

## Delight Supported Living Ltd - Ayrshire Housing Support Service

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**Type of inspection:**  
Unannounced

**Completed on:**  
24 October 2025

**Service provided by:**  
Delight Supported Living Ltd

**Service provider number:**  
SP2009010723

**Service no:**  
CS2016348705

## About the service

Delight Supported Living Ltd - Ayrshire is registered with the Care Inspectorate to provide care at home and housing support to people in their own homes.

Care was provided to people by a team of trained and competent support workers. The registered manager had oversight across the three Ayrshire areas and was supported by service managers and coordinators for each local authority area.

At the time of this inspection Delight Supported Living Ltd - Ayrshire were supporting 167 people across North, South and East Ayrshire.

## About the inspection

This was an unannounced inspection which took place on 21, 22 and 24 October 2025. The inspection was carried out by three inspectors. 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 10 people using the service and 14 of their relatives
- spoke with 10 staff and management
- We received 38 completed questionnaires; 22 from people supported and their relatives, 14 from staff and two from external professionals
- observed practice and daily life
- reviewed documents
- spoke with one external professional involved with the service.

## Key messages

- People received reliable and consistent support from a familiar staff team with whom they had positive, trusting and caring relationships.
- Family members felt involved and well informed, telling us they were very satisfied with the standard of care and support provided.
- Staff were highly motivated and focussed on achieving good outcomes for people.
- People's personal plans were well detailed and focussed on personal outcomes.
- Changes in leadership personnel had impacted on the effective use of quality assurance systems and processes.
- We found that the service had begun to use self-evaluation, however, further work is required to develop this approach to support improvement.

## 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

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 and their relatives spoke very highly of the care and support received by Delight supported living.

Comments from people who receive support included,

"The care I get is good and I have no complaints at all."

"We have been very happy with the service that Delight provides."

"We couldn't have asked for a better care company and it lets Mum have the peace of mind she needs."

"The staff are caring and respectful with a generous helping of laughter and fun, which is what is needed in a situation like mine."

"We are so happy the carers are consistent, we think it would be entirely different if the carers were not as familiar and we would have to get to know new people every visit."

"We are very happy with the service, care workers are fantastic, so friendly and kind; they are like part of the family"

The service demonstrated a strong commitment to supporting people's health and wellbeing through a range of well-embedded practices and systems. Staff showed a clear understanding of their role in facilitating access to healthcare. This was evident in the way staff escalated healthcare needs, including medication management when required. This enabled early intervention and helped to mitigate potential risks to people's health.

Staff were alert to changes in people's health and responded promptly. Managers provided examples of staff identifying health concerns early, which led to timely referrals and interventions. This proactive approach was reinforced by very positive feedback from families and external professionals, who expressed confidence in the service's ability to support healthcare needs effectively.

Managers reviewed all accident and incident reports and facilitated follow-up actions, ensuring that learning was captured and acted upon. Reviews of risk assessments were conducted regularly, providing effective oversight.

Medication management was safe, person-centred, and aligned with best practice. Medication Administration Records (MAR) were consistently well completed, and regular observations of staffs competence promoted safe practice.

The service facilitated good access to community healthcare and preventative services. Feedback from families highlighted the service's proactive engagement and effective communication, which ensured that people received the right care at the right time.

Staff were supported to understand complex health conditions, which promoted a more informed and empathetic approach to care. We saw that the team had been trained in person/condition specific areas, promoting better outcomes for people.

People's nutritional needs were generally well supported. Most individuals required assistance with meal preparation, and some needed assistance to eat. Staff had been trained to assist people safely and were responsive to changes in eating and drinking habits, and referrals to dietitians were made where appropriate. Families told us how much they appreciated this level of support.

### 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.

The organisation has established quality assurance systems to monitor and evaluate the care and support provided. However, recent changes in office personnel have impacted the consistency of these processes. With all office posts now filled, we were reassured that quality assurance activities were being scheduled into work plans. It is essential that these tools are used effectively to benefit both the individuals receiving support and the staff team.

Improvement plans were in place for both office locations. These plans help ensure adherence to good practice standards and support necessary changes and improvements. Due to previous staffing challenges, implementation of these plans was still at an early stage.

Review meetings were consistently held every six months, including the person and those who know them best. In some cases, relatives had requested online meetings, and there was evidence that Delight had accommodated these requests to ensure reviews proceed.

However, the quality of documentation varied. For example, review summaries may not fully reflect the depth of discussions. It is important that records accurately capture what was discussed and agreed upon. Including a clear track of planned and completed actions to enhance transparency and support leadership oversight.

The quality of supervision varied across supervisors. These meetings should focus on staff development and support, helping individuals improve their practice. Staff well-being must also be prioritised during supervision to foster engagement and retention. Supervision sessions should be dedicated to personal support and professional development.

Team meetings have not been occurring as regularly as outlined in the organisation's policy. Ensuring these meetings are planned and take place is vital, as they provide staff with opportunities to share learning, experiences, and strengthen team cohesion.

