

# Trindlemoss House Care Home Service

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Irvine  
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**Type of inspection:**  
Unannounced

**Completed on:**  
23 March 2026

**Service provided by:**  
North Ayrshire Council

**Service provider number:**  
SP2003003327

**Service no:**  
CS2019375323

## About the service

Trindlemoss House is registered to provide a care home service for up to six adults diagnosed with learning disabilities and/or autism. At the time of inspection six people were living in the home. Trindlemoss House is based in Irvine, North Ayrshire and offers accommodation in single person, self-contained flats with access to a garden area. Residents have access to support from staff throughout the day and night. The service is located near local amenities and people are supported to access their community.

## About the inspection

This was an unannounced inspection which took place between 18 and 23 March 2026. The inspection was carried out by two 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:

- spoke with five people using the service and two of their family members
- spoke with 11 staff and management
- observed practice and daily life
- reviewed documents
- spoke with visiting professionals

**Key messages**

People experienced positive outcomes because staff promoted independence, wellbeing, and meaningful engagement.

Staff built consistent, trusting relationships that promoted reassurance, reduced distress, and supported people to take part in community activities.

Leadership was strong, with effective quality assurance systems that supported safe practice and continuous improvement.

Staffing arrangements were stable, flexible, and person centred, ensuring people received the right support at the right time.

The environment was safe, comfortable, and personalised, contributing positively to people's routines and quality of life.

Personal planning was detailed and outcome focused, providing clear guidance that enabled consistent, tailored support.

**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 good is our leadership?	5 - Very Good
How good is our setting?	4 - 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.

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.

The service had adopted a social care approach that prioritised structure, meaningful engagement, and personalised support. Senior support workers led shifts, which improved continuity, ownership, and confidence within the team. This contributed to consistent practice and a clear focus on people's outcomes.

People benefited from coordinated multidisciplinary support. Almost everyone had involvement from psychiatry, and an external psychologist contributed regularly to planning and review. Staff understood and implemented detailed Positive Behaviour Support (PBS) plans well, and these supported people's emotional wellbeing and day to day stability. People also accessed other health professionals, including a dietician, speech and language therapist, and an epilepsy nurse specialist.

People benefited from attendance at a wide range of community-based opportunities such as drama, music, education, and structured daily activities.

Daily routines were shaped around meaningful engagement. The introduction of activity planners brought clarity and predictability, which significantly reduced stress and distress. People developed new friendships, improved tolerance, and increased their participation in community life. For example, one person who previously experienced high levels of anxiety was now more able to plan for social events, and knowing in advance which staff would support them helped increase their confidence.

The service promoted positive, person-centred risk taking. Staff looked for creative solutions that upheld independence and dignity. This included supporting one person through a planned environmental adaptation that reduced opportunities for self injury without limiting autonomy. As a result, people experienced more choice, control, and opportunities.

Staff responded promptly to changes in health. A recent health concern for one person showed strong assessment and escalation skills, leading to timely treatment. Support from familiar staff from the service during a period in hospital ensured continuity, reassurance, and safety at a critical time.

People and families told us the support they received had made a positive difference. One family member said, "My son is a lot calmer and happier now... the change is amazing. I'm so proud of him."

Overall, people experienced consistent, high quality support from a skilled and motivated team who promoted independence, maintained health needs, and ensured meaningful, person-centred care.

## How good is our leadership?

**5 - Very Good**

We found significant strengths in how quality assurance, oversight, and continuous improvement were led within the service, therefore we evaluated this key question as very good.

The service had a well established framework of audits, oversight systems, and monitoring tools that supported safe, effective, and consistent practice. A thorough and well-structured audit schedule was in place across key areas of practice providing strong management oversight. It was evident that the audits informed improvement. Clear action plans detailed individuals and timeframes for completion of action points where needed and the management team agreed to make this more accessible.

Monitoring of staff practice was robust. Training compliance was tracked through the providers learning platform, which alerted managers when courses were due. Supervision took place every six to eight weeks, and annual appraisals were completed. The strengthened supervision template promoted staff wellbeing and staff development through reflective practice. Team meetings had taken place more regularly and were action oriented, with sampled minutes showing a strong focus on improvement, organisation, communication, and wellbeing. This demonstrated a strong learning and development culture and gave assurance that staff worked to expected standards.

Providers are required to notify the Care Inspectorate of certain events. Notification guidance was shared with the service to reinforce transparency and regulatory compliance.

People can expect to have meaningful input to their care and support.

Appropriate communication aids were used to support people to express their views. This meant people felt listened to. This was demonstrated by an individual who shared that they enjoyed a party, and this was incorporated into their personal plan.

Overall, the service demonstrated strong governance, clear accountability, and effective leadership. Staff understood their roles, and there was a culture of openness, reflection, and continuous improvement.

We found significant strengths in how staffing arrangements supported positive outcomes for people therefore we evaluated this key question as very good.

The service had an appropriate and well-structured staffing model that ensured people received consistent, individualised support. Recruitment of new staff further strengthened stability and there were sufficient staff available to meet peoples assessed needs.

