



REPORT TO: PERFORMANCE & AUDIT COMMITTEE – 24 SEPTEMBER 2025
REPORT ON: CARE INSPECTORATE GRADINGS – REGISTERED CARE HOMES FOR ADULTS/ OLDER PEOPLE AND OTHER ADULT SERVICES 2024-25
REPORT BY: CHIEF FINANCE OFFICER
REPORT NO: PAC25-2025

1.0 PURPOSE OF REPORT

The purpose of this report is to summarise for the Performance and Audit Committee the gradings awarded by the Care Inspectorate to Dundee registered care homes for adults/older people and other adult services in Dundee for the period 1 April 2024 to 31 March 2025.

2.0 RECOMMENDATIONS

It is recommended that the Performance & Audit Committee (PAC):

- 2.1 Note the scale and scope of Care Inspectorate led inspections carried out in 2024-25 during the reporting year (section 4.1)
- 2.2 Note the contents of this report and the gradings awarded as detailed in the attached performance report (Appendix 1) and highlighted in section 4.2.
- 2.3 Note the range of continuous improvement activities progressed during 2024-25 as described in section 4.3 and Appendix 1.

3.0 FINANCIAL IMPLICATIONS

None

4.0 MAIN TEXT

4.1 Background

- 4.1.1 The Care Inspectorate is responsible for the inspection and regulation of all registered care services in Scotland. The regulatory authority ensures that care service providers meet the Health and Social Care Standards¹ that came into effect in April 2018. The Care Inspectorate use a six-point grading system against which certain key themes are graded. The grades awarded are published in inspection reports and on the Care Inspectorate’s website at www.careinspectorate.com.
- 4.1.2 During 2024-25 the Care Inspectorate played a key role in supporting the implementation of the Health and Care (Staffing) (Scotland) Act 2019 which came into effect on 01 April 2024. The Act aims to ensure safe and high-quality care through appropriate staffing levels in health and social care settings. The overall inspection framework for adult services continued to be supported by a series of sector specific quality frameworks, which support providers to self-

¹ <https://www.gov.scot/binaries/content/documents/govscot/publications/advice-and-guidance/2017/06/health-social-care-standards-support-life/documents/health-social-care-standards-support-life/health-social-care-standards-support-life/govscot%3Adocument/health-social-care-standards-support-life.pdf>

evaluate their own performance and are used by inspectors to provide independent assurance about the quality of care and support. As well as supporting inspection these quality frameworks are also designed to support improvement activity. The full range of relevant frameworks can be accessed at: [Quality frameworks for care services | Care Inspectorate Hub](#) (care homes for adults and older people, care at home, support services, and housing support services). Whilst there is variation across each framework, some core areas of focus are:

- How well people’s wellbeing is supported.
- How good the leadership of the service is.
- How good the staff team is.
- How good the setting (physical environment) within the service is.
- How well care is planned.

4.1.3 The Care Inspectorate base their inspection priorities for each service on risk and intelligence and have set out a baseline for which key questions will be evaluated at each inspection dependent on grade and whether there are high scrutiny or medium/ low scrutiny requirements. Two key questions (elements of Key Question 1 – How well do we support people’s wellbeing? and Key Question 2 – How good is our leadership?) are the minimum for all services, with the Care Inspectorate having discretion to look at and evaluate any further key question(s) and quality indicator(s) in addition to this if there are any concerns arising from the assessment of the core assurances during the actual inspection.

4.2 Gradings Awarded

4.2.1 Across the 44 registered services listed in the performance report contained within appendix 1, 53 inspections were undertaken during 2024-25. This included 24 inspections carried out across 17 care homes and 29 inspections carried out across 27 other adult services. Four care homes operated by Dundee Health and Social Care Partnership were inspected during the reporting year.

