

# Enable Scotland (Leading the Way) North-East Support Service Support Service

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**Type of inspection:**  
Unannounced

**Completed on:**  
12 September 2025

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

**Service provider number:**  
SP2003002584

**Service no:**  
CS2025000146

## About the service

Enable Scotland (Leading the Way) North-East Support Service, is a newly established service that began operating on 1 April 2025. It is a branch of the national care provider Enable Scotland (Leading the Way).

The service took over the delivery of care and support from a previously operating provider and continues to provide services across both Aberdeenshire and Dundee. The existing staff team transferred to the new service, ensuring continuity of care and support for people.

The service offers care at home and support in the community for children, adults and older people. Personal assistants support people with learning disabilities, physical disabilities, mental health issues and additional needs.

At the time of the inspection, the service was supporting 76 people.

## About the inspection

This was an unannounced follow-up inspection which took place on 10, 11 and 12 September 2025. The inspection was carried out by one inspector from the Care Inspectorate.

The inspection focused on the moving and handling requirement made during the previous inspection which took place on 21 and 22 August 2025. We evaluated how the service had addressed this requirement to improve outcomes for people.

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 people using the service and their families and representatives
- spoke with staff and management
- reviewed documents.

## Key messages

- Moving and handling support was now delivered with the right number of staff, helping ensure safe care.
- Management oversight and staffing arrangements had improved, meaning people were more likely to receive the right support at the right time.
- Staff had completed moving and handling training, which helped ensure people were supported safely and with dignity.
- Risk assessments and support plans were in place, contributing to safer and more personalised care.
- Most families told us that two staff now attended as scheduled, which helped rebuild trust and confidence in the provider.
- Staff understood contingency arrangements, helping to prevent delays or unsafe care when colleagues were absent.

## 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 good is our staff team?	3 - Adequate
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Further details on the particular areas inspected are provided at the end of this report.

## How good is our staff team?

## 3 - Adequate

We re-evaluated the service and found it was performing at an adequate level.

This inspection focused on one requirement relating to safe moving and handling. Other requirements were not assessed and remain in place. These will be followed up at future inspections.

Since the last inspection, the provider had implemented action plans to support improvements in moving and handling practice. We found that progress had been made and the requirement had been met. Practice was now safer, with improved staffing oversight and people receiving support from two carers when needed. Staff were trained and care plans and risk assessments were in place. While very occasional single-staff visits had been reported, these were addressed promptly and had now stopped. This meant people were more likely to be supported safely and with dignity, reducing the risk of injury or distress. We will follow up on the provider's sustained improvements in this area at future inspections.

## What the service has done to meet any requirements we made at or since the last inspection

### Requirements

#### Requirement 1

By 10 September 2025, the provider must ensure that people are supported to move and walk safely, so that their dignity is upheld and risks of injury are minimised. This must be achieved by ensuring moving and handling guidance and procedures are consistently followed.

To achieve this, the provider must, at a minimum:

- a) Ensure all staff have completed up-to-date training in safe moving and handling and can demonstrate competence in applying this in practice.
- b) Ensure accurate and up-to-date moving and handling plans are in place, reviewed after any incident or change in condition, accessible to staff and followed at all times.
- c) Ensure staffing levels are planned and maintained in line with assessed needs, so that two staff are always available when required for safe moving and handling tasks.
- d) Take immediate action where short staffing compromises safety or care delivery.

This is in order to comply with:

Regulation 4(1)(a) and 4(2) (welfare of users), and Regulation 5(2)(b) (personal plans) of The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/210).

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

'I can be independent and have more control of my own health and wellbeing by using technology and other specialist equipment' (HSCS 1.22); 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).

**This requirement was made on 27 August 2025.**

## Action taken on previous requirement

Moving and handling support had improved and was now being delivered safely and consistently. Leaders had strengthened oversight of staff deployment and people were now receiving support from two personal assistants where this was required. Support plans and risk assessments reflected people's individual needs and staff were clear about contingency arrangements, helping to prevent delays or unsafe care. Staff had completed relevant moving and handling training and feedback from people and families indicated that two staff were now attending as expected. This helped rebuild trust and gave people greater confidence in the provider. While improvements were evident, they were recent. We will therefore follow up on this at future inspections to monitor and assess continued progress.

