

# Enable Scotland (Leading the Way) North Ayrshire Housing Support Service Housing Support Service

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**Type of inspection:**  
Unannounced

**Completed on:**  
4 September 2025

**Service provided by:**  
Enable Scotland (Leading the Way)

**Service provider number:**  
SP2003002584

**Service no:**  
CS2025000141

## About the service

Enable Scotland (Leading the Way) North Ayrshire is registered to provide housing support and support services to children and adults with a learning disability, physical disabilities and/or mental health support needs across North Ayrshire. This was the first inspection since the service has been registered independently, having previously operated as part of a wider Pan-Ayrshire service.

The service operates from a central office in Kilmarnock. At the time of inspection, the service supported 49 individuals.

## About the inspection

This was an unannounced inspection which took place on 26, 28, 29 August and 1, 2, 3 and 4 September 2025 between the hours of 09:00 and 17:30. The inspection was carried out by two inspectors 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 nine people using the service and six of their family
- spoke with 13 staff and management
- observed practice and daily life
- reviewed documents
- spoke with visiting professionals.

## Key messages

- People experienced compassionate, person-centred care that promoted independence and wellbeing.
- Medication was well managed, with clear protocols and oversight in place.
- Leadership demonstrated strong commitment to quality assurance and continuous improvement.
- Staff felt supported and felt morale had improved.
- Support plans were detailed and reflected people's goals and preferences.
- Daily recording practices required improvement to ensure consistency and professionalism.
- Mental health training needed to be strengthened to better support individuals with complex needs.

## 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 leadership?	5 - Very Good
How good is our staff team?	4 - 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?

4 - Good

We evaluated this key question as good, with several strengths that positively impacted outcomes for people.

Those supported were positive about the care they received. People were supported in ways that promoted dignity, independence, and choice. Personal plans were person-centred and included detailed information about communication needs, routines, and preferences. We were able to see examples where personal plans reflected people's active role in their community and family life, with clear strategies to support goals and wellbeing.

Medication systems were robust, with clear records of administration, audits, and protocols for 'as required' medication. Staff demonstrated good knowledge of health legislation and referral processes. This meant people could be confident their medication would be well managed.

Access to health professionals was timely and appropriate, with evidence of collaboration with the community learning disability team, district nurses, and GPs. Records of health-related contacts were well maintained.

Daily notes were informative but inconsistently recorded. Staff were not consistently recording dates and times within their notes. These are important in order to establish a precise timeline of events, ensure continuity of care, track any changes in a person's condition, provide evidence of care provided and to support communication between staff supporting the individual. Inaccurate or missing timestamps can lead to errors and miscommunication. Furthermore, we found the use of emojis and informal language was not appropriate for professional documentation. We did, however, find that the management team were aware of this and had taken necessary action to address this with the team. As this was an ongoing issue, we have made an area for improvement regarding this (see area for improvement 1).

### Areas for improvement

1. To support people's wellbeing and ensure accurate and respectful record-keeping, the provider should improve the quality and consistency of daily notes.

This should include, but is not limited to:

- ensuring all entries are dated and timed consistently
- avoiding the use of informal language or emojis in records
- promoting professional standards in how staff communicate within notes.

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 based on relevant evidence, guidance and best practice' (HSCS 4.11); and 'I am treated with dignity and respect at all times' (HSCS 1.1)

**How good is our leadership?****5 - Very Good**

We evaluated this key question as very good, with strong leadership driving improvement and oversight.

The service had a comprehensive quality assurance system, including monthly audits, training compliance tracking, and supervision records. Action plans were detailed and regularly reviewed, with clear responsibilities and timescales. This meant that the management team had clear oversight of the service.

There was a detailed service development and improvement plan in place which was informed by the quality assurance processes. This gave clear overview of the service and the improvement journey.

Staff surveys were used effectively to gather feedback and inform improvements. The "You said, we did" approach demonstrated responsiveness to staff concerns, including pay, communication, and recruitment.

Leadership was visible and approachable. Team facilitators were praised by the staff team for their proactive engagement and support. The service had introduced a call log system to ensure all communications were actioned and to minimise the risk of any calls being missed.

**How good is our staff team?****4 - Good**

We evaluated this key question as good, with several strengths that positively impacted outcomes for people.

The service had previously struggled with staffing; however, we found that staffing levels had stabilised, and rotas were well managed. Staff reported feeling supported and confident in their roles. This meant that people experienced consistency and continuity as they were being supported by staff who knew them well.

Induction and probation processes were thorough, with clear tracking of training and competency checks.

Safe recruitment practices were followed, and oversight of SSSC registration was in place. Staff meetings and group supervisions as well as individual supervisions supported reflective practice and professional development.

Training compliance was high, though mental health training was identified as an area for development. Management were actively sourcing more in-depth training to address this. We found that both staff and people supported felt that further training around mental health would benefit the team and the care they provided to people who required support with their mental health (see area for improvement 1).

**Areas for improvement**

1. To support people's mental health and wellbeing, the provider should ensure staff receive training that equips them to understand and respond to mental health needs effectively.

This should include, but is not limited to, sourcing and delivering training that goes beyond basic awareness and enables staff to recognise signs of mental distress, understand the function of behaviours, and respond in a trauma-informed and person-centred way.

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 'My care and support meets my needs and is right for me' (HSCS 1.19).

## How well is our care and support planned?

**5 - Very Good**

We evaluated this key question as very good, with strong evidence of person-centred planning and review.

Personal plans were person centred, detailed and reflected people's outcomes and wishes. Plans included communication needs, routines, health conditions, and personal goals. People and their representatives were involved in creating and reviewing these. This ensured people were involved in their care and ensuring their support is right for them.

There was clear overview of six-monthly reviews. All reviews were up to date and the next ones had been planned in for people. Legal guardians were appropriately consulted. There were sections within people's personal plans which highlighted the level of input people wished or support required at the time of review.

Risk assessments were in place and regularly reviewed and updated. The service demonstrated personal planning documentation as well as risk assessments. There was a clear tracker in place which detailed all risk assessments and important documentation for people, and when this was to be reviewed or updated.

Feedback from people supported and relatives confirmed satisfaction with involvement in planning and the quality of support received.

## 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 leadership?	5 - Very Good
2.2 Quality assurance and improvement is led well	5 - Very 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?	5 - Very Good
5.1 Assessment and personal planning reflects people's outcomes and wishes	5 - Very Good

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