4.2.2 Table 1 illustrates the number of services receiving a grade of 1-6 in one or more key question along with a comparison from 2023-24:

Table 1: Grade Received by Service	Care Homes		Other Adult Services	
	2024-25	2023-24	2024-25	2023-24
Number of Services Inspected	17	24	27	22

6 ‘excellent’ in one or more key questions	2	12%	2	8%	0	0	0	0
5 ‘very good’ in one or more key questions	8	47%	5	21%	15	56%	11	50%
4 ‘good’ in one or more key questions	11	65%	17	71%	20	74%	17	77%
3 ‘adequate’ in one or more key questions	7	41%	15	63%	8	30%	7	32%
2 ‘weak’ in one or more key questions	2	12%	4	17%	0	0	0	0%
1 ‘unsatisfactory’ in one or more key questions	1	6%	-	-	0	0	-	-

4 'very good' and above in all grades (initial annual inspection)	10	59%	9	38%	18	67%	17	77%
3 'adequate' or below in all grades (initial annual inspection)	7	41%	8	33%	9	33%	0	0%

The number of inspections for care homes decreased and the number for other adult services increased during 2024-25 from the previous year. The grading data evidences an improvement in grades between 2023-24 to 2024-25 for care homes; particularly of note grades 5 'very good' and 6 'excellent'. Other adult services grades remained similar even although there was a 20% increase in the number of services inspected. Whilst other adult services did not receive an 'excellent' in any Key Question they also did not receive a grade of 'poor' or 'weak'. One inspected care home received a grade 1 (unsatisfactory).

- 4.2.3 A requirement is a statement which sets out what a care service must do to improve outcomes for people who use services and must be linked to a breach in the Public Services Reform (Scotland) Act 2010, its regulations, or orders made under the Act, or a condition of registration. Requirements are enforceable in law. Requirements were placed on 7 of the 17 care homes and 8 of the 27 other adult services following inspection during 2023-24 (this is a small reduction from the proportion in 2023-24 which was 18 out of 46). Details of the improvement support provided to some of these services is set out in section 4.3 and appendix 1.
- 4.2.4 Enforcement is one of the Care Inspectorate's core responsibilities and is central to protecting residents and bringing about an improvement in the quality of care services. No enforcement measures were put in place during 2024-25.
- 4.2.5 Table 2(a) shows the overall percentage awarded at grades 1 to 6 for care homes. Of the 24 inspections carried out across 17 care homes, 80 grades were awarded against the key questions noted below:

Table 2(a) – Care Homes (24 inspections, 80 grades awarded)

Table 2(a): Grade 2024-25	Overall	How well do we support people's wellbeing?	How good is our leadership?	How good is our staff team?	How good is our setting?	How well is our care and support planned?
6 'excellent'	4%	1 (5%)	2 (14%)	0	0	0
5 'very good'	23%	6 (30%)	1 (7%)	5 (28%)	4 (31%)	3 (20%)
4 'good'	40%	8 (40%)	6 (43%)	7 (39%)	6 (46%)	5 (33%)
3 'adequate'	26%	4 (20%)	4 (29%)	4 (22%)	3 (23%)	6 (40%)
2 'weak'	3%	0	0	2 (11%)	0	0
1 'unsatisfactory'	4%	1 (5%)	1 (7%)	0	0	1 (7%)

Table 2(a) demonstrates that grades of 'very good' or excellent' were more evenly spread across Key Questions than has been the case in previous years (where they were more likely to be awarded in relation to supporting people's wellbeing and leadership of care home services).

Of the four Partnership operated care homes inspected during 2024-25, one ended the year with an evaluation of 'excellent' against all Key Questions inspected; another with an evaluation of 'very good' against all Key Questions inspected; and, two with an evaluation of 'good' or 'very good' against all Key Questions inspected.

Table 2(b) Support Services with Care at Home (11 inspections / 37 grades awarded)

Table 2(b): Grade 2024-25	Overall	How well do we support people's wellbeing?	How good is our leadership?	How good is our staff team?	How good is our setting?	How well is our care and support planned?
6 'excellent'	0	0	0	0	0	0
5 'very good'	35%	5 (45.5%)	1 (10%)	5 (50%)	0	2 (33%)

4 'good'	38%	5 (45.5%)	2 (20%)	5 (50%)	0	2 (33%)
3 'adequate'	27%	1 (9%)	7 (70%)	0	0	2 (33%)
2 'weak'	0	0	0	0	0	0
1 'unsatisfactory'	0	0	0	0	0	0

Table 2(c) Care at Home with Housing Support (16 inspections / 44 grades awarded)

