

Sense Scotland Supported Living: Aberdeenshire & Surrounding Area Housing Support Service

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Unannounced

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Sense Scotland

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About the service

Sense Scotland Supported Living Aberdeenshire and Surrounding Area provides combined housing support and care at home services for people who live in their own homes across Aberdeen and Aberdeenshire. People supported by the service live in separate flats, shared houses, or in flats in a housing complex.

Sense Scotland values are:

- Be open and honest.
- Recognise individual worth.
- Build relationships through trust.
- Act on the basis of individuals' aspirations and needs.
- Be accountable.

About the inspection

This was an unannounced inspection which took place on 10, 11 and 12 June 2025. The inspection was carried out by one inspector 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:

- Met six people using the service.
- Received two questionnaires from families.
- Spoke with 11 staff and management.
- Observed practice and daily life and reviewed documents.

Key messages

- Staff supported people with dignity and respect.
- People were supported by a consistent staff group.
- Care plans were person-centred and detailed.
- People and families were involved with care planning and reviews.
- People had active lives reflecting their interests.

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 leadership?	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 aspect of the care provided and how these supported positive outcome for people, therefore we evaluated this key question as very good.

People experienced warm, friendly care and support from staff. Staff teams were consistent with many long-standing staff who had supported the people for many years. This meant people felt safe and comfortable with the staff providing their support.

People's quality of life was enhanced by living in very clean, well decorated and personalised homes. Staff supported people to take care of their home and if able people helped with house hold tasks, for example preparing meals.

People received unrushed support, and the staff were mindful of how people felt and adapted their support to suit, for example, if people were tired following activities. Therefore, people benefited from flexible care and support which reflected people's needs.

Medication was well managed and regularly reviewed, so people received the right medication at the right time. As and when medication protocols were clear and the service recorded the effectiveness of the medication in daily notes. This ensured medication could be reviewed for its ongoing suitability for people.

There were good relationships with other health professionals, for example, community learning disability nurses. There was clear documentation about any referrals, visits and the outcome of the referral. This meant people had confidence that if their health and wellbeing changed, the service would seek appropriate support.

Some people required specialised diets which had been appropriately assessed by a health professional. The staff team continued to encourage new foods within the guidelines of the assessment. This meant people were offered a choice and an interesting, nutritious diet.

People's interests were at the heart of the support. People had active lives within the community, enjoying activities such as swimming, horse riding and adaptive bikes. There were also activities within shared houses, for example going out for Sunday lunch. Should people not enjoy an activity or wished to try something else, the service looked for an appropriate alternative. This meant people benefited from an active life and being able to participate in a range of activities which reflected their interests.

People were supported to maintain relationships with families, for example meeting or staying with families. This meant both people and those close to them continued meaningful connections.

We reviewed the current paper system and found this to be well managed with daily counts and monthly reconciliation. The service was in the process of transferring people's cash allowance to a card system which will provide a simpler and robust process. This meant people were being kept safe from financial harm.

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

We found significant strengths in aspects quality assurance and how these supported positive outcomes for people, therefore we evaluated this key question as very good.

The service evidenced a very good approach to quality assurance. A range of audits was undertaken, such as health and safety and environmental and care plans. Any concerns were actioned quickly, for example, updating individual fire evacuation information. Staff would have the correct information in case of an emergency house evacuation. This meant that leaders had a good overview of service provision, ensuring that people's outcomes were met to a high standard.

The service improvement plan was comprehensive, reflecting the outcomes of audits and the actions the service was taking to improve, such as personalising people's review process and involving people and families in the recruitment process. This meant people could be assured that the service had a continuous improvement ethos.

There were robust training records held in a digital system, which alerted the manager when training needed completed or had expired. This allowed the manager to track training to ensure staff were appropriately trained. Staff are able to access their individual training record online. Everyone completed mandatory training, for example fire safety and first aid. Where there were more complex needs, staff received the appropriate training, for example, gastrostomy care. Therefore, people could be assured that staff were well trained to meet their needs.

How good is our staff team?**5 - Very Good**

We found significant strengths in aspect of staffing and how this supported positive outcome for people, therefore we evaluated this key question as very good.

Staffing levels were very good and provided consistent support for people. One relative told us, 'I am very lucky that [my relative] has been cared for by members of staff who have worked with them for a long time.' When there were gaps in staffing due to absence or vacant hours, the service utilised their relief pool ensuring there was sufficient staff to support people.

The staff were very positive about their role and spoke about the support they received from each other and leaders. One staff member told us, 'We work well and are committed as a team, focusing on the person we support.' Another said, 'We support each other.'

Staff felt the training they received allowed them to be confident in the role. For example, they received training in epilepsy and de-escalation techniques. We observed staff using strategies to reduce stress and distress in a calm way. Therefore, people benefited from a well-trained staff team.

Staff received both one-to-one and observation practice sessions for example, medication. Staff told us they were able to speak to each other and leaders if they had a concern or worry. Therefore, people could be assured that staff were supported well.

Staff meetings were well attended and discussions centred around people's care and support. This meant staff had the opportunity to discuss how to provide the right support. The meetings were held for individual teams, and we discussed that it would be beneficial for staff if meetings were expanded to include staff teams from across the service. This would allow for sharing ideas and solutions on any practice issues that may have arisen.

People were involved in the recruitment of staff. Each person had information on 'My ideal staff member.' This described how people would like a staff member to be, for example, chatty or quiet. This enabled the service to match new staff to people. This ensured people were involved in the decision as to who would be providing their support.

How well is our care and support planned?

5 - Very Good

We found significant strengths in aspect of the care planning and how these supported positive outcome for people, therefore we evaluated this key question as very good.

Each person had a care plan. These were very detailed, covering all aspects of people's needs, wishes and outcomes. For example, a personal communication dictionary allowed people to be heard and understood. Risk assessment, where needed, were in place and detailed, ensuring people and staff were safe. The provider should review generic risk assessments to ensure, where needed, they are personalised to reflect people's risks.

People and families were very involved in care planning, including a pictorial map of a person's dreams, needs and concerns. As a result, care was planned and adapted to support the person's outcomes. This meant people were assured their care plan was right for them.

Reviews were held regularly with people actively being involved in reviews. One person had created a mural in which they described their year, highlighting what they had achieved and enjoyed, and we were told would show this at their next review. This was an excellent example of people being recognised as an expert in their own experiences, needs and wishes. The service is looking to develop this practice further to include people with differing communication needs which we will review at future inspection.

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 leadership?	5 - Very Good
2.2 Quality assurance and improvement is led well	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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