Managers demonstrated good oversight of staff training. It was encouraging to see that person-and condition-specific training had been delivered, helping staff enhance their skills and knowledge to improve outcomes for those they support.

Staff benefit from personal and professional well-being support, including debriefing after difficult situations, personal safety guidance, and workload assessments. A consistent approach across the leadership team would further strengthen this support.

Development planning with the senior team had been introduced. Setting clear standards across the team will ensure that personal plans, reviews, supervisions, and observations are carried out consistently. This will help develop leaders with the skills, capacity, and systems needed to identify risks, take appropriate action, and drive continuous improvement (see area for improvement 1).

The service uses feedback as a learning tool, several people told us anytime they contact the office, they had received swift and effective response.

The service had begun to use self-evaluation, however, further work is required to develop this approach to support improvement.

## Areas for improvement

1. To further the improvement journey, the service should consider the following actions:

Embed quality assurance systems to ensure consistency and impact.

Conduct quality audits across all service areas, supported by clear action plans and follow-up mechanisms. Set standards for monitoring practice by establishing and enforce standards for supervision and practice development in line with organisational policies.

Reinstate regular team meetings to promote collaboration, learning, and shared responsibility.

Also, develop a structured development plan for senior staff to build capacity to improve planning, and enhance outcomes.

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).

## 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.

Staffing arrangements at the service were underpinned by continuous assessment and regular engagement with commissioning partners. Although commissioned hours were determined externally, the service maintained regular dialogue with local authority commissioning teams to review and adapt support arrangements. This demonstrated a strong commitment to maintaining the quality of care despite external constraints. For example restricting the amount of tasks appropriate to 15-minute visits. This ensures high standards of care and promote positive experiences for people.

Staff deployment was person-centred and considered compatibility, continuity, and individual preferences. A structured process was used to plan, assess and evaluate staffing and supported peoples needs, taking into account skills, personalities, and preferences. We also saw very good examples of continuity of staffing across all areas. This approach supported the development of trusting relationships and contributed to consistency in care.

Staff were observed to provide compassionate care and meaningful interactions. Feedback from people who receive support and their families was overwhelmingly positive; with many highlighting the dedication and warmth of staff. Families described staff by commenting,

"I'm very happy with the service, the carers are great, they are well trained, so helpful and kind; generally get the same care workers, if they are running late we get a call, this is very helpful."

"We get regular carers which is great for mum as she then knows who is caring for her."

"If there are any issues I speak with the office, they are very helpful."

"Staff are very knowledgeable, meet new staff when they are shadowing experienced staff and I appreciate this."

"Staff stay as long as needed, do what we require help with, they couldn't be more helpful."

Further feedback from people and their loved ones included,

"If I could rate the staff as more than 10 out of 10, I would do."

"My carer makes me laugh so much, she is fantastic."

"Kind, caring, thoughtful, couldn't have asked for better carers."

"Staff cannot do enough, they are polite, respectful, professional, and well-presented and well-informed."

The service demonstrated continuity and flexibility in responding to changing needs. Managers used a rolling rota system that provided predictability while allowing for adjustments based on individual needs, events, or appointments. Staff confirmed that they were willing to support each other and adapt when necessary, contributing to a resilient and responsive team culture.

Supported people had a say in who supported them. The service responded flexibly to individual preferences, adjusting rotas where needed to ensure that people felt comfortable and respected in their support arrangements.

Team communication was generally effective and supported good outcomes. The majority of staff reported on strong teamwork and a supportive culture. Staff described a strong team ethos and a shared commitment to achieving positive outcomes. However, some staff highlighted the need for improved communication. Where we appreciate the changes in personnel in the office, this should to be more consistent when staff are seeking support.

Staff questionnaires and staff interviews reflected a motivated and committed workforce, with many staff expressing pride in their roles and in the outcomes achieved for supported people. Feedback from supported people and families reinforced these findings. Supported people reported feeling respected, listened to, and well cared for.

All staff demonstrated a clear understanding of their responsibilities in delivering high-quality care. All staff had been trained to understand their role in escalating any changes in people promptly. The compliance of training was noted to be very high

There was clear evidence of effective forward planning and staff deployment, which contributed to positive outcomes for people. However, during the inspection, we discussed with the manager the potential to strengthen the self-evaluation process for staffing. We suggested that this be considered for inclusion in the service development plan.

## 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 are supported to a consistently high standard the manager should devise one-page profiles for each person. This will provide all staff with improved detail on peoples' needs, wishes and preferences.

This is to ensure that 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).

**This area for improvement was made on 5 February 2025.**

#### Action taken since then

One-page profiles are now in place for each person. This has provided staff with improved detail on peoples' needs, wishes and preferences.

This area for improvement has been met.

#### Previous area for improvement 2

To support staffs' well-being and improve their opportunities for development, the registered manager should ensure that meetings with staff are scheduled regularly and appropriately recorded.

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).

**This area for improvement was made on 5 February 2025.**

#### Action taken since then

Supervision meetings were now being scheduled in advance. This had improved the purpose of these meetings. Including the ability to plan ahead focussing on staffs well-being and development opportunities.

This area for improvement has been 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?	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

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