Table 2(c): Grade 2024-25	Overall	How well do we support people's wellbeing?	How good is our leadership?	How good is our staff team?	How good is our setting?	How well is our care and support planned?
6 'excellent'	0	0	0	0	0	0
5 'very good'	32%	6 (38%)	1 (17%)	7 (44%)	0	0
4 'good'	61%	9 (56%)	4 (66%)	9 (56%)	0	5 (83%)
3 'adequate'	7%	1 (6%)	1 (17%)	0	0	1 (17%)
2 'weak'	0	0	0	0	0	0
1 'unsatisfactory'	0	0	0	0	0	0

Tables 2(b) and 2(c) for other adult services cover a variety of service provision models therefore comparisons cannot be made against each model for the purposes of this report. A small number of inspections were undertaken within each model of service however data evidences that all services are meeting expected standards, with no grades of 'weak' awarded. Key Question 4 is not inspected against in the majority of other adult services as they are primarily provided in the service user's own home.

4.3 Continuous Improvement

4.3.1 There continues to be a joint commitment to continuous improvement and a proactive approach to improving and sustaining quality that involves care home providers, other adult service providers, the Care Inspectorate and representatives of Dundee Health and Social Care Partnership. This is particularly evident when significant concerns arise. There have been many benefits of such an approach e.g. effective sharing of information, shared agreement about improvement activity required and monitoring of the same until such point concerns have been adequately addressed. Appendix 1 contains further information about the range of improvement support available to providers across care home, care at home, housing support and other adult services.

4.3.2 Appendix 1 provides further information about improvement support provided to care home providers who achieved grades of 'weak' in some aspects of their inspection gradings. This included:

- Enhanced contract monitoring arrangements;
- Additional support from the Care Home Team; and
- Commencement of Adult Support and Protection Large Scale Investigations, in one instance also supported by a voluntary cessation to new admissions.

Feedback from care home providers who have experienced issues within their care homes has been positive with regard to the above interventions from the Partnership. In all 3 care homes improvements are now being evidenced, however enhanced monitoring and support is continuing until improvements have been embedded and validated.

4.3.3 A number of high performing services are also identified within Appendix 1, having received grades of 'excellent' and 'very good' across multiple aspects of the key questions utilised for inspection. Some of the common areas of strength identified across these services included: motivated staff who are eager to provide high quality services; quality of relationships and communication between the service, people they care for and support, unpaid carers and other agencies; good leadership of the service; the availability of a wide range of meaningful social activities; high standards of infection prevention and control practice; adequate staffing

resources in place to support high quality service provision; and, a commitment to seeking and listening to feedback from services users and unpaid carers.

5.0 POLICY IMPLICATIONS

5.1 This report has been subject to the Pre-IIA Screening Tool and does not make any recommendations for change to strategy, policy, procedures, services or funding and so has not been subject to an Integrated Impact Assessment. An appropriate senior manager has reviewed and agreed with this assessment.

6.0 RISK ASSESSMENT

This report has not been subject to a risk assessment as it relates to the publication of Care Inspectorate information and is for information only.

7.0 CONSULTATIONS

The Chief Officer, Acting Head of Service, Strategic Services, the Clerk, Heads of Service - Health and Community Care and Chief Social Work Officer were consulted in the preparation of this report.

8.0 BACKGROUND PAPERS

None.

Christine Jones
Acting Chief Finance Officer

DATE: 21 August 2024

Rosalind Guild
Contracts Officer

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APPENDIX 1 PERFORMANCE REPORT – CARE INSPECTORATE GRADINGS

DUNDEE REGISTERED CARE HOMES FOR ADULTS/OLDER PEOPLE AND OTHER ADULT SERVICES

1 APRIL 2024 – 31 MARCH 2025

INTRODUCTION

The purpose of this report is to summarise for members the findings and gradings awarded by the Care Inspectorate to registered care homes for adults/older people and other adult services within Dundee for the period 1 April 2024 to 31 March 2025.

The Care Inspectorate regulate care services for people of all ages in Scotland. Their work includes registering services, inspecting and grading them, dealing with complaints, carrying out enforcement action where necessary and helping services to improve.