## Met - within timescales

### Requirement 2

By 19 August 2025, the provider must ensure they improve their quality assurance systems and processes to support positive outcomes for people and to strengthen management and leadership.

To do this the provider must, at a minimum:

- a) Quality assure the service's performance through effective audits. This must include but is not limited to, medication, care plans, daily notes, risk assessments and staff observations.
- b) Ensure all staff receive regular, meaningful and recorded supervision that supports reflection, professional development and improved outcomes for people.
- c) Ensure complaints, incidents and accidents are accurately recorded and analysed, demonstrating a proactive approach and promoting a culture of improvement.
- d) Ensure the Service Improvement Plan (SIP) is actively used, regularly reviewed and clearly led by management, with contributions from staff and where appropriate, from people using the service and their families.

This is to comply with: Regulation 4(1)(a) (Welfare of users) of the Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/210), and Section 8 of the Health and Care (Staffing) (Scotland) Act 2019.

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 use a service and organisation that are well led and managed' (HSCS 4.23).

**This requirement was made on 27 June 2025.**

## Action taken on previous requirement

This requirement was not assessed at this inspection.

## Not assessed at this inspection

### Requirement 3

By 19 August 2025, the provider must ensure that people's care and support needs are met effectively and that staffing arrangements are supporting positive outcomes for people.

To do this the provider must, at a minimum:

- a) Ensure in advance that staffing arrangements can cover support visits.
- b) Ensure other support is in place when regular workers are off due to annual leave, sick leave or any other absences.
- c) Ensure support workers have long enough during visits, to sufficiently meet people's assessed needs.
- d) Ensure visit schedules are issued in advance so that people know who will be supporting them and when.
- e) Implement a system for staff to log in and out of visits to monitor care delivery accurately.

This is to comply with Regulation 4(1)(a) (Welfare of users) of The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/210) and Section 7 of the Health and Care (Staffing) (Scotland) Act 2019 Section 7(1)(a) and 7(1)(c).

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

'People have time to support and care for me and to speak with me' (HSCS 3.16); and

'My care and support is provided in a planned and safe way, including if there is an emergency or unexplained event' (HSCS 4.14); and

'If the care and support that I need is not available or delayed, people explain the reasons for this and help me to find a suitable alternative' (HSCS 4.22).

**This requirement was made on 27 June 2025.**

## Action taken on previous requirement

This requirement was not assessed at this inspection.

## Not assessed at this inspection

**Requirement 4**

By 19 August 2025, the provider must ensure that communication with relevant others is effective, timely and supports safe, person-centred care.

To do this the provider must, at a minimum:

- a) Ensure timely and responsive communication with families, carers and professionals involved in people's care.
- b) Provide clear and consistent updates to relevant others about changes in care arrangements or support needs.
- c) Establish systems that enable people using the service and their representatives to easily contact the service and receive prompt responses.
- d) Ensure staff are supported to share relevant information with others involved in care, while maintaining confidentiality and respecting people's preferences.

This is to comply with:

This is to comply with Regulation 4(1)(a) (Welfare of users) of The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/210) and Section 7 of the Health and Care (Staffing) (Scotland) Act 2019 Section 7(1)(a) and 7(1)(c).

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

'I experience high quality care and support because people have the necessary information and resources' (HSCS 4.27); and

'I am confident that people respond promptly, including when I ask for help' (HSCS 3.17); and

'I am supported to communicate in a way that is right for me, at my own pace, by people who are sensitive to me and my needs' (HSCS 2.8).

**This requirement was made on 27 June 2025.**

#### **Action taken on previous requirement**

This requirement was not assessed at this inspection.

#### **Not assessed at this inspection**

## 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 support people's health and wellbeing and improve the quality of their support, the provider should ensure that all documentation relating to people is accurate, up to date, accessible and clearly reflects their current needs, preferences, future wishes and legal status.

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

'My needs, as agreed in my personal plan, are fully met, and my wishes and choices are respected' (HSCS 1.23); and

'I am fully involved in developing and reviewing my personal plan, which is always available to me' (HSCS 2.17).

**This area for improvement was made on 27 June 2025.**

#### Action taken since then

This area for improvement was not assessed at this inspection.

### 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 good is our staff team?	3 - Adequate
3.3 Staffing arrangements are right and staff work well together	3 - Adequate

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