

The Inclusion Group Support Service

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Type of inspection:
Unannounced

Completed on:
2 February 2026

Service provided by:
The Inclusion Group (Dundee)

Service provider number:
SP2003003810

Service no:
CS2003016778

About the service

The Inclusion Group provides social and community support to individuals within their local communities to help them engage with activities they enjoy and live a full life

The service aims to provide quality support to enable each individual to live their life as independently as possible whilst maintaining control of their life.

About the inspection

This was an unannounced insert inspection type which took place between 29 January 2026 and 02 February 2026. The inspection was carried out by 1 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 7 people using the service and 7 of their family. We also received feedback on behalf of 4 people using the service through surveys.
- spoke with 9 staff and management. We also received feedback from a further 7 staff through surveys.
- observed practice and daily life.
- reviewed documents.
- spoke with visiting professionals.

Key messages

- People enjoyed a wide range of activities that had an emotional and physical benefit to their wellbeing.
- People were supported to express their views by a staff team who knew them well.
- Improvements are required around infection prevention and control - specifically hand hygiene.
- Improvements are required in relation to recruitment and registration of new staff.
- The managers were committed to developing the service and should work on doing so in consultation with stakeholders.

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?	4 - Good
How good is our staff team?	3 - Adequate

Further details on the particular areas inspected are provided at the end of this report.

How well do we support people's wellbeing?

4 - Good

We evaluated this key question as good where several strengths impacted positively on outcomes for people and clearly outweighed areas for improvement.

People were supported by a staff team who knew them well. We observed many happy interactions where people were encouraged and supported to make choices. Staff were discrete and respectful when prompting people to express their views. This helped to ensure that peoples were involved and consulted about their support.

Because staff knew people well, they were able to notice changes to people that required referral from other professionals' families told us 'they know them inside out'. Other professionals told us they had good experiences working with staff. 'The service really understand the service users needs and are person centric in their approach.' 'Inclusion group liaise with family and other health care professionals regarding persons care'. This helped to ensure that peoples health and wellbeing benefitted from advice from the right people at the right time.

People enjoyed a range of activities. Many of these activities as well as being fun for people encouraged movement and exercise which was beneficial to both emotional and physical wellbeing. For example football, bowling and swimming.

The Provider had introduced an electronic care planning programme since our last inspection. Personal plans viewed were strengths led and person-centred focussing on what people could do and liked to do for themselves. Risk assessments had been completed to highlight any risks and how to minimise the risk of harm for people. Whilst most of the information was available electronically there was still some work to do to ensure that information was complete. Some documents were still only available as a paper format. It was positive to hear from families that they can access information about their relative in 'real time' so this had helped to improve communication and inclusion. Managers need to ensure that staff can access full information to help support people safely.

Whilst it was recorded within plans where people may require support to move and the use of any aids, further more detailed assessments are required in order to ensure people are supported consistently and safely.

People were supported to make healthy choices when planning and preparing meals. Staff helped people to prepare packed lunches at home and offered advice and guidance when purchasing meals from local shops. This impacted positively on peoples wellbeing and also enabled people to learn and develop skills in this area.

People were supported by small teams of staff. Team meetings were therefore focussed around the person and their needs - this helped to ensure consistency and understanding about peoples needs and their support. We suggested that the person and/or their family could be more involved in these meetings and their views reflected in the discussion and plans. This would help to evidence more clearly how people are consulted and involved in shaping their care and support.

Reviews of support plans involved the person and their relative where appropriate. Sometimes these reviews were incorporated into a wider review with other agencies and professionals. The manager should ensure it

is clear how peoples support plans with The Inclusion Group. The Inclusion group support plan is reviewed within staff should ensure the support plan for the Inclusion group is represented and reviewed within regulatory timeframes.

Where protection concerns, staff were informing the right people. The manager should however ensure a corresponding notification is made to the Care Inspectorate.

Staff were aware of the current guidance in relation to keeping people safe through robust infection prevention and control procedures. It was disappointing however to see that staff were not following the recommended guidance for hand hygiene and a number of staff were wearing nail products. This presents a risk to people not only in relation to infection prevention and control but also in relation to their health and safety which is clearly described in the providers own policies and procedures. See area for improvement 1.