The role of the Care Inspectorate is to regulate and inspect care services so that:

- vulnerable people are safe;
- the quality of service delivered is high and continues to improve;
- people know the standards they have a right to expect;
- reports are made available publicly on the quality of services across Scotland; and
- they can support the review and development of how services are delivered.

The Care Inspectorate played a key role in supporting the implementation of the Health and Care (Staffing) (Scotland) Act 2019 which came into effect on 1 April 2024. The Act aims to ensure safe and high-quality care through appropriate staffing levels in health and social care settings.

The Care Inspectorate continue to inspect using a six-point grading scale (see below) against which the following key themes are graded:



Each theme is assessed from 1 to 6 with 1 being 'unsatisfactory' and 6 'excellent'.

The grading scale used is:

6	excellent
5	very good
4	good
3	adequate
2	weak
1	unsatisfactory

OVERVIEW OF THE SERVICES INSPECTED

A total of 53 inspections were carried out in 44 services during 2024-25 (see Appendices A and B):

- 24 inspections in 17 care homes

- 29 inspections in 27 other adult services

Where there are performance concerns at an inspection resulting in a number of requirements being imposed, a follow up visit is arranged. This can result in further action being taken or grades being amended. A breakdown of the requirements are listed in Appendix C for care homes and in Appendix D for other adult services.

Inspection/investigations are also carried out if complaints are made against a service and can result in a change to grades. Upheld complaints are recorded on the Care Inspectorate website (www.careinspectorate.com).

Table 1 shows which sectors received an inspection during 2024-25:

Table 1: Inspected Services - Sector Data	DHSCP	Private	Voluntary*	Total
Number of Care Homes	4	13	-	17
%	23.5%	76.5%	-	100%
*As of 2024-25 there are no voluntary care homes in Dundee due to recent closures				
Number of Other Adult Services	4	10	13	27
%	15%	37%	48%	100%

Summary of the gradings awarded in Dundee

Table 2 illustrates the number of services who received the undernoted gradings in one or more of the key questions inspected and the comparison from previous year 2022-23.

Table 2: Grade Received by Service	Care Homes		Other Adult Services	
Year	2024-25	2023-24	2024-25	2023-24
Number of Services Inspected	17	24	27	22

6 'excellent' in one or more key questions	2	12%	2	8%	0	0	0	0
5 'very good' in one or more key questions	8	47%	5	21%	15	56%	11	50%
4 'good' in one or more key questions	11	65%	17	71%	20	74%	17	77%
3 'adequate' in one or more key questions	7	41%	15	63%	8	30%	7	32%
2 'weak' in one or more key questions	2	12%	4	17%	0	0	0	0%
1 'unsatisfactory' in one or more key questions	1	6%	-	-	0	0	-	-

4 'very good' and above in all grades (initial annual inspection)	10	59%	9	38%	18	67%	17	77%
3 'adequate' or below in all grades (initial annual inspection)	7	41%	8	33%	9	33%	0	0%

There were 40% less inspections carried out in care homes this year compared to 2023-24 whilst a higher number were carried out in other adult services. The grading data evidences an improvement in grades between 2023-24 to 2024-25 for care homes particularly of note grades 4 'good' and 5 'very good'. Other adult services grades remained similar even although there was a 20% increase in the number of services inspected. Whilst other adult services did not receive an 'excellent' in any Key Question they also did not receive a grade of 'poor' or 'weak'.

Table 3(a) – Care Homes (24 inspections, 80 grades awarded)

Table 3: Grade 2023-24	Overall	How well do we support people's wellbeing?	How good is our leadership?	How good is our staff team?	How good is our setting?	How well is our care and support planned?
6 'excellent'	4%	1 (5%)	2 (14%)	0	0	0
5 'very good'	23%	6 (30%)	1 (7%)	5 (28%)	4 (31%)	3 (20%)
4 'good'	40%	8 (40%)	6 (43%)	7 (39%)	6 (46%)	5 (33%)
3 'adequate'	26%	4 (20%)	4 (29%)	4 (22%)	3 (23%)	6 (40%)
2 'weak'	3%	0	0	2 (11%)	0	0
1 'unsatisfactory'	4%	1 (5%)	1 (7%)	0	0	1 (7%)

Table 3(a) demonstrates that grades of 'very good' or excellent' were more evenly spread across Key Questions than has been the case in previous years (where they were more likely to be awarded in relation to supporting people's wellbeing and leadership of care home services).

