

## Moray Services (Housing Support) Housing Support Service

Cornerstone  
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Elgin  
IV30 1BS

Telephone: 01343 559 337

**Type of inspection:**  
Unannounced

**Completed on:**  
22 December 2025

**Service provided by:**  
Cornerstone Community Care

**Service provider number:**  
SP2003000013

**Service no:**  
CS2004073008

## About the service

Moray Services (Housing Support) provides a care at home and housing support service to adults with learning disabilities living in their own homes. At the time of this inspection, there were 17 people living in shared accommodation across five properties in Elgin.

## About the inspection

This was an unannounced inspection which took place on 17 and 18 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.

In making our evaluations of the service we:

- Spoke with nine people using the service.
- Spoke with 10 staff and management.
- Received questionnaires from four people or families who used the service.
- Observed practice and daily life.
- Reviewed documents.

## Key messages

- People enjoyed a range of activities reflecting their individuality.
- People were supported to be as independent as possible.
- Changes to people's health and wellbeing were dealt with quickly.
- There were concerns about the availability of activities in the evening and weekends.
- Management availability for the service had improved.

## 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
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 happy and content with the care and support they received. The service demonstrated a person-led approach with staff working with people to ensure their support was reflective of people's wishes. As a result, people were respected and treated with dignity.

People were supported to lead lives which reflected their preferences and interests. Activities such as day centres and swimming were available, which were very much enjoyed. People were actively encouraged to be involved with the running of the houses, such as cleaning, meal planning and activities. This meant people felt part of a community. Families said that care and support were very good, with one relative saying the care and support was "spot on." While overall feedback was positive, some families expressed concerns about reduced activities during weekends and evenings. We discussed this with the service and encouraged the service to continually review people's outcomes to ensure people receive support that meets their needs.

When people's health needs changed, staff were quick to identify changes and seek support. Appropriate referrals to professionals were made, and outcomes were recorded. For example, speech and language therapy (SALT) referrals were completed and a referral to occupational therapy for seating to support safe moving and handling. People were supported to attend medical appointments with any outcome of these appointments documented well. Medication systems were robust, ensuring people received the right medication at the right time. Therefore, people could be confident that their health and wellbeing was well managed.

People were involved in meal planning, and appropriate risk assessments were in place, for example altered diet or risk of choking. It would be beneficial to have these assessments within the kitchen for all staff, including new or agency workers to access.

People finances were well managed with daily checks and clear records of money coming in and out. This meant people were kept safe from financial harm.

## 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 quality assurance systems had continued to improve. Each house had a service improvement plan, which showed areas for improvement. For example, improvement to daily recording and ensuring people have the ability to provide feedback on the service. This meant people could be confident the service were working to continually improve the quality of the service.

Medication, accident incidents, and audits were in place, showing how the service responded to these, and lessons learned to mitigate in the future.

There was now a document that showed management oversight for each house. This took into account the level of needs of each house, skill mix of staff and the management hours required to ensure people and staff were supported well. Whilst this had improved, the registered manager was covering another of the provider's services. The provider should continually review any impact this may have on the service.

### How good is our staff team?

**5 - Very Good**

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

Staff enjoyed supporting people. We observed lovely interactions between people and staff. Staff were respectful and recognised they were working in people's homes and lives.

Whilst there appeared to be sufficient staff to meet people's needs, there were concerns about lone working and how this impacted on people's care and support, predominantly at weekends. We were assured by the service that this was being reviewed with adverts to recruit new employees.

Staff were very positive about the training they received, for example, epilepsy and rescue medication and positive behaviour support training. One staff member told us they felt confident within their role due to training, and another said the training was interesting. This meant people could be assured staff were well trained.

Supervision was held regularly, with staff encouraged to come to supervision with items for discussion for example, practice issues. Staff also received practice observations, for example medication and activities. As a result, staff kept their skills up-to-date.

Staff felt management support was better and there was always someone to call if there was a concern that could not be dealt with in the service.

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

**5 - Very Good**

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

People had support plans which outlined their needs and how these should be met. The plan gave a good sense of people, for example their likes, aspirations and goals, such as attending a concert.

People's health and wellbeing were well documented which enabled staff to provide the right support at the right time.

There was appropriate legal documentation held within the plans including a document which explained the powers people's guardians had. Therefore, staff had quick access if required.

People and their families were involved in regular reviews, with their views and wishes discussed. As a result, people were able to decide how their care was planned.

The provider is moving to an electronic care planning system, and we will review at future inspections.

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

### Requirements

#### Requirement 1

By 1 February 2024, the provider must demonstrate that the management team have sufficient time allocated to each accommodation to ensure people experience high quality care and support.

To do this, the provider must, at a minimum:

- a) Demonstrate that in determining the management arrangements they have considered the impact of staffing, including the knowledge, skills, experience and numbers of staff, supervision of staff, performance of the different services, geographical spread, complexity of people's needs, the number of different services and the views of the staff and people they support.
- b) Ensure that the management arrangements have sufficient oversight and flexibility to recognise and respond when a service needs additional support.
- c) Determine a minimum amount of time the management team are expected to spend in each service to provide the oversight required to ensure continuous improvement and positive outcomes for people.

This is to comply with Regulation 4(1)(a) of The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/210).

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

'I use a service and organisation that are well led and managed' (HSCS 4.23).

**This requirement was made on 5 November 2024.**

#### Action taken on previous requirement

There had been improvements to management arrangements. Sufficient time had been allocated to each accommodation. Please see key question 2 'How good is our leadership?'

**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

to promote safe and positive outcomes for people, the provider should ensure people's needs are met by the right number of staff.

This should include, but not limited to, reviewing the minimum levels of staffing as indicated in their contingency arrangements, to ensure there are sufficient staff to meet people's assessed needs and agreed support plans. They should keep a record of when the contingency plans are used and use this information to determine the impact on the quality of people's care.

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

'My needs are met by the right number of people' (HSCS 3.15).

**This area for improvement was made on 5 November 2024.**

#### Action taken since then

There has been an improvement in recording the movement of staff to ensure there is the minimum levels of staffing as indicated in the service's contingency plans. The information enabled the provider to continue the conversations to ensure people's needs are met by the right number of staff.

**This area for improvement has been met**

### Complaints

## 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
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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