guidance on when to administer all 'as-required' medications; recording the result of 'as-required' medications, and body-maps to inform the use of topical medications.

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

'Any treatment or intervention that I experience is safe and effective' (HSCS 1.24) and
'I experience high quality care and support because people have the necessary information and resources' (HSCS 4.27).

2. To support people's health and wellbeing, the provider should consider all aspects of future care planning, to help ensure the service can continue to offer safe and effective support if people's needs change as they age.

This should include, but is not limited to, considering any adaptations that can be made to support mobility and access (in areas where the provider has responsibility for maintaining the environment), and considering any potential training needs for staff (including but not limited to dementia awareness training).

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

'My future care and support needs are anticipated as part of my assessment' (HSCS 1.14) and 'I am supported and cared for sensitively by people who anticipate issues and are aware of and plan for any known vulnerability or frailty' (HSCS 3.18).

How good is our staff team?

4 - Good

We made an overall evaluation of good for this quality indicator as there were a number of important strengths which clearly outweighed areas for improvement.

The strengths had a significant positive impact on people's experiences and outcomes. However, improvements were required to maximise wellbeing and ensure that people consistently had experiences and outcomes which were as positive as possible.

Quality Indicator 3.3 Staffing arrangements are right and staff work well together

Safe recruitment of staff was in-line with current legislation and guidance. Staffing levels in the service had continued to improve, with one area being fully staffed at the time of the inspection. Agency staff were not currently being used to fill gaps. Employed staff were covering gaps where necessary. This helped ensure people generally experienced support from regular staff who were known to them.

The right number of staff were generally in place at agreed times to meet people's needs and wishes. There were infrequent occasions where leaders had to reduce support times due to staffing issues. This was done when all other options had been exhausted and people were informed in advance.

Some people had additional staffing hours to enable them to take part in social and household management activities. People had previously agreed when they wanted to have their additional staffing hours. Some staff reported that opportunities for people to take part in social activities at the weekend were limited. This was generally because people did not have additional staffing hours at the weekend. Although people had previously stated this was their preference, we advised leaders to ensure they consulted with people on a regular basis in order to ensure their staffing arrangements met their current needs and wishes. Leaders were receptive to this feedback and discussed plans on how to achieve this moving forward. We will check progress at our next inspection of the service.

Induction processes were well managed. New staff completed a variety of training within agreed timescales and shadowed well-established staff prior to lone working. People generally gave very good feedback on their support, however there were some occasions where people gave less positive feedback. Opportunities for people to give feedback on staff performance during their induction period could be enhanced in order for leaders to be confident staff were working in a way that best supported people's needs and wishes.

Opportunities for staff communication and team building could be enhanced in some areas of the service. Some staff reported that teams needed to take a more consistent approach in how they supported people. They felt some staff encouraged people's independence, while others did too many things for people, meaning some took an aspirational approach while others had lower expectations of people. This impacted on people's opportunities to learn and maintain skills. We made an area for improvement about this. **(See area for improvement 1)**

Leaders in the service carried out a wide variety of activities relevant to their role. Capacity and time constraints meant leaders did not have regular opportunities to carry out observations of staff practice. This would help ensure staff were working in a consistent manner and aid communication and team building. Leaders had recognised that having a regular senior worker presence in all areas of the service was key to ensuring staff were working well together in order to drive improvement. We made an area for improvement about this. **(See area for improvement 2)**

Areas for improvement

1. To support people's independence and skills, the provider should ensure support staff take a consistent approach where people's opportunities are promoted.

This should include, but is not limited to, strengthening team work and communication, and supporting people with agreed and defined goals.

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

'My care and support is consistent and stable because people work together well' (HSCS 3.19) and 'I am confident that people are encouraged to be innovative in the way they support and care for me' (HSCS 4.25).

2. To support consistency, team work and communication, the provider should consider leadership capacity to ensure a regular leadership presence throughout all service areas.

This should include but is not limited to, regular opportunities to meet with staff in services, monitor staff practice, carry out auditing and quality assurance activities, and get feedback from people using the service.

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

'I benefit from a culture of continuous improvement, with the organisation having robust and transparent quality assurance processes' (HSCS 4.19) and 'I use a service and organisation that are well led and managed' (HSCS 4.23).

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

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| 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 |

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| How good is our staff team? | 4 - Good |
| 3.3 Staffing arrangements are right and staff work well together | 4 - Good |

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