Table 3(b) Support Services with Care at Home (11 inspections / 37 grades awarded)

Table 3(b): Grade 2024-25	Overall	How well do we support people's wellbeing?	How good is our leadership?	How good is our staff team?	How good is our setting?	How well is our care and support planned?
6 'excellent'	0	0	0	0	0	0
5 'very good'	35%	5 (45.5%)	1 (10%)	5 (50%)	0	2 (33%)
4 'good'	38%	5 (45.5%)	2 (20%)	5 (50%)	0	2 (33%)
3 'adequate'	27%	1 (9%)	7 (70%)	0	0	2 (33%)
2 'weak'	0	0	0	0	0	0
1 'unsatisfactory'	0	0	0	0	0	0

Table 3(c) Care at Home with Housing Support (16 inspections / 44 grades awarded)

Table 3(c): Grade 2024-25	Overall	How well do we support people's wellbeing?	How good is our leadership?	How good is our staff team?	How good is our setting?	How well is our care and support planned?
6 'excellent'	0	0	0	0	0	0
5 'very good'	32%	6 (38%)	1 (17%)	7 (44%)	0	0
4 'good'	61%	9 (56%)	4 (66%)	9 (56%)	0	5 (83%)
3 'adequate'	7%	1 (6%)	1 (17%)	0	0	1 (17%)
2 'weak'	0	0	0	0	0	0
1 'unsatisfactory'	0	0	0	0	0	0

Tables 3(b) and 3(c) for other adult services cover different models of service provision therefore comparisons cannot be made against each model for the purposes of this report. A small number of inspections were undertaken within each model of service however data evidences that all services are performing well with no grades of 'weak' awarded. Key Question 4 in the majority of other adult services is not inspected against as services are primarily provided in the service user's own home.

Balhousie St Ronan's Care Home (owned by Balhousie Holdings Limited) – Following on from an unsettled period during 2023-24, an Inspection carried out by the Care Inspectorate at the end of March 2024 again resulted in poor grades. The Care Inspectorate were also receiving a high volume of complaints whilst, at the same time, concerns were being raised by Dundee HSCP with the provider re practice issues. Enhanced contract monitoring re-commenced at this time to support the care home. In June 2024 grades improved slightly however in November 2024 the care home again met the criteria for a Large-Scale Investigation to be carried out which continued through to March 2025. The care home

continues to be monitored through the Enhanced Contract Monitoring process however with a permanent new manager taking up post in May 2025, considerable improvement has been evidenced. Close monitoring will continue until both the Care Inspectorate and Dundee HSCP are satisfied that the improvements will be sustained.

Benvie Care Home (owned by Duncare Limited) – Whilst carrying out an annual inspection at the care home, the Care Inspectorate issued a Letter of Serious Concern during the inspection followed by an Improvement Notice with requirements to be met in a relatively short time-scale. Grades of 1 'unsatisfactory', 2 'weak' and 3 'adequate' were given as a result of this inspection. During this time the then provider had met with Dundee HSCP and Large-Scale Investigation proceedings commenced with the provider voluntarily ceasing admissions to the care home. This process ended in August 2024 and continues to be monitored at present through Enhanced Contract Monitoring. A new manager was appointed in December 2024 and there has been noticeable improvements made since that time. Renaissance Care acquired the care home trading as Duncare Limited in October 2024.

Lochleven Care Home (formerly owned by Thistle Healthcare Ltd) – The Care Inspectorate visited the care home in May 2024 for their annual inspection and there were some concerns which led to requirements being imposed. Dundee HSCP instigated Large-Scale Investigation procedures in July 2024 with the concerns being quickly addressed and the process completed by September 2024. Enhanced Contract Monitoring followed to offer the care home support and ensure sustained improvement.

