

# Enable Scotland (Leading the Way) - Forth Valley Housing Support Service

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**Type of inspection:**  
Unannounced

**Completed on:**  
18 September 2025

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

**Service provider number:**  
SP2003002584

**Service no:**  
CS2004061941

## About the service

Enable 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 has been registered with the Care Inspectorate since 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.

The service has its main office base in the centre of Stirling and operates across the Forth Valley area. It is managed by two service managers with the support of seven team facilitators, who have responsibility for the day-to-day management of agreed service areas. At the time of this inspection Enable Forth Valley supported 46 people.

## About the inspection

This was an unannounced inspection which took place between 15 and 17 September 2025. The inspection was carried out by an inspector 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 four Houses of Multiple Occupancy (HMO's).
- Visited a further four people in their homes.
- Spoke with the parents of three young people who receive support.
- Evaluated survey responses from eight people and their representatives; 18 staff, and one external professional.
- Met with staff from Enable's Positive Behaviour Support team.
- Spoke with managers and staff.
- Checked support plans, health recordings, and a variety of quality assurance documents.

## Key messages

- The service supported people's health and wellbeing to a very good level.
- Staffing levels had continued to improve and staff were working well together.
- Overall service performance was evaluated as very good.

## 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

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 made an overall evaluation of very good for this key question as there were major strengths in supporting positive outcomes for people. There were few areas for improvement.

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

Staff in the service understood their role in supporting people's access to healthcare and addressing health inequalities. This was evidenced through the active support people received to attend health appointments and screening programmes. Staff were proactive in seeking the support and guidance of a wide variety of external health professionals. Recent examples included supporting someone through a reduction in their medication, and getting the right support and guidance from occupational therapy when someone's mobility changed. This approach supported positive health outcomes for people.

Staff demonstrated very good knowledge of people's health needs and took pride in supporting people to achieve improved health outcomes. Feedback from people using the service was very good, with comments including:

"I can't fault the staff."

"I'd give them 10 out of 10."

"The staff support me and keep me right when they need to."

Feedback from family members was generally positive. Some comments included:

"The staff go over and above."

"The service supported our family when my [family member's] needs changed."

"I am delighted by the service provided."

Some family members felt there were areas where the service could make improvements. One person stated they felt they had to take their family member to health appointments. Another was frustrated that they did not know in advance who would be providing support. We discussed this with leaders in the service. They advised us they would address these concerns immediately.

Health recordings were generally very good. There were clear records of when people had participated in health screenings, including breast and bowel screenings. Leaders and staff were working hard to support people to overcome barriers accessing screenings. Recording could be enhanced to capture the nature of the barrier, and any support and guidance the service could offer in the event it was not possible to overcome the barrier. We discussed this with leaders in the service. They were responsive to this feedback and agreed to capture it moving forward. We will check progress at our next inspection.

Staff recognised changing health needs and shared this information quickly with the right people. This included advocating for changes to the physical environment and seeking support and guidance when people's emotional presentation changed. This would be enhanced by taking a wider approach to future care planning. The service had supported several people for many years. As people age it is inevitable that their support needs will change. Leaders should use the review process to discuss future care planning needs, which may include environmental changes, staff training needs, and external professional input. Leaders were responsive to this feedback. We will check progress at our next inspection.

The provider had its own positive behaviour support (PBS) team who provided guidance to teams and helped coordinate referrals to external professionals when needed. Leaders and staff were using the PBS team regularly to support positive health outcomes for people. Some teams had recently completed MAKATON training. This is a language programme that uses a combination of signs, symbols, and speech to help people with learning or communication needs to express themselves and understand others. We discussed the importance of this training and the need for it to be promoted by all staff. Leaders plan to lead by example by using it themselves along with monitoring staff practice. We will check progress at our next inspection to ensure the training has been used to its full potential and contributed to improved communication outcomes for people.

Health information in support plans was generally very good and provided staff with the right guidance and direction. People were enabled to make informed health and lifestyle choices that contributed to positive physical and mental health. One person stated that staff were respectful and encouraging, and tailored their approach to the situation, in order to support the best outcome for them.

People benefited from a robust medication management system that adhered to good practice guidance. Medication management was generally very good. Health folders were well organised and contained accurate, up-to-date information on people's current health needs and medication. People had individual plans around the support they needed with medication. This helped ensure staff provided just the right level of support for each person.

Guidance around the use of "as required" medications had generally improved. There were formal protocols in place to support the safe administration of epilepsy medication and medication to be given in the event an individual experienced stress and distress. Staff we spoke with demonstrated very good knowledge of when people they support may be experiencing pain and may benefit from pain relief medication. This included looking out for subtle behavioural changes. Although staff had this knowledge, it was not always clearly documented as guidance for staff to follow.

Practice would benefit from having clearer guidance on when certain topical medications should be administered. Although regular staff knew how these medications should be given, there was the risk that an unplanned event may lead to people being supported by staff who were not familiar to them. On these occasions it is important that there is clear guidance for staff to follow, to remove any barriers to people receiving the right medication at the right time. We discussed this with leaders. They were receptive to our feedback and agreed how to action it within their service improvement plan. We will check progress at our next inspection.

