

Glasgow East End Community Carers Housing Support Service

26 Penston Road
Glasgow
G33 4AG

Telephone: 01417 640 550

Type of inspection:
Unannounced

Completed on:
17 December 2025

Service provided by:
Glasgow East End Community Carers
Ltd

Service provider number:
SP2004006714

Service no:
CS2016352807

About the service

Glasgow East End Community Carers is registered to provide a combined care at home/housing support service to children, adults and older people with physical disabilities, learning disabilities (including autism) and mental health needs in their own homes and in the community.

The service operates from an office base in the east end of Glasgow and supports people who live predominantly in that area.

The service's stated mission aims to provide inclusive and world class care for service users and their carers, by supporting, protecting and promoting their rights and independence. The service provides a range of care from minimal support to 24 hour care. At the point of inspection, there were approximately 176 people using the service.

About the inspection

This was an unannounced inspection which took place from 15 to 17 December, 2025. 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, information submitted by the service and intelligence gathered since the last inspection.

In making our evaluations of the service we:

- spoke with seventeen people using the service and/or their family members
- spoke with eighteen staff members and management
- observed practice and daily life
- reviewed documents including personal plans, staff supervision records and quality assurance audits.

Prior to the inspection we distributed questionnaires and received feedback from seven people using the service and seven of their family/friends.

We also received feedback from 37 staff members and six visiting professionals.

Key messages

- The service provided person led support from an accessible community base.
- People supported, their families, and external professionals were positive about support delivered.
- Staff were well trained, knowledgeable and committed to supporting people to live well and as independently as possible.
- Leadership promoted an inclusive and collaborative culture.
- The organisation prioritised staff wellbeing, training and development.
- Personal planning should be developed to fully reflect the positive outcomes achieved.

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 evaluated this key question as very good because performance demonstrated major strengths that supported positive outcomes for people. There were very few areas for improvement.

The service supported people with a wide range of needs according to each individual's assessed needs and preferences. This included attending people's homes to assist with daily living activities to support independence and improve quality of life, as well as supporting social and recreation integration. Feedback from people accessing the service reflected a high level of satisfaction and confidence in the service. One service user highlighted that the carers are consistently regular in their visits, and they have developed a strong rapport with them: "XX feels that the carers genuinely take the time to get to know them as an individual, allowing them to be themselves, which XX finds extremely beneficial for their mental health."

The service operated from a community hub and people using the service were encouraged to access the facilities such as a community café, activity and sensory room, football pitch and a communal garden. Regular social events were also organised including a Christmas party. This ensured support was not delivered in isolation and people felt part of a wider community. This enhanced people's social opportunities and feeling of inclusion and wellbeing.

Staff worked hard to ensure people felt part of the community in which they lived. They identified local resources and people were supported with shopping, attending local amenities and improving their confidence to be involved in their community. Staff responded to changes in both physical and wellbeing needs and liaised with families and external health professionals when required. This helped to keep people well.

People's health and wellbeing benefited from their care and support. A team of dedicated and compassionate staff clearly valued and respected the people they supported. It was evident during the interactions and engagements we witnessed and heard about, that staff treated people with compassion, dignity and respect. People enjoyed and benefitted from the support and families felt assured by their approach. Comments included "they make sure that XXX is well looked after and taken care of and everything. They're really, really good", and "I can't fault them they are a really good team". Families were further assured by being able to access personal plans and records of support delivered via an electronic application. "I can access it any time and make sure mums support has taken place and the girls are there. This offers me assurance as I am at work and can't be there ""and " they have a wee app that I use and I can click in and find out exactly when they're coming and you know it's like that and then I can read the feedback that the carers have put on". This gave families peace of mind.

Some people were supported with medication according to assessed needs. Staff were confident in their knowledge of people's needs and preferences. However, the manager agreed to improve recording to ensure records fully reflected best practice and health professionals' guidance.

Feedback from involved professionals was overwhelmingly positive about how the service was managed. Comments included "the service will raise appropriate concerns for people and always explore good options for them", "dedicated staff who go out of their way to ensure people are well supported " and " the mammoth expansion initiatives of recent years are hugely impressive.....they are always looking to add positively to their service portfolio".

How good is our staff team?**5 - Very Good**

We evaluated this key question as very good because performance demonstrated major strengths that supported positive outcomes for people. There were very few areas for improvement.

The service was well led. Staff confirmed a strong, visible management presence and that they felt able to approach the leadership team at any time. This meant staff felt well supported, listened to and valued.

Feedback from people using the service confirmed the reliability of support delivery with no reports of missed visits. One person highlighted "visits are punctual, carers are competent and communicative, and X is very happy with the care provided".

Senior staff monitored and responded effectively to any scheduling challenges to minimise any impact to people. This ensured people were confident in the service.

Compassionate and skilled staff contributed to a positive culture which ensured staff and people accessing the service felt valued. Staff at all levels were praised for their caring attitude and high-quality support. Staff were motivated and worked well together. A flexible person led approach ensured people's needs were met in a timely and effective manner.

