

Trust Housing Association Ltd - Branch 5 Housing Support Service

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Unannounced

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Service provided by:
Trust Housing Association Ltd

Service provider number:
SP2003000174

Service no:
CS2022000082

About the service

Trust Housing Association Ltd - Branch 5 is registered to provide a housing support and care at home service to people with support needs living in their own homes. The provider is Trust Housing Association Limited. At the time of the inspection, the service supported people to live in their own homes within later living housing, sheltered and supported housing developments across Scotland. The service had a head office based in Govan, Glasgow.

About the inspection

This was an unannounced inspection which took place between 23 February to 27 February 2026 between 09:00 and 17:00 hours. Seven inspectors carried out the inspection. We visited developments in Ayr, Dumfries, Girvan, Glenluce, Greenock, Newton Stewart, Stranraer, and Thornhill.

To prepare for the inspection we reviewed information about the service. This included, registration and complaints information, information submitted by the service and intelligence gathered throughout the inspection year.

To inform our evaluation we:

- spoke with 57 people using the service and six relatives
- spoke with 26 staff including management
- Spoke with six visiting professionals
- observed practice and daily life
- reviewed feedback from 51 pre-inspection questionnaires from people using the service, family members, visiting professionals, and staff
- reviewed documents.

Key messages

- People were respected and treated with dignity.
- Staff were kind, caring and compassionate.
- Families were complimentary about the quality of care their loved ones received.
- People were supported by the right number of staff at times that were convenient to them.
- Care plans should be consistent across all developments; person centred and include appropriate risk assessments.

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 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.

Staff consistently demonstrated the Health and Social Care Standards (HSCS) in their daily work, helping to create an atmosphere of warmth, respect, and commitment to delivering high quality care. One person told us, "Staff are amazing, they always look out for me" while another shared, "Nothing is ever a bother, and I enjoy the activities, they keep me going." Throughout the inspection, staff engaged with people politely and respectfully, showing a strong understanding of each individual's needs.

Relatives told us that the service had been a great addition to their lives. One person said, "It's a great service, no complaints" while another shared, "Mum is happy here, she has her independence and that is what matters." Visiting professionals also told us that staff in developments were "Consistently proactive, communicative and responsive." Staff demonstrated good knowledge and understanding of people's needs and worked effectively as a team, raising concerns appropriately. We observed this ourselves during the inspection, which evidenced responsive care and support.

A wide range of social events and activities were available across the developments, and these had a clear, positive impact on people's wellbeing. Activities included seasonal celebrations, coffee afternoons, entertainers, fish supper nights. Staff made every effort to ensure as many people as possible could take part. People spoke highly of these opportunities, one visiting professional shared, "The energy the staff bring and the different things they help to facilitate really lifts people's mood."

People were supported and encouraged to engage in their community, and we observed several instances where staff played an active role in this. These opportunities to meet others, socialise, and stay active helped promote and maintain people's overall health and wellbeing.

There were effective systems in place to ensure the safe management of people's medication, helping individuals receive the correct medication at the right time. People were supported to retain as much control over their medication as possible. Regular communication with individuals helped maintain safe practices while also promoting independence. This ensured that any treatment or intervention provided was both safe and effective. Staff training had recently been strengthened that enhanced staff skills and confidence.

Transparent reporting procedures were followed, and all notifiable events were shared with the Care Inspectorate or relevant professionals. Staff acted promptly to identify risks and escalated concerns when they could not maintain safety due to health changes or increased needs. This demonstrated responsive and effective care and support.

How good is our staff team?

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.

Positive morale was evident throughout the service, with staff describing their work as rewarding and expressing that people were treated like family. One staff member told us, "Trust is a great place to work;

you are valued and treated with respect." Another shared that they take great pride in supporting people. During the inspection, we observed strong communication between management, staff, and relatives. Supportive and visible leadership enabled staff to deliver high quality care to individuals and their families.

People could be confident that staff were recruited safely in line with national guidance with appropriate checks, references, and professional registrations. Training was comprehensive, combining in-person sessions, e-learning, and self-development, with regular refreshers and observed practice to maintain high standards. All staff received training appropriate to the needs of the people they cared for. This ensured staff continued to have the skills to meet people's changing care needs.

The staff team worked effectively together, demonstrating respectful communication that fostered a warm and positive atmosphere. Strong working relationships were evident, and staff showed initiative in developing a deeper understanding of each person's needs.

Rotas showed that people were consistently supported by familiar staff, with the appropriate number of staff available at the right times to promote continuity and strong relationships. Rotas were planned in advance, taking into account the needs of both staff and the people they supported.

Staff wellbeing was a clear priority, and the management team recognised the complex and constantly evolving nature of the service. Staff were provided with regular opportunities during team meetings and supervision sessions to discuss their wellbeing and development needs. They also had access to an Employee Assistance Programme offering counselling and wellbeing support. Management explained that supervision documentation was being redesigned to further embed staff wellbeing and incorporate observations of practice. This aimed to help identify key development areas and strengthen staff knowledge and skills. By creating a positive working environment where staff felt supported and their contributions were valued, the service sustained high levels of morale and performance.

How well is our care and support planned?

4 - Good

We evaluated this key question as good because there were a number of major strengths which, taken together, clearly outweighed any areas of improvement.

Personal plans, often referred to as care plans, are important documents that capture people's wishes, needs, risks, and how people want to be supported. Sampling care plans across all developments each person had their own care plan, however the quality varied. We saw some plans were detailed, covering people's interests, needs, and health risks well. However, there was evidence of gaps in some care plans and risk assessments, where the detail was brief and lacked person centred elements. It is essential that appropriate risk assessments are in place across all developments, particularly for individuals with diagnosed mental health conditions or cognitive decline, to ensure the safety of both people and staff and to support the best possible outcome.

Whilst many experienced staff knew people well, this lack of detail presented risk to people being supported by new or agency workers. We highlighted this to management, who agreed that improvements were required across all branch developments to achieve greater consistency in care planning (see area for improvement 1).

We were reassured that this is something management self-identified and recognised the importance of this work.

We encouraged continued enhancement of personal plans as needs and priorities change. This helps to ensure any staff member, including those less familiar with the individual, can provide safe, consistent, and high quality care.

A new digital system was in place for people's personal plans, though this remained in a period of transition. Management explained that ongoing developments were aimed at making the plans more accessible for people, staff, and agency staff. Agency staff did not have access to people's digital personal plans, which created a barrier. Agency staff relied on handover notes, the quality of which varied across developments. Management confirmed they were working towards a solution to make personal plans accessible to everyone.

Monthly wellbeing chats took place regularly with individuals, providing a valuable opportunity for people to reflect on what they were enjoying and identify any goals they wished to work towards. The information gathered fed into personal plans and review processes. Reviews of care had been completed, and staff told us this work was ongoing. The support provided by staff demonstrated structure and purpose for each person, encouraging independence and enabling individuals to maintain control over their own lives.

Areas for improvement

1. Care plans should be streamlined across all developments where they are person centred, accessible and appropriate risk assessments in place.

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) and

'I am supported and cared for sensitively by people who anticipate issues and are aware of and plan for any known vulnerability or frailty' (HSCS 3.18).

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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