People's wellbeing benefited from an approach that enabled a healthy attitude to food and drink. Staff shared information appropriately when they observed changes in people's eating and drinking. One person we met was receiving support around eating and drinking. Staff were approaching this holistically to gain an understanding of any wider factors that may be contributing to the issue. Staff demonstrated insight and empathy to people's emotional needs and a dedication to work together to get the best possible health outcome.

## How good is our staff team?

**5 - Very Good**

We made an overall evaluation of very good for this key question as there were major strengths in supporting positive outcomes for people. There were few areas for improvement.

**Quality indicator 3.3 Staffing arrangements are right and staff work well together**

Staffing levels had improved over the past year. At the time of the inspection the service had a full complement of team facilitators. This role provided the first level of leadership in the service and was vital in supporting good communication, team work, and driving improvement. The service managers were well established in post. This had provided the service with a good level of stability.

Feedback from staff was more positive than in previous years. Some positive comments included:

"My team facilitator is always there when I need them."

"I have no complaints whatsoever."

"I feel very well supported in my role."

"I cannot fault the service managers."

Some service areas had the same team facilitator in place for over a year while in other areas there had been more recent changes. One family member was concerned by the number of changes in leadership over the last few years. A minority of staff felt communication still needed to improve. We discussed this the managers of the service. Their aim was to keep internal leadership changes to a minimum moving forward. They were also developing their use of IT to aid communication between staff and with leaders in the service. We will check progress at our next inspection.

Recruitment of support staff had improved. The majority of service areas were fully staffed. Recruitment was ongoing in areas where a small number of vacancies remained. One family member commented that staffing levels had previously been low but had now improved, although they felt it took time to build trusting relationships with new staff.

Rota gaps were covered by permanent or sessional staff employed by the provider. This helped maintain consistency of staffing for people using the service. People were being supported to go out in the community more frequently. Many people were benefiting from having individualised activity planners. Several people had been on holiday in the past year with support staff accompanying them. Staffing levels enabled people to live full and active lives.

Feedback from people and their representatives contributed to staffing arrangements. One person stated the service provided invaluable support to their whole family. Another stated leaders were responsive, and in the event staff were not "a good fit" for their family member, it was resolved quickly without any issues. This meant people's needs and wishes were respected.

One person told us their support days had recently been altered so they got smaller blocks of support throughout the week, rather than one full day of support. This better supported their current needs and preferences. Leaders in the service advocated for people when they identified that they would benefit from either an increase or a reduction in their support time. People's current support needs were also regularly reassessed with the support of key health professionals such as occupational therapists and speech and language therapists. This helped ensure people were receiving the right support at the right time in their life.

Staff were safely recruited in line with current best practice guidance. The induction of new staff into the service was well planned. Staff completed training relevant to their role within agreed timescales. New staff we spoke with gave good feedback about the quality of their induction and the support they had from leaders. Oversight of training was very good for all staff and compliance levels were very high. New staff worked shadow shifts alongside more experienced staff, and their competence was checked by managers at regular intervals. This helped ensure staff had the right knowledge and skills to support people.

People using the service and staff benefitted from a warm atmosphere because there were good working relationships. This was evident in all the areas of the service we visited. Interactions between staff and people were warm and respectful, and people felt confident expressing their views on the quality of the service. The majority of staff stated there were regular opportunities for team meetings and felt able to contribute their ideas in order to improve the support they provided. Staff who did not have direct care roles were recognised as being an important part of the service who had a key role in supporting positive outcomes for people.

## 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 the review process is used to promote people's health and wellbeing, the provider should ensure that relevant documentation is prepared in advance and available at the time of the review. The provider should also explore all opportunities to enable people to express their views about their care and support as part of the review process. Review minutes should provide an accurate reflection of areas of discussion along with clear goals and outcomes for the period ahead.

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

'I am recognised as an expert in my own experiences, needs and wishes' (HSCS 1.9)

And

'I benefit from different organisations working together and sharing information about me promptly where appropriate, and I understand how my privacy and confidentiality are respected' (HSCS 4.18).

**This area for improvement was made on 30 May 2024.**

#### Action taken since then

Leaders and staff had responded well to this area for improvement.

Review processes had improved. This included both planning in advance of a review, and documentation of the actual review meeting. Improvements in technology also meant staff had the necessary health information at hand in the event it was needed.

We evaluated the reviews that had been completed since our last inspection. The quality of recordings had improved. Reviews were more outcome focused, and detailed areas that were working well, along with those areas where further actions were needed. Measures to support people to contribute to reviews had improved. Moving forward, training in MAKATON should be used to help ensure people who have limited verbal communication can contribute to reviews.

Overall, we were satisfied that reviews were currently well planned and were being used as an effective means of supporting positive health and wellbeing outcomes for people.

This area for improvement had 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?	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

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