Staffing allocation was flexible and person-centred. Most people received 1:1 support, while some had enhanced staffing based on their needs. Activity planners helped coordinate personalised schedules and ensured people could take part in meaningful daily activities. The use of defined key teams promoted trusted relationships, and core teams were used effectively when people experienced periods of anxiety or challenge. While formal key team meetings were sometimes difficult to arrange due to shift patterns, staff used shared digital folders well to exchange updates and ideas.

Where vacancies or absences occurred, the service used regular bank staff and overtime to maintain continuity. Essential information was accessible to new and bank staff through clear "grab files." Each person had a senior support worker as key worker, ensuring oversight of reviews and consistent professional input. Experienced staff contributed strongly to allocation decisions and daily practice. This ensured staff were deployed appropriately to meet the needs of people supported.

Staff worked well together. Communication systems were well organised. Handover processes combined verbal updates, written notes, and coordination by shift leaders. Seniors used communication books, email updates, and daily folders effectively to maintain safe and consistent information sharing. This kept staff well informed.

Interviews with staff at all levels reflected a cohesive, motivated, and values-driven team. Staff described strong teamwork, a positive culture, and a shared sense of purpose. One staff member told us 'Trindlemoss is a really supportive, helpful environment. I feel excited to come to work and I am happy when I am here'.

Several staff commented on the significant shift toward meaningful activity, positive risk-taking and relationship-based support. Newer staff spoke highly of their induction, the supportive environment, and the visible, responsive leadership. This helped ensure staff were well prepared for their role. Many described the service as a positive place to work and highlighted how this directly enhanced the experiences of people living there.

Overall, staffing arrangements ensured continuity, predictability and personalised support.

The strong induction processes, ongoing training, effective communication, and supportive culture contributed significantly to the very positive outcomes people experienced.

## How good is our setting?

4 - Good

We found several important strengths in how the environment supported people's safety, comfort, and quality of life. These strengths clearly outweighed any areas for improvement therefore we evaluated this key question as good.

Overall, the environment promoted safety, personalisation, and comfort. The setting consisted of six self-contained flats accessed from a central corridor. This promoted privacy and choice. The environment was flexible enough to support people with complex needs. Where needed, a multi-disciplinary approach was applied to ensure the care home environment supported people's needs appropriately. Door alert systems ensured staff were aware when someone left their flat and might need support. This balanced people's freedom of movement with appropriate safety oversight. Each flat was furnished and decorated in line with the person's expressed preferences and sensory needs. This helped people feel relaxed and at home.

Outdoor space was well maintained and used frequently. Residents had access to seating areas, washing lines, and a swing, and we observed people clearly enjoying this environment. One individual benefited from a personalised section of the garden, which promoted comfort and reduced distress.

Maintenance arrangements were effective. An on-site maintenance team responded promptly to repairs, and recent improvements in communication had strengthened how issues were prioritised and completed. Staff described the maintenance team as respectful and understanding of people's needs. External contractors had clear response times, and essential safety checks were up to date. Staff carried out routine health and safety and environmental checks within individual flats, which promoted safety.

Families highlighted benefits of the wider facilities, including access to the local swimming pool at the Portal which supported one person's relaxation and wellbeing. One family member told us '(my relative) destresses by having a bath, and the availability of the hydrobath at day opportunities is fantastic and works really well for them.'

## How well is our care and support planned?

5 - Very Good

We found significant strengths in how assessment and personal planning were carried out. therefore we evaluated this key question as very good.

Personal plans were well structured, detailed, person-centred, and demonstrated a strong understanding of each individual's needs, preferences, routines and desired outcomes. Plans were written in a clear, accessible format, enabling staff to quickly understand what mattered to people and how best to support them. Daily folders were well organised, comprehensive, and regularly updated. This helped staff maintain consistent records and ensured information was easy to access.

Personal plans included essential details such as guardianship and social work contacts.

Plans strongly reflected "what is important to me", "what is important for me", personal strengths, interests, and what good and bad days looked like. These were linked effectively to the Health and Social Care Standards and demonstrated careful consideration of each person's lived experience.

Risk assessments provided clear guidance across key areas and risk reduction strategies were clear and helped staff provide safe, personalised support. Personal behaviour support plans offered strong proactive and reactive approaches and included goals for building independence. Practical staff guidance was evident throughout. This promoted a beneficial consistent approach.

Condensed "grab files" and one page profiles were concise and clearly presented, supporting quick familiarisation for new and bank staff. Review systems were well established, with clear monitoring arrangements and defined roles. Staff contributed meaningfully to reviews, drawing on observations from daily practice. Families received regular updates, helping ensure plans reflected people's wishes and the views of those who knew them well. This helped ensure people got the right care for them.

## 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's wellbeing, the provider should ensure that care reviews are held six monthly. This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state:

"My care and support meets my needs and is right for me."(HSCS1.19).

**This area for improvement was made on 14 January 2025.**

#### Action taken since then

There was clear evidence of planning and carrying out 6-monthly review meetings. Appropriate invites were sent out to professionals and where applicable to families and guardians. This ensured robust and reliable oversight, discussion, and update of people's personal plans.

Therefore 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](http://www.careinspectorate.com).

## Detailed evaluations

How good is our leadership?	5 - Very Good
2.2 Quality assurance and improvement is led well	5 - Very Good
How good is our setting?	4 - Good
4.1 People experience high quality facilities	4 - 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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