Areas for improvement

1. In order to ensure that people are protected from the risk of infection, you the provider should ensure that staff practice reflects the current infection prevention and control guidance. This includes but is not limited to ongoing monitoring of hand hygiene processes including nail products and jewellery. This is to support people's health and wellbeing.

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

How good is our staff team?

3 - Adequate

We considered two quality indicators under this key question. We considered how well staff were recruited (Quality Indicator 3.1) and this resulted in an evaluation of adequate. We also considered if staffing arrangements are right and staff work well together (Quality Indicator 3.3) and evaluated this element as good. The overall evaluation however is adequate.

We could not confirm that the principles of safer recruitment were being implemented consistently. Some staff had commenced in employment supporting people without the required PVG check. The management team were unaware that this had been a legal requirement following the implementation of Disclosure (Scotland) Act 2020 which was introduced as of 01 April 2025. This could put people at risk. See requirement 1.

Staff described a good induction which included some essential training. This helped prepare staff for their roles and helped to ensure people who used the service received good support.

The probationary period for new staff could be improved with more structured meetings with new staff on a regular basis and discussion about training to be completed within set timescales. This would provide an opportunity to consider staff knowledge and understanding of training events and how this should impact positively on outcomes for people.

It was positive to see that staff were prompted and supported to apply for registration with the Scottish Social Services Council (SSSC). We highlighted one member of staff who had not submitted an application within the required timeframe of three months. The manager needs to ensure that there are processes in place to highlight occurrences such as this and take appropriate action to manage them. See requirement 1.

Inspection report

People we spoke to during this inspection told us;

- 'Staff are tip top'
- 'Staff are all really supportive'
- 'My relative just loves everyone'

People were generally supported by small teams of staff. People told us that there were consistent staff supporting their relatives who were familiar with their needs and preferences. New staff were introduced to people through 'shadow shifts' and one relative told us this was an opportunity to see if the staff member was going to 'fit' and get on with their relative.

The ethos of the service is about inclusion and participation. Staffing arrangements are made around a range of activities both 1:1 and group events. One person told us how their relative had been involved in an activity that fell outside their support hours but staff knew they would enjoy it so had made the arrangements for them to join in too.

Staff had received a range of training including around areas that were specific to peoples needs. Observations of practice help to ensure that training is impacting positively on staff practice and therefore outcomes for people who use the service. We suggested to the management team that a more structured approach to observations would be of benefit making sure all staff are observed and that this links directly to their supervision.

Out with office hours, the staff had access to managers through an 'on call' arrangement. One staff member told us they were reluctant to use the 'on call' as they did not feel it was supportive and that managers would not provide practical support including during difficult situations. The management team agreed they would consider this further and we suggested they consider a formal process for meeting with staff to 'debrief' and discuss difficult situations and lessons to learn.

People using the service experienced compassionate and friendly support because there were good working relationships between staff. There was good communication and team working within the service. Staff told us they felt very supported in their roles and found the manager approachable and responsive. This showed commitment and ensured staff work well as a team to benefit people.

Staff told us, 'its a good team' and 'we work well together', 'communication is good - always someone to talk to'.

It would be a good development to consider how to capture feedback from people about staff and staffing arrangements and how this could lead to a more consultative procedure for recruitment and review.

Requirements

1. By 31 March 2026, the provider, must ensure that people are kept safe by ensuring;

- people are supported by staff who have been recruited in line with best practice and current legislation in Scotland.
- that staff are aware of their responsibilities to apply to register with the Scottish Social services Council (SSSC) and to be registered within set timescales.

This is in order to comply with Regulation 9 (SSI 2011/210) of The Social Care and Social Work Improvement Scotland (Requirements for Care Services Regulations 2011).

This is also to ensure that care and support is consistent with the Health and Social Care Standards (HSCS), which state that: 'I am confident that people who support and care for me have been appropriately and safely recruited' (HSCS 4.24).

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?	4 - Good
1.3 People's health and wellbeing benefits from their care and support	4 - Good

How good is our staff team?	3 - Adequate
3.1 Staff have been recruited well	3 - Adequate
3.3 Staffing arrangements are right and staff work well together	4 - Good

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