

# Cantray Square Housing Support Service Housing Support Service

House 9. Cantray Square  
Cantraybridge College  
Croy  
Inverness  
IV2 5PP

Telephone: 01667 493 500

**Type of inspection:**  
Unannounced

**Completed on:**  
10 June 2025

**Service provided by:**  
Cantraybridge

**Service provider number:**  
SP2003001718

**Service no:**  
CS2004073116

## About the service

Cantray Square service is a housing support and care at home service provided by Cantraybridge Ltd. It provides a service to people who have additional support needs.

Many people who the service supports stay in their own flat or house at Cantray Square. However, others who use the service live in various locations in the Inverness and Nairn areas.

## About the inspection

This was an unannounced inspection which took place on 21 to 23 May 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:

- spoke with nine people using the service and five of their family;
- spoke with nine staff and management;
- observed practice and daily life;
- reviewed documents;
- spoke with visiting professionals.

## Key messages

People's health and wellbeing benefitted from the care and support being provided.

Multi-disciplinary team members felt involved and well informed, telling us they were very satisfied with the standard of care and support provided.

Staff treated people with compassion and care.

There had been areas of discord with staffing, but the leadership team had put in place actions to address this.

People were happy with the quality of care and service they received.

## 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?	4 - 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 made an evaluation of very good for this key question. This meant there are major strengths in supporting positive outcomes for people.

We observed kind, caring and supportive interactions between staff and people using this service. Staff had a person-centred approach to the care and support provided. This showed that people experienced warm, compassionate and nurturing care and support.

It was encouraging to see that there has been a recent focus on healthy eating, mental health, and wellbeing. People supported by the service spoke positively about the recently introduced fitness class and other well-being activities. There were examples of staff recognising people's health needs based on their knowledge of the people they supported. A relative commented that health and wellbeing was an area that "is now working much better".

The service kept detailed records of any accidents and incidents. They had received no complaints but had the necessary policies and procedure in place to respond if required.

Everyone we spoke with said they could speak to someone in the team if there were any concerns or complaints. Professionals told us that the service sought advice and guidance as and when required. This demonstrated that people were reassured that the service would respond to any concerns.

The accommodation-based element of the service aimed to support people to become more independent and, where appropriate, to move on to a housing option. However, from discussions with the registered manager, limited housing options meant some people have stayed at the service longer than needed.

The service had a medication champion in place and an audit system. They were open to suggestions to continue to improve practice and ensure safe ways of working.

We found evidence that staff have undertaken medication training, however, there was a lack of follow up with competency checks to ensure safe and best practice.

**(See area for improvement 1).**

### Areas for improvement

1. To ensure people have their medication administered in a safe way in accordance with best practice, the service provider should ensure staff have regular and effective practice competency observations.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HCSC) 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).

## How good is our leadership?

## 4 - Good

We evaluated this key question as good where several strengths impacted positively on outcomes for people and clearly outweighed areas for improvement.

Since the last inspection, the service had put in place comprehensive quality assurance systems and activities. Plans were in place to develop a more responsive service improvement plan that detailed the future of the service and reflected the views of people who used the service. The service had been aware that this was an area requiring development and identified it as a priority for the Chief Executive Officer, who was new to post.

There was evidence the registered manager had made notifications to the Care Inspectorate. However, we were made aware, through discussions with leadership and staff, that there had been some challenging situations with staff practice within the service which we had no notification of. From discussions with the leadership team, this has been a learning experience, and notifications to all appropriate agencies had subsequently been made. We have made a new area for improvement to provide focus on this area. **(See area for improvement 1).**

Strategies and supports had been put in place for staff. Staff told us that;

"Team are in a better place".

"All positive, hugely moving in the right direction".

Throughout the inspection the leadership team were open and accepting of feedback. Professionals told us that advice and support is regularly requested from the service to ensure good practice and better outcomes for people supported.

The service demonstrated an attitude of continuous improvement, successfully addressing previous Areas for Improvement (AFI's). This showed a commitment to responsiveness and a proactive approach to refining service quality.

## Areas for improvement

1. The service should ensure that any incidents, accidents, causes for concern and staff absences are notified to the Care Inspectorate as per our notification guidelines: Guidance on records you must keep and notifications you must make (March 2025).

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).

## How good is our staff team?

## 5 - Very Good

We made an evaluation of very good for this key question. This meant there are major strengths in supporting positive outcomes for people.

