

## SeAscape Housing Support Service

South Ayrshire Escape from Homelessness Ltd  
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**Type of inspection:**  
Unannounced

**Completed on:**  
9 October 2025

**Service provided by:**  
South Ayrshire Escape from  
Homelessness Ltd

**Service provider number:**  
SP2005007564

**Service no:**  
CS2004056386

## About the service

SeAscape (South Ayrshire Escape from Homelessness) is registered to provide a housing support service to homeless adults in South Ayrshire.

The service is based in the outskirts of Ayr. The staff team deliver an outreach service within the communities where people using the service live, through visits and attendance at community hubs throughout South Ayrshire.

At the time of the inspection, the service was providing support to 137 people. The registered manager is responsible for co-ordinating the running of the service; support workers provide a service from 9am to 5pm.

SeAscape housing support service aims to help people who are homeless or at risk of homelessness and or vulnerable, to access, sustain and maintain accommodation independently. The service can be provided in a person's home, temporary accommodation or other forms of accommodation in which they live in at that time

Support is depending on the person's individual needs, ranging from advice and guidance to a more detailed person centred support plan to achieve their desired outcomes. SeAscape also provides loan or provision of essential household items via its Pass It On Service and has a Befriending Service which people can also access.

## About the inspection

This was an unannounced inspection which took place on 07 and 08 October 2025 between 10:00 and 16:30. Two inspectors carried out the inspection. To prepare for the inspection we reviewed information about this service. This included previous inspection findings, registration and complaints information, information submitted by the service and intelligence gathered throughout the inspection year.

To inform our evaluation we:

- spoke with 4 people using the service and reviewed 22 questionnaires from people supported
- spoke with staff and management and reviewed 9 staff questionnaires
- observed practice and daily life
- reviewed documents including 16 questionnaires from other professionals

## Key messages

- Staff were passionate and enthusiastic.
- People were meaningfully involved in setting their own goals.
- The service had good links with the community and other professionals.
- The management team had very good oversight of 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?	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?	4 - 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 aspects of the care provided and how these supported positive outcomes for people, therefore we evaluated this key question as very good.

People were meaningfully involved in setting their own goals, which promoted ownership and motivation. The use of an outcome tool enabled individuals to reflect on their progress and better understand the steps they were taking to achieve their goals. This approach supported people to stay focused and encouraged continued engagement with the service.

Staff were skilled at building positive relationships with people and used these effectively to promote wellbeing and encourage individuals to consider life choices they may not have previously explored. This had a constructive impact on people's confidence and sense of possibility.

Each person was supported by a dedicated worker, who had a good understanding of their circumstances and needs. This enabled staff to use appropriate tools and make timely referrals to other agencies, ensuring people received the right support at the right time.

The service had a flexible and responsive approach to engagement. Hubs in rural areas such as Maybole, Girvan, Troon and Ayr, alongside the Compass drop-in centre, ensured people could access support when and where they needed it. This helped reduce barriers and promoted inclusion.

Staff had very good knowledge of local and national supports and used this effectively to help people get the most out of life. The service worked well in partnership with housing, addiction services, social work and other advocacy organisations, ensuring people's rights were upheld and their needs met.

Referrals to health professionals were made appropriately, and people's health and wellbeing needs were responded to in a timely and coordinated way.

## How good is our leadership?

5 - Very Good

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

The management team at SeAscape demonstrated robust oversight of service delivery. Auditing systems and trackers were effectively used to monitor progress and ensure accountability. The service manager had implemented clear structures that supported timely completion of actions. Online storage systems were well-organised, enhancing accessibility and transparency. This enabled the management team to clearly identify any required actions.

Stakeholder feedback was actively evaluated and incorporated into service planning. There were plans to formalise this process further. Joint working and service user evaluations had led to tangible improvements, such as changes in service delivery locations. The 'Pass It On' initiative was developed in response to identified needs and provided essential items for new tenancies.

The service exhibited a responsive and structured approach to quality assurance, with a clear commitment to continuous improvement.