A collaborative approach and robust communication created trust and reassurance for families and people experiencing support.

The service had experienced recruitment challenges and managers were prioritising how to retain staff to ensure ongoing core group stability.

Recruitment was carried out according to best practice and new staff received robust induction training to enable them to support people safely. Staff had regular access to senior staff and scheduled formal supervision with their line managers. Group supervisions gave further opportunities to discuss day to day working practices. This ensured staff felt valued.

The service had reinstated a newsletter following feedback from staff and were developing more opportunities for staff to be involved in service development by expanding communication meetings and establishing a staff forum.

Staff spoke positively about the training provided with almost all training being delivered face to face. Staff confirmed this suited their learning style and met their professional development needs. Managers maintained oversight of completed training and a structured training plan. This meant people could be confident the staff team had the appropriate support, skills and knowledge to meet their needs.

Staff wellbeing was prioritised and the service encouraged staff to routinely attend the community base to connect with each other and access senior staff. Staff also confirmed they felt valued by opportunities for them and their families to enjoy social events such as Christmas parties, barbecues and pamper days. This contributed to a feeling of belonging to a community.

How well is our care and support planned?**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 service had recently adopted an electronic assessment, personal planning and rostering system.

Staff were becoming more familiar and confident in its use and developing its functionality to suit the service's needs.

Personal plans were person centred and identified people's health and social care needs, and the support they required in order to meet these well. This included how people liked to be supported with daily routines, their preferences around food and their environment as well as guidance to support mobility and to get out and about in the community. This meant people could be confident their support arrangements were right for them. Work was ongoing to ensure consistency of assessment and personal planning recording.

Regular care reviews and key group meetings provided updated information, reflecting any changes to support needs or delivery. Resulting actions were appropriately recorded and completed. This promoted transparency, facilitated informed decision-making, and helped track progress made in meeting people's personal outcomes. We advised that review minutes should be better used to celebrate and share people's progress and outcomes achieved. The manager was receptive to this suggestion and planned to review this as part of ongoing quality assurance processes.

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 service provider should ensure that any adult support protection incident is reported to the Care Inspectorate in line with the guidance - Records that all registered care services (except childminding) must keep and guidance on notification reporting (amended 30 April 2020).

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 evidence, guidance and best practice" (HSCS 4.11).

This area for improvement was made on 14 August 2023.

Action taken since then

The service had implemented a robust oversight and analysis procedure relating to all protection concerns. The manager reviewed incidents regularly and actioned any areas as needed to mitigate and manage risk. Timely notifications to the Care Inspectorate allowed further monitoring and support of any protection concerns to help keep people safe.

This area for improvement has been met.

Previous area for improvement 2

To ensure people are adequately protected, the service provider should develop robust risk assessments when staff support people including the handling of finances. These should detail measures in place to protect both the person being supported and staff.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that: "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 14 August 2023.

Action taken since then

The service had developed a financial support protocol which supported staff to help people manage their finances where appropriate. This directed staff to relevant organisational policies and procedures for reference. Further work was ongoing to ensure associated risk assessments were specific to individuals affected. This helped to ensure people could maintain as much independence as possible with their finances, budgeting and spending of monies within agreed budgets.

This area for improvement has been met.

Previous area for improvement 3

The service provider should ensure that there is a consistent approach adopted to ensure that staff receive supervision aligned to organisational policy.

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 2 October 2019.

Action taken since then

The service had developed robust oversight of staff learning and development needs and ensured formal opportunities were scheduled for people to meet with senior staff. Supervision opportunities were reported to be meaningful and collaborative. The manager further monitored the process to evaluate effectiveness and ensure it was of value to all involved. This ensured supervision procedures were aligned with organisational policy and best practice.

This area for improvement has been met.

Previous area for improvement 4

The provider should develop a coherent system which helps the management team have a clear overview of performance in key areas including but not limited to missed visits, medication audits, staff supervision and development and people's reviews. This information should also be used to shape the service improvement plan.

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 2 October 2019.

Action taken since then

The service had developed oversight functions and the management team routinely analysed and evaluated all key areas of service delivery including accidents, incidents, audits and any protection concerns. Following analysis appropriate actions were taken and this impacted positively on peoples outcomes and experiences. The service improvement plan and self evaluation process ensured any outstanding areas for development were prioritised.

This area for improvement was met.

Previous area for improvement 5

Individuals should be involved in reviewing their support plan at least once in a six month period. Plans should be signed by the individual showing that they are in agreement with the plan.

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).

This area for improvement was made on 2 October 2019.

Action taken since then

The service electronic assessment and planning process ensured reviews were recorded and monitored by senior staff. We had discussions with the manager about strengthening evidence relating to small number of situations where reviews were delayed due to service users personal commitments. The manager committed to ensure all efforts are made to meet with people when convenient to them and ensure records reflect review of support arrangements at the earliest opportunity .

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.

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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Contact us

Care Inspectorate
Compass House
11 Riverside Drive
Dundee
DD1 4NY

enquiries@careinspectorate.com

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