

# Enable Scotland (Leading the Way) North-East Support Service Support Service

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Unannounced

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8 January 2026

**Service provided by:**  
Enable Scotland (Leading the Way)

**Service provider number:**  
SP2003002584

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CS2025000146

## About the service

Enable Scotland (Leading the Way) North-East Support Service is a newly established service that began operating on 1 April 2025. It is a branch of the national care provider Enable Scotland (Leading the Way).

The service took over the delivery of care and support from a previously operating provider and continues to provide services across both Aberdeenshire and Dundee. The existing staff team transferred to the new service, ensuring continuity of care and support for people.

The service offers care at home and support in the community for children, adults and older people. Personal assistants support people with learning disabilities, physical disabilities, mental health issues and additional needs.

At the time of the inspection, the service was supporting 72 people.

## About the inspection

This was an unannounced virtual online inspection which took place on 7 and 8 January 2026. The inspection was carried out by three inspectors 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:

- had contact with five people using the service and six of their family
- had contact with 14 staff and management
- had contact with five professionals
- reviewed documents.

## Key messages

- Communication had improved, meaning people knew who to contact, helping care to be more responsive.
- Staff experienced more meaningful supervision, which strengthened their confidence and supported more person-centred care.
- Learning from incidents and complaints had improved, enabling the service to reduce recurrence and enhance future care.
- Staffing oversight and contingency planning needed to be strengthened to support well-coordinated care.
- Personal plans and records were not always familiar or accessible to people, which meant care might not always reflect their preferences.

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

### Requirements

#### Requirement 1

By 19 August 2025, the provider must ensure that communication with relevant others is effective, timely and supports safe, person centred care.

To do this the provider must, at a minimum:

- a) Ensure timely and responsive communication with families, carers and professionals involved in people's care.
- b) Provide clear and consistent updates to relevant others about changes in care arrangements or support needs.
- c) Establish systems that enable people using the service and their representatives to easily contact the service and receive prompt responses.
- d) Ensure staff are supported to share relevant information with others involved in care, while maintaining confidentiality and respecting people's preferences.

This is to comply with Regulation 4(1)(a) (Welfare of users) of The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/210) and Section 7 of the Health and Care (Staffing) (Scotland) Act 2019 Section 7(1)(a) and 7(1)(c).

This is to ensure 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); and

'I am confident that people respond promptly, including when I ask for help' (HSCS 3.17); and

'I am supported to communicate in a way that is right for me, at my own pace, by people who are sensitive to me and my needs' (HSCS 2.8).

**This requirement was made on 27 June 2025.**

#### Action taken on previous requirement

Communication had improved. Daily management oversight, clearer contact routes, and a dedicated email inbox meant people and families were more likely to receive prompt updates. Most people told us responses were quicker, and staff described greater accessibility of managers, with more regular opportunities to raise issues and receive feedback. Call-logging processes were more reliable, reducing the risk of missed messages. These changes increased consistency in everyday communication. People also received better advance notice of changes, which increased predictability and reduced anxiety. Furthermore, most professionals reported more timely updates. These actions strengthened communication and contributed to safer, more person-centred care.

**Met - outwith 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 support safe and person centred care, the provider should strengthen staffing oversight and contingency planning. This should include, but not be limited to, avoiding missed visits, clearly communicating temporary cover arrangements, and ensuring digital systems used to monitor staffing are reliable and accessible to all staff.

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

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

"I experience consistency in who provides my care and support." (HSCS 4.16)

**This area for improvement was made on 27 October 2025.**

#### Action taken since then

People's care visits were more consistent. Daily management meetings were supporting better identification of staffing risks, rotas were issued earlier, and agency cover was arranged more consistently. People also described more reliable support, even during challenging periods. As a result, staffing arrangements were more stable and visits were less likely to be disrupted. However, digital logging systems remained unreliable, rota changes were sometimes last-minute, and some staff said scheduling queries were not always picked up quickly. These gaps sometimes affected the consistency and predictability of some people's support.

**This area for improvement has not been met.**

#### Previous area for improvement 2

To improve safety and outcomes for people, the provider should strengthen how it analyses and shares learning from complaints, incidents and investigations to prevent recurrence and support reflective practice. This is to ensure care and support is consistent with the Health and Social Care Standards (HSCS), which state:

"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 27 October 2025.**

#### Action taken since then

Learning from complaints and incidents had improved. Managers analysed themes more systematically and shared learning through meetings, supervision and email updates. Logs showed timely escalation and follow-up, and managers described how this information informed changes in practice. These developments strengthened how the service identified issues, learned from them and prevented recurrence. This meant people were more likely to experience consistent, safer care informed by timely learning.

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

## Previous area for improvement 3

To ensure people experience consistent, safe and high quality care, the provider should ensure all staff receive regular, meaningful one to one supervision that supports reflection, professional development and confidence.

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

"I am supported to understand and uphold my rights." (HSCS 2.3)

"I have confidence in people because they are trained, competent and skilled." (HSCS 3.14)

**This area for improvement was made on 27 October 2025.**

### Action taken since then

Staff were experiencing improved supervision. A supervision tracker was maintained, and most staff had received recent one-to-one or group reflective sessions. Staff described feeling more supported, and managers were more visible and available to discuss practice. The content of sessions encouraged reflection and professional development, giving staff clearer guidance about their role and expectations. This increased staff confidence, which helped people experience more consistent and well-informed support.

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

## Previous area for improvement 4

To support people's health and wellbeing and improve the quality of their support, the provider should ensure that all documentation relating to people is accurate, up to date, accessible and clearly reflects their current needs, preferences, future wishes and legal status.

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

'My needs, as agreed in my personal plan, are fully met, and my wishes and choices are respected' (HSCS 1.23); and

'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 27 June 2025.**

### Action taken since then

Personal plans were in place for each person using the service. Several people told us they had not seen their care plans or review documents, and staff confidence in the accuracy of people's plans was mixed. Although audits had commenced, these had not yet resulted in consistently accessible or reliable records. As a result, people could experience care and support that does not fully reflect their current needs or preferences.

**This area for improvement has not 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).

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