

New Directions West Lothian - Housing Support Housing Support Service

Bloom House
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Livingston Village
Livingston
EH54 7AF

Telephone: 01506 464 446

Type of inspection:
Unannounced

Completed on:
12 February 2026

Service provided by:
New Directions West Lothian

Service provider number:
SP2003002582

Service no:
CS2017362905

About the service

New Directions West Lothian Housing Support and New Directions Community Support Services are registered with the Care Inspectorate to provide housing support and care at home services. The services are delivered together and are regulated and inspected as combined services.

New Directions provides individual and group support to people with learning disabilities, physical disabilities, and other support needs. The service is provided within people's own homes and in the wider community, including the provider's premises at Bloom House. People are supported with a range of activities and developing skills to live as independently as possible.

There were 60 people receiving a service at the time of the inspection.

About the inspection

This was an unannounced inspection which took place on 11 and 12 February 2026. 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:

- spent time with 12 people who were being supported at Bloom House
- received feedback questionnaires from 11 people who receive support and their family
- spoke with, and received feedback questionnaires from, 19 staff and management
- observed activities and practice within Bloom House
- reviewed documents
- received feedback questionnaires from three supporting health and social care professionals.

Key messages

- People were supported to take part in meaningful activities that reflected their interests and aspirations. This was contributing to positive outcomes for people.
- People were supported by small and consistent staff teams, where relationships were well established and trusting.
- Personal plans were individualised and reflected people's personalities. Work was required to develop risk assessments and ensuring reviews were completed regularly.

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?	4 - 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 found significant strengths in the care provided and how these supported positive outcomes for people. Therefore, we evaluated this key question as very good.

People experienced positive outcomes from the support provided by New Directions. Through our observations and conversations with people, we noted that individuals engaged well with the service, enjoyed their support, and expressed clear satisfaction with the support available to them. Some of the feedback that we received included:

- "My support workers are extremely good with me and they are great at reassuring and helping me."
- "I enjoyed going away on holiday and the activities I do."
- "New Directions have went out of their way to give us the utmost support in every way possible. I cannot praise them enough."

There was a strong sense of respect, with everyone being valued. Staff took time to involve people meaningfully, listening to their views and encouraging them to lead and make decisions about their support. This contributed to people developing self determination skills and a sense of self worth.

People were supported to take part in meaningful activities that reflected their interests and aspirations. Activities included physical exercise, leisure pursuits, learning new skills, and social opportunities. Seasonal events were also arranged, bringing together people supported by the service, their families, and staff. The service demonstrated a clear commitment and understanding of the importance of being active and the positive impact this has on people's health and wellbeing.

The service was managing risks effectively, with a focus on enabling people rather than limiting them. We observed a positive, proactive approach that supported individuals to take part in activities that were important to them, with appropriate strategies in place for staff to follow if challenges arose. This meant that people's activities were not unnecessarily restricted and that they were safely supported to participate in the experiences they enjoyed.

The service was proactive in promoting wellbeing. Staff knew people very well, with detailed knowledge of individuals' needs, preferences, and communication. The team was alert and responsive to changes in people's health, raising concerns promptly and appropriately. People and their families felt confident that their wellbeing needs were recognised and prioritised.

How good is our staff team?

4 - Good

We evaluated this key question as good. There were several important strengths with staffing which taken together impacted positively on outcomes for people and clearly outweighed areas for improvement.

People were supported by small and consistent staff teams, where relationships were well established and trusting. Care was taken to ensure a good match between individuals and their staff. People and their relatives spoke very highly of the staff team and expressed confidence in the support provided.

Staff were well trained and described feeling confident in their roles as a result of the training available to them. We noted that child protection training was overdue for most staff, however upcoming training had been arranged. The service was ensuring staff were meeting the training requirements for professional registration, as well as specialist training tailored to the needs of the people being supported. This approach meant that people could be confident that staff had the necessary knowledge and competence.

The team were well supported in their roles. A range of supervision and support opportunities were in place including one-to-one meetings, competency observations, and team meetings. Records showed that staff were encouraged to reflect on their practice and personal development. This supported staff to grow in their roles and contributed to them feeling valued.

At the last inspection, we noted occasions where the service had difficulty meeting all required support. We observed progress in reducing cancelled support, which was confirmed by some family members, with one who said "[it] has been much better with little cancellations of service. Staffing [for my relative] has become much better." However, we continued to see some cancellations and one person told us "planned support has been cancelled on multiple occasions due to staff sickness and holidays." We discussed with the service the impact that cancellations could have, including people feeling disappointed and the potential for increased carer stress when families were not receiving the respite they required. The service was recruiting additional staff and working to minimise cancellations. Additionally, the deputy manager was providing support, using their knowledge of people to minimise disruption. The manager agreed to continue monitoring staffing arrangements and visit times to ensure that staff deployment was prioritised in a way that met people's needs. We will check on this at future inspections.

How well is our care and support planned?

4 - Good

We evaluated this key question as good. There were important strengths in planning care and support which impacted positively on outcomes for people and clearly outweighed areas for improvement.

Support plans were personalised. People, along with their relatives or representatives, were involved in shaping their support plans. These plans reflected each person's personality, what mattered most to them, and included clear guidance on how best to communicate with each individual. This meant that staff had person-centred information and could provide support in a way that respected people's wishes.

Staff knew people well and were managing risks effectively in practice. However, further development of risk assessments was needed to ensure they clearly outlined how risks should be managed and minimised. The staff team were already working on updating and further personalising support plans and we discussed incorporating improved risk assessments as part of this work. We look forward to seeing progress at future inspections.

There was a good overview of each person's support, with individuals and their relatives or representatives involved in review processes. However, we noted a small number of support plan reviews that were overdue, creating a risk that staff may not always have the most up-to-date information. While we observed minimal changes in people's support needs and saw evidence of ongoing discussion within team meetings, we asked the service to ensure reviews take place at least every six months, or more frequently if a person's support needs change. Progress will be checked at the next inspection.

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 people to be included and involved in their care, the provider should improve how they communicate with people about changes to their care and any relevant events. This should include, but is not limited to, communicating with people verbally and in writing to ensure that information is shared accurately.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that: 'My views will always be sought and my choices respected, including when I have reduced capacity to fully make my own decisions' (HSCS 2.11).

This area for improvement was made on 13 December 2024.

Action taken since then

The service was sharing event information and recording when there were changes made to people's care and support. This included staff sharing information when visiting and offering support.

We observed improvement in written records of where changes to people's care and support has been communicated with people and their families.

This area for improvement has been met.

Previous area for improvement 2

To support people to be confident in their care, the provider should respond to all complaints and concerns effectively. This should include, but is not limited to, signposting people to the service complaints policy and procedures.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that: 'If I have a concern or complaint, this will be discussed with me and acted on without negative consequences for me' (HSCS 4.21).

This area for improvement was made on 13 December 2024.

Action taken since then

We observed that the service had appropriate systems and procedures in place to respond to complaints and concerns. The service was managing concerns and complaints effectively.

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?	4 - Good
3.3 Staffing arrangements are right and staff work well together	4 - 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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