

Trust Housing Association Ltd - Branch 4 Housing Support Service

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Type of inspection:

Unannounced

Completed on:

4 December 2025

Service provided by:

Trust Housing Association Ltd

Service provider number:

SP2003000174

Service no: CS2004062641



Inspection report

About the service

Trust Housing Association Ltd - Branch 4 is registered to provide a housing support and care at home service to people with support needs living in their own homes. The provider is Trust Housing Association Limited. At the time of the inspection, the service supported people to live in their own homes within later living housing, sheltered and supported housing developments across Scotland. The service had a head office based in Govan, Glasgow.

About the inspection

This was an unannounced inspection which took place between 02 December to 04 December 2025 between 07:30 and 17:00 hours. Four inspectors carried out the inspection. We visited five developments these were in Glasgow, Motherwell and Bellshill.

To prepare for the inspection we reviewed information about the service. This included, registration and complaints information, information submitted by the service and intelligence gathered throughout the inspection year.

To inform our evaluation we:

- spoke with 25 people using the service and seven relatives
- spoke with 21 staff including management
- · spoke with two visiting professionals
- · observed practice and daily life
- reviewed feedback from 37 pre-inspection questionnaires from people using the service, family members, and staff
- · reviewed documents.

Key messages

- · People were respected and treated with dignity.
- People were supported to maintain relationships with those important to them.
- Staff were kind, caring and compassionate.
- Families were complimentary about the quality of care their loved ones received.
- People were supported by the right number of staff at times that were convenient to them.
- Care plans should be consistent across all developments; person centred and include appropriate risk assessments.

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 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 treated with compassion, dignity, and respect. We observed staff using their knowledge and skills to provide care in a warm and considerate manner. One person shared, "I'm in the right place, It's exactly what I need" another person shared "This place is a good benchmark, this is what others should be aiming to achieve". Throughout the inspection, staff consistently interacted with individuals politely and respectfully, demonstrating a strong understanding of each person's needs.

Staff were seen to be kind and caring in their approach with people, who at times experienced stress and distress, taking into account the needs of the individual and other people. Feedback that we received, from people and their families, reflected that they were overall happy with the care. Families valued seeing their loved ones taking part in social activities and forming new friendships. One person told us "She has her sparkle back and it has taken a lot of pressure off; she can still be independent and safe". Throughout the developments we were able to see photos and videos of activities being displayed. In some developments staff put on activities in their own time which included parties, bingo, gentle exercise and themed events. This was warmly received. In other developments people were encouraged to take ownership of their activities and they planned regular entertainers, coffee mornings and themed events. This promoted people's independence and their wellbeing. It would be good to see this replicated across all of the developments.

Medication recording needed improvement, especially for "as and when required" (PRN) medicines, which were not recorded consistently across developments. Management recognised this and were actively addressing it. Significant progress had been made around medication training. Errors have decreased, and monitoring systems now track trends for escalation to senior managers. Staff training had been updated with hands-on sessions in small groups, boosting confidence and skills. This initiative is being rolled out across all developments and branches with positive feedback. To further improve, more observations of medication practice will be introduced to ensure safe, high-quality care based on evidence and best practice.

Transparent reporting procedures were followed, and all notifiable events were shared with the Care Inspectorate or relevant professionals. Staff acted promptly to identify risks and escalated concerns when they could not maintain safety due to health changes or increased needs. This demonstrated responsive and effective care and support.

A branch-wide Service Improvement Plan was in place with clear goals and tenant feedback included. As this plan is a live, continuously updated document, it would be beneficial for each development to have its own plan feeding into the branch plan. This approach will improve quality across all areas and give managers clear goals whilst identifying specific needs for each development. (See Area for Improvement 1.)

Areas for improvement

1. Each development should have their own service improvement plan which feeds into the overall branch improvement plan. This will enable greater involvement in quality enhancement strengthening the service.

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.

Positive morale was evident across the service and people described it as being a pleasure being able to maintain peoples independence and make them smile. One member of staff said "We have a good team. Job satisfaction is the best part." We observed good communication between management, staff, and relatives throughout the inspection. Having leaders who were visible and supportive empowered staff to provide high quality care for both people and families.

Staff were recruited safely in line with national guidance with appropriate checks, references, and professional registrations. Staff spoke positively about the training they had received, which enabled them to work confidently and effectively in their roles. This included online, face-to-face, and refresher sessions tailored to their responsibilities. The training contributed to safe practice, enhanced skills, and ensured that people were supported by a knowledgeable and competent workforce. We have encouraged more regular observations of practice with staff which included medication practices and social interactions. This is something the service recognised is needed more to help further enhance responsive care and support.

Rotas showed there were the right number of staff to deliver care safely. We discussed agency usage and the impact this can have but we were reassured to hear that a recruitment drive was underway for permanent staff. When agency staff were required block bookings were made. This helped to promote consistency and continuity of care.

The staff team worked well together. There was respectful communication within the team which created a warm atmosphere because of good working relationships. Staff also worked on their own initiative, to gain a deeper understanding of people's needs. Staff showed patience and compassion when supporting people.

Staff wellbeing was valued, and the management team recognised the complexity of the role, it is a dynamic service. Staff had regular opportunities at supervisions to discuss their wellbeing. Staff also had access to an Employee Assistance Programme which offered counselling and wellbeing assistance. As the service promoted a positive working environment where staff felt supported, and their achievements recognised, this lead to high levels of morale and performance.

How well is our care and support planned?

4 - Good

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We evaluated this key question as good because there were a number of major strengths which, taken together, clearly outweighed any areas of improvement.

Personal plans, often referred to as care plans, are important documents that capture people's wishes, needs, risks, and how people want to be supported. Sampling care plans across the developments each person had their own care plan, but the quality varied across developments. We saw some plans were detailed, covering people's interests, needs, and health risks well. However, there was evidence of gaps in some care plans and risk assessments, where the detail was brief and lacked person centred elements. Whilst many experienced staff knew people well, this lack of detail presented risk to people being supported by new or agency workers.

We asked the service to ensure that all care plans were completed to a consistent standard. Using the same documentation across all developments is essential to streamline processes and keep plans updated in all necessary areas. This promotes clear understanding and enables any staff member, including those unfamiliar with the individual, to provide safe, high-quality, and consistent care. A digital system was in place, and work was underway to make personal plans more accessible. We highlighted this to management, who agreed that improvements were required across all branch developments to achieve greater consistency in care planning. (See area for improvement 1).

Agency staff did not have access to people's digital personal plans, which created a barrier. Agency staff relied on handover notes, the quality of which varied across developments. This process needed to be formalised so that agency staff could access updated care plans and notes in all developments. Management agreed with this and confirmed they were working towards a solution to make personal plans accessible to everyone.

Personal plan audits were carried out regularly and highlighted any areas that needed addressed. This helped staff to focus on the areas that required updating and address any gaps. It is important that the same audit procedures are carried out across all developments.

Monthly wellbeing chats happened on a regular basis with people. This was a good opportunity for people to identify what they were enjoying or if there was anything they would like to work towards. This fed into care plans and reviews. Reviews were happening on a regular basis and through feedback from external professionals they shared how they and the individuals had been actively involved. One professional told us "staff treat individuals with dignity and respect and always good at recognising changing needs". This ensured individuals received sensitive care from staff who anticipated potential issues and proactively planned for any known vulnerabilities.

Areas for improvement

1. Care plans should be streamlined across all developments where they are person centred, accessible and appropriate risk assessments in place.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that: 'I am fully involved in developing and reviewing my personal plan, which is always available to me' (HSCS 2.17).

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 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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