### How good is our staff team?

**5 - Very Good**

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

Staff at SeAscape reported feeling valued, supported, and proud of their roles. There was a strong sense of purpose and impact. Management fostered autonomy and trust, and staff concerns were listened to and acted upon. Staff told us "I feel 100% supported." This improved outcomes for people supported as staff were motivated.

Training was comprehensive, covering mandatory topics such as adult protection procedures as well as wellbeing initiatives like mindfulness. Induction processes were thorough and supportive which contributed to staff confidence. This assisted in ensuring staff had the necessary knowledge to provide support to people.

Staff had sufficient time to support service users effectively, with flexible diary management and peer support. A matching process ensured compatibility between support workers and service users. This meant that people supported received the level of support they required. Staff told us that "Support is person centred and tailored."

Wellbeing initiatives included team events and wellness walks, and fostered a positive work culture resulting in staff feeling valued.

Safe recruitment practices and appropriate registration oversight were in place. Regular supervision supported reflective practice and two-way feedback. Staffing arrangements were well-planned, responsive, and supportive, contributing to positive outcomes for service users.

### How well is our care and support planned?

**4 - Good**

We found important strengths in aspects of support planning and how these supported positive outcomes for people, therefore we evaluated this key question as good.

We saw that initial assessments were consistently carried out when people supported first engaged with the service. The use of an outcome tool helped shape each person's support plan. People supported were actively involved in identifying the specific areas they wanted support with, such as addiction, relationships, and emotional wellbeing. This person-centred approach supported meaningful engagement and tailored support.

The outcome tool provided a clear visual representation of each person's support journey. It was effective in showing progress over time and helped both staff and people supported reflect on achievements and areas

for further development.

Risk assessments were in place for most people. Risk assessments clearly identified risk and how to reduce this risk, contributing to a safer and more responsive service.

Running notes clearly documented the progress individuals made, however staff need to be mindful that these notes aren't sufficient enough to influence review outcomes.

We recommend adopting a more consistent approach to recording review notes, ensuring that the steps taken and support provided are clearly documented. This will help capture the full picture of each person's journey and support continuous improvement.

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

### Requirements

#### Requirement 1

The provider must ensure safe recruitment practice is followed for the health, welfare and safety of people supported.

This is to comply with Social Care and Social Work Improvement Scotland (Requirements for Care Services) 2011 (SSI 2011/210) Regulation 9 (1) Fitness of Employees: A provider must not employ any person in the provision of a care service unless that person is fit to be so employed.

National Care Standard, Housing Support Services, Standard 3: Management and Staffing Arrangements.

Timescale for completion: By 12 July 2017

**This requirement was made on 2 June 2017.**

#### Action taken on previous requirement

Review of recruitment documentation demonstrated all documentation was in place prior to starting employment. The safer staffing guidelines were being followed. Advice with regards to making the designation of the person providing the reference clearly visible was promptly actioned

This requirement has been met.

**Met - within timescales**

## 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

The manager should develop a service participation strategy incorporating methods to ensure people supported have a range of opportunities to give their views on the quality of the service provided.

National Care Standard, Housing Support Services, Standard 8: Expressing Your Views

**This area for improvement was made on 2 June 2017.**

#### Action taken since then

The service held 3 monthly reviews which gathered people supported views on the service and impact of the same.

There was evidence of collaborative working with other services to engage with people and the wider community which had led to service improvements.

The service development plans included details of how this would be supported and expanded.

This area for improvement is met

#### Previous area for improvement 2

The provider must supply the Care Inspectorate with all information required within the required timescales as detailed within the Care Inspectorate Guidance on Notification Reporting.

National Care Standards, Housing Support Services, Standard 3: Management and Staffing Arrangements

**This area for improvement was made on 2 June 2017.**

#### Action taken since then

The Care Inspectorate has been notified of all relevant events identified during the inspection as having taken place .

This area for improvement is 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 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?	4 - Good
5.1 Assessment and personal planning reflects people's outcomes and wishes	4 - Good

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