

Aspire Central Support Services Housing Support Service

Unit 16
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Type of inspection:
Unannounced

Completed on:
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Service provided by:
Aspire Housing & Personal
Development Services Ltd

Service provider number:
SP2004004485

Service no:
CS2018366486

About the service

Aspire Central Support Services is registered to provide a combined care at home and housing support service to adults and older people with assessed physical/mental health/learning needs, including complex needs and homelessness living in their own homes.

The main office is situated in Coatbridge and at the time of the inspection, staff teams were providing support to 22 people living in East Renfrewshire and Glasgow.

The registered manager is also the registered manager for Aspire West Support Services Care at Home.

About the inspection

This was an unannounced inspection which took place on 6 and 7 July 2026 between the hours of 09:30 and 18:00. 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 four people using the service and four of their family
- spoke with six staff and management and reviewed 14 responses to our questionnaire
- observed practice and daily life
- reviewed documents
- reviewed two responses from professionals to our questionnaire.

Key messages

- People experienced warm, caring and person-centred support from staff who knew them well and promoted their independence, wellbeing and community involvement.
- Families consistently described staff as reliable, compassionate and committed to achieving positive outcomes.
- Care and support for people with complex health needs was well planned and guided by detailed, person-specific information, helping staff provide safe and effective care that met people's individual needs.
- Staff were knowledgeable about the people they supported and described receiving regular supervision, comprehensive training and good support to develop their skills and confidence.
- The service continued to demonstrate a commitment to improvement and was taking positive steps to strengthen quality assurance, gather meaningful feedback and further develop outcomes for people experiencing care.
- Feedback from staff, relatives and professionals was largely positive. Professionals were confident in the quality of care provided and reported positive partnership working and communication with the service.

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
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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, where several strengths impacted positively on outcomes for people and clearly outweighed areas for improvement.

People experienced warm and person-centred support from staff who promoted their wellbeing, independence and quality of life. People told us they were happy with the support they received and valued the positive relationships they had developed with staff. They knew who would be supporting them and told us staff treated them with kindness, dignity and respect. We heard positive examples of people being supported to pursue interests, access activities within their communities, attend appointments and maintain important relationships. This helped people experience meaningful lives and achieve outcomes that were important to them.

Relatives spoke very positively about the service and consistently highlighted the benefits of stable and familiar staff teams. They described staff as caring, reliable and committed to achieving positive outcomes for their family members. Relatives told us continuity was particularly important for people with more complex support needs and gave them confidence that staff understood people's preferences, routines and communication needs. Positive relationships between staff, people experiencing care and families helped promote trust, confidence and wellbeing.

People with complex healthcare needs benefited from support provided by skilled and knowledgeable staff. We reviewed care records which contained detailed guidance for staff supporting people with complex clinical needs. Specialist training, competency assessments and clinical oversight supported staff to provide care safely and consistently. This helped ensure people received support that was responsive to their changing health needs and promoted positive outcomes.

Feedback from professionals was positive and provided additional assurance about the quality of support people received. Professionals told us people were treated with dignity and respect, benefited from the support provided and experienced positive communication between the service and partner agencies. This demonstrated effective partnership working and contributed to people's health, safety and wellbeing.

Most care plans and support records provided clear guidance to staff about how to meet people's needs. We found particularly strong examples of detailed and person-specific information for people with complex health needs. These records clearly described people's medical conditions, outcomes, risks and support requirements, enabling staff to provide consistent care. However, some information had not yet been fully transferred into the provider's new electronic care planning format. As a result, details relating to some people's interests, relationships and personal outcomes were stored in different parts of the system. Staff were able to access this information and demonstrated a good understanding of people's needs, but further work was required to ensure all records consistently reflected people's preferences, aspirations and outcomes in one place.

The service had introduced new electronic recording and quality assurance systems which were strengthening management oversight and supporting improvement. Managers routinely monitored records, reviewed incidents and completed audits to identify areas for development. We identified issues relating to medication recording within the electronic system. Management had recognised these concerns, completed a detailed review of records and provided assurance that medication had been administered as prescribed.

Processes had been strengthened to reduce the risk of similar issues occurring in future. This demonstrated a proactive approach to quality assurance and continuous improvement.

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 that people's financial arrangements are managed appropriately and people are protected. The manager should ensure that discussions are carried out and recorded with all staff in relation to:

- a) the current policy and procedure
- b) their responsibilities and the systems in place
- c) the action that may be taken if these procedures are not followed.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that: 'If I need help managing my money and personal affairs, I am able to have as much control as possible and my interests are safeguarded' (HSCS 2.5); and 'I am protected from harm, neglect, abuse, bullying and exploitation by people who have a clear understanding of their responsibilities' (HSCS 3.20).

This area for improvement was made on 7 October 2025.

Action taken since then

During this inspection, we found that only one person was being supported with financial transactions. Clear procedures were in place for recording expenditure, maintaining financial records and monitoring practice. We reviewed financial recording and audit information and found no concerns regarding the management of people's money. Management oversight arrangements were established and provided assurance that financial transactions were being appropriately monitored. Staff responsibilities and expectations regarding financial practice were clearly defined within the service's systems and processes, supporting accountability and safeguarding. As a result, we found evidence that people were protected and their financial interests were being safeguarded.

This area for improvement was therefore met.

Previous area for improvement 2

To ensure that people are involved in improving the service, the manager should collate feedback from people who use and work with the service. This should inform the current improvement plan, and develop a self-evaluation, which demonstrates what the service does well and what they could do better.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that: 'I can be meaningfully involved in how the organisations that support and care for me work and

develop' (HSCS 4.6); and 'I am supported to give regular feedback on how I experience my care and support and the organisation uses learning from this to improve' (HSCS 4.8).

This area for improvement was made on 7 October 2025.

Action taken since then

During this inspection, we found the service had introduced electronic surveys and QR codes to increase opportunities for participation. Despite these efforts, engagement remained limited and we did not find sufficient evidence that feedback from people experiencing care had been systematically gathered, analysed and used to inform self-evaluation and service improvement planning. Managers recognised this area required further development and were exploring alternative approaches to improve engagement and participation.

We will therefore continue this area for improvement.

Previous area for improvement 3

In order to demonstrate that people needs are being met, the manager should ensure that any issues are addressed with staff during supervision meetings and that feedback is captured, during observations of practice, from people being supported, their family and staff.

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 '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 7 October 2025.

Action taken since then

During this inspection, we found supervision was planned and recorded electronically and included discussion about learning and development, policy updates, people's changing needs and staff practice. Observations of practice were completed and subject to management review and audit. These approaches provided managers with improved oversight of practice and supported continuous improvement.

We concluded that sufficient progress had been made and **this area for improvement had been met.**

Previous area for improvement 4

To ensure that accurate records of the care and support provided are kept, the manager should continue to ensure that daily notes are recorded timeously, routinely reviewed and quality assured.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that: 'My care and support meets my needs and is right for me' (HSCS 1.19).

This area for improvement was made on 7 October 2025.

Action taken since then

The service had introduced an electronic recording system which supported staff to complete daily records and enabled improved management oversight. We found that daily notes were routinely monitored,

reviewed and audited. Managers were able to demonstrate how issues relating to recording quality had been identified and addressed through supervision, team discussions and quality assurance processes. While the quality and detail of some recordings continued to vary, there was clear evidence of systems being used to support timely recording, routine review and continuous improvement.

We therefore concluded that the intent of this area for improvement had been achieved and **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.scot.

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

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