

## GMD Community Services Housing Support Service

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**Type of inspection:**  
Unannounced

**Completed on:**  
19 December 2025

**Service provided by:**  
GMD Community Services

**Service provider number:**  
SP2007009392

**Service no:**  
CS2007164062

## About the service

GMD Community Services provide housing and community support services to people who live within South Lanarkshire.

Their branch office is in Coatbridge and at the time of inspection were supporting 47 people.

The service provides varying packages of care and support to meet people's needs. The range of services include: personal care and support, support with domestic tasks and shopping.

## About the inspection

This was an unannounced inspection which took place on 16 and 17 December 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.

To inform our evaluation we:

- spent time with four people using the service and two of their relatives
- received completed pre-inspection questionnaires (eight from people and relatives, three from staff and one from a visiting professional)
- spoke with three staff and management
- observed practice and daily life
- reviewed documents
- spoke with one visiting professional.

## Key messages

- People using the service and their relatives expressed high levels of satisfaction with the care and support provided.
- The service should strengthen its approach to monitoring and reviewing the service improvement plan and related action plans to ensure they have been followed up on and closed.
- Staff need to complete training to achieve dementia skilled level in line with best practice standards.
- Staff reported working well together as a team and felt supported in their roles.
- The management team should ensure they remain up to date with current best practice guidance and legislative changes.

## 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?	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 were very happy with their care and support. One person told us: "I think the care is very good; staff always ask if there's anything else I need". Another person told us, "The staff would do anything for me". Relatives also spoke highly of the support and said that staff were very attentive and caring. People were supported with dignity and respect. People appeared to know their staff well and were relaxed in their presence.

People were enabled to have control of their own health and wellbeing through access to necessary technology and other specialist equipment they needed, such as, mobility aids. It was evident that staff recognised changing health needs and shared this information quickly with the right people.

People felt safe and staff demonstrated a clear understanding of their responsibilities to protect people from harm. Measures were in place to prevent this happening and people could be confident that if they identified concerns, these would be actioned. We shared aspects of reporting, particularly related to adult support and protection concerns that the service needed to improve upon. Despite improvements needed, the service had completed and followed up on all concerns they had received, appropriately. The management team were very responsive and we were assured improvements would be implemented immediately.

People had as much control as possible over their medication and benefitted from a robust medication management system that adhered to good practice guidance. The service had carried out additional medication training to further enhance staff knowledge and competence.

## 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 felt supported within their roles. A few staff did feel the service could make further improvements to travel times. The management team had recognised this and were working to resolve.

Team meetings, staff supervisions and observations of practice were being completed on a regular basis. Training statistics within the service were to a very good standard. The only area that the service needed to improve on was ensuring that staff were dementia skilled trained in alignment with best practice guidance (see area for improvement 1).

The right number of staff, with the right skills were working at the right times to support people's outcomes. Staff rota's were sent out to people and their families weekly to ensure that they knew who would be supporting. Staff felt they had enough time to provide care with compassion and engage in meaningful conversations with people.

We shared best practice guidance with the management team about safer recruitment and safe staffing. Recruitment records were an area that the manager had identified needed improving through their own

audit systems. The service could further improve their evidence of how they match people and their staff. With this in mind, people could be assured that the service were recruiting staff safely.

People using the service and staff benefitted from good working relationships and effective communication. There were opportunities for staff to discuss their work and how best to improve outcomes for people.

### Areas for improvement

1. To improve people's health and wellbeing, the provider should ensure that staff are dementia skilled trained in line with best practice.

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 based on relevant guidance and best practice' (HSCS 4.11).

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

**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 had paper-based care plans. Digital diary logs were used by staff to report on people's health and wellbeing during their support visits. Care plans were regularly reviewed, evaluated and updated in collaboration with people, families and relevant professionals. These plans were reflective of people's health and wellbeing needs and took account of their preferences and wishes.

Six-monthly reviews were up to date and detailed key aspects of people's lives and outcomes. To strengthen this process, it would be beneficial to include feedback from staff to provide more insight into the person's experience over the previous six months. Risk assessments were also reflective of people's health and wellbeing needs and were reviewed in line with care plan reviews.

Where people were unable to fully express their wishes, individuals who were important to them or have appropriate legal powers were involved in shaping and directing their care and support plans.

The service should maintain a focus on gathering feedback from people about their care experience. Previous survey responses were limited, suggesting that the current approach of gathering people's views was not effective. A clear action plan was needed to identify the best way to collect meaningful feedback and incorporate this into the improvement 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 improve people's health and wellbeing, the provider should ensure that staff access training appropriate to their role and apply their training into practice. This should include, dementia skilled and fire safety awareness training.

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 based on relevant guidance and best practice' (HSCS 4.11).

**This area for improvement was made on 31 July 2023.**

#### Action taken since then

Staff were receiving annual fire safety training. However, there was limited evidence of staff having completed dementia-skilled training in alignment with *Promoting Excellence Framework*. Whilst the service manager was now trained as a dementia-skilled champion, a clear plan for rolling out this training to the wider staff team had not yet been developed. This area for improvement will be met however, a new area for improvement will be issued to ensure all staff achieve dementia-skilled training. Please see Key Question 3; How good is our staff team?

**This area for improvement has been met.**

#### Previous area for improvement 2

To continue to improve the care experience for people, the manager needs to implement a complaints tracker to evidence that complaints are managed effectively.

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).

**This area for improvement was made on 31 July 2023.**

#### Action taken since then

The service had a complaints tracker in place. This tracker would benefit from clearer timestamping, for example, noting who was spoken to and when. Whilst there was evidence surrounding the management of complaints and how these had been resolved, more chronological detail would strengthen the detail within the tracker.

**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 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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