While we acknowledged the previous discord amongst staff, it was apparent from speaking with people supported by the service, that they benefited from a warm atmosphere because there were good working relationships. There had been effective communication between staff, with opportunities for discussion about their work and how best to improve outcomes for people.

Staff told us that there had been positive changes to practice to support people's health and wellbeing, with the development of more strategies to support people and training opportunities.

All staff we spoke with said they had regular supervision, felt supported to undertake their role and were confident in their responsibilities.

Feedback from staff included:

"Communication is excellent".

"My job is my social".

"I love it".

"I look forward to coming to work".

A family member told us:

"Staff work very well with me".

"Staff are kind".

Feedback from people who use the service:

"I like the staff they are quite kind".

People were recruited according to best practice recruitment guidance and an induction programme was in place. It was positive to hear that the service had been looking at accessing training for people supported by the service to be more actively involved in the recruitment process and in giving feedback to board members.

A comprehensive quality assurance system provided effective oversight of staff training. Despite this, we found evidence that staff were out of date with training. Systems should be in place to ensure all staff are compliant with necessary training requirements. People should expect to be supported by staff who have undertaken sufficient training and development to support them safely. **(See area for improvement 1).**

## Areas for improvement

1. To support the wellbeing of people, the provider should ensure that staff undertake all training, which is appropriate to their role.

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 the 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).

## How well is our care and support planned?

**5 - Very Good**

We made an evaluation of very good for this key question. This means there are major strengths in supporting positive outcomes for people.

The support plans we viewed were reflective of what people had told us they wished to do in both the present and future. People told us they had been fully involved in making decisions about their care and support, and we found evidence that their own individual preferences and wishes were taken into consideration when making support plans or during reviews.

Support plans would benefit from further development of outcome-focused planning. Discussion took place with the leadership team about the value of having clearly defined, specific, measurable, achievable, relevant, and time-bound (SMART) goals, with regular evaluations that reflect the impact of planned actions on people's experiences.

People shared ways in which care and support planning had maximised their capacity and ability to make choices. This included the potential for people to reduce the support they receive or to change how it is provided.

People told us:

"The best thing about being here is learning to be independent".

"You are independent, get to go to places".

"Good at listening and helping you when you are struggling to do a task".

During this inspection, we found that support plans were in place from specialist teams. This ensured that people's individual needs were met with informed and tailored interventions.

A professional told us:

"They have also been quite proactive and direct, and for example, have asked for my input into training".

Core staff presented as being knowledgeable about the current needs and preferences of people supported in the community. They were responsive when changes were required. However, there was evidence that not all documentation was updated in support plans or on the digital app used by staff. This meant there was a risk of inconsistent care and support when being provided by staff who were unfamiliar with people. The leadership team were aware of this and able to show ways in which they had begun to address the issue.

From reviewing files, it was apparent that not all files contained the necessary legal documentation for

people who were deemed to have limited capacity to make decisions. This includes Adult with Incapacity (AWI) certificates, copies of Guardianship and Power of Attorney (POA) orders, and a copy of the powers agreed and delegated to the service. We discussed the need for clearer documentation about decision making and consent, to ensure good outcomes for people. **(See area for improvement 1).**

## Areas for improvement

1. To ensure people's wishes and decisions are followed and their independence is promoted whenever possible, the service provider should make sure that all necessary information and documentation is in place and up to date.

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

'If I am unable to make my own decisions at any time, the views of those who know my wishes, such as my carer, independent advocate, formal or informal representative, are sought and taken into account' (HSCS 2.12); and

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

## 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 positive outcomes for people, the provider should make sure that all necessary quality assurance activities are in place, completed to a good level and actions to address any concerns are always identified and followed up on.

This should include, but not limited to, staff training records, management follow up actions for incidents of concern and key performance information for the service.

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

'I experience high quality care and support based on relevant evidence, guidance and best practice'. (HSCS 4.11); and

'I benefit from a culture of continuous improvement, with the organisation having robust and transparent quality assurance processes'. (HSCS 4.19)

**This area for improvement was made on 3 November 2022.**



**Action taken since then**

Since the previous inspection, the service has put in place Microsoft Lists. This system provided easily accessible documentation, and there was evidence of actions being identified and followed up on.

**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 leadership?	4 - Good
2.2 Quality assurance and improvement is led well	4 - 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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Care Inspectorate  
Compass House  
11 Riverside Drive  
Dundee  
DD1 4NY

[enquiries@careinspectorate.com](mailto:enquiries@careinspectorate.com)

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