Care Inspectorate Key Messages – High Performing Services

White Top Centre (Dundee HSCP) and Harestane Care Home (Priority Care Limited)

These were pilot inspections to test a new way of inspecting to provide assurance that better performing services continue to deliver a very good level of care and support. No new evaluations (grades) have been awarded. This inspection is called a core assurance inspection. This is because research demonstrates that these core assurances are the key areas that are essential to a service being safe. The Care Inspectorate report on them under the headings: legal assurances, wellbeing, leadership, staffing, the setting, and planned care/support. The Care Inspectorate confirmed that the service continued to provide a very good level of care and support.

Ballumbie Court Care Home (HC-One Limited)

- Care and support promoted people's health and wellbeing.
- People were supported by a dedicated and committed staff team.
- Leadership was promoted at all levels of the staff team.
- Quality assurance systems were effective and led to positive change.
- People's opinions were valued and used as drivers for change.
- The service had creative responses to challenges

Right at Home Dundee Angus and North Fife (Roundstone Quality Care Ltd)

People receiving a service from Right at Home Dundee, Angus and North Fife spoke highly about the support they received. Their comments included:

- "The staff are very nice and friendly"
- "She is well trained and very good at her job"
- "They are very kind and caring"
- "I don't have any concerns, I'm very lucky"
- "They go out of their way to help"
- "The communication is very good."

Turning Point Scotland - Dundee

- People experienced a compassionate and person-centred service
- Staff had forged trusting and effective working relationships with the people they supported
- Professionals from other agencies told us that the service works well within the multidisciplinary team
- Turning Point involved supported people in developing the service and aimed to empower them to represent themselves
- The service's policies and procedures were clearly written, easy to follow and reviewed on a regular basis

- The service's commitment to adult support and protection was evident and well documented
- Staff felt part of a mutually supportive team
- Staff said that their seniors and the manager were approachable, knowledgeable and encouraging
- The service experienced some challenges regarding staff turnover but still maintained continuity in the support it provided

Requirements

A requirement is a statement which sets out what a care service must do to improve outcomes for people who use services and must be linked to a breach in the Public Services Reform (Scotland) Act 2010, its regulations, or orders made under the Act, or a condition of registration. Requirements are enforceable in law.

Requirements were placed on 7 of the 17 (41%) care homes inspected and 8 of the 27 (30%) other adult services inspected.

Complaints

A complaint is an expression of dissatisfaction by about a registered care service's action or lack of action, or about the standard of service provided by or on behalf of a registered care service'. Following investigation, a decision will be made by the Care Inspectorate whether the complaint is upheld or not upheld.

During 2024-25 the Care Inspectorate received one or more complaints relating to 9 care home services. Of these, all were upheld or at least one of the following elements upheld. No complaints were received on behalf of adult care services who were inspected.

Complaints – Care Homes	Complaints – Other Adult Services
<p>Wellbeing</p> <ul style="list-style-type: none"> • Other • Social <p>Healthcare</p> <ul style="list-style-type: none"> • Palliative care • Inadequate healthcare or healthcare treatment • Continence care • Infection control issues • Medication issues • Nutrition • Tissue viability • Hydration • Other <p>Staff</p> <ul style="list-style-type: none"> • Levels <p>Access</p> <ul style="list-style-type: none"> • To other services eg advocacy/health <p>Communication</p> <ul style="list-style-type: none"> • Between staff and service users/relatives/ carers • Other <p>Choice</p> <ul style="list-style-type: none"> • Activities • Care and treatment <p>Environment</p> <ul style="list-style-type: none"> • Inadequate facilities • Other <p>Food</p> <ul style="list-style-type: none"> • Choice <p>Privacy and Dignity</p>	<p>None for services inspected during 2024-25</p>

<ul style="list-style-type: none"> • Privacy and Dignity <p>Record-Keeping</p> <ul style="list-style-type: none"> • Personal plans/agreements • Other <p>Policies and Procedures</p> <ul style="list-style-type: none"> • Complaints procedure <p>Protection of People</p> <ul style="list-style-type: none"> • Adults 	
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Enforcements

Enforcement is one of the Care Inspectorate's core responsibilities and is central to protecting residents and bringing about an improvement in the quality of care services.

There was one enforcement measure put in place for a care home service during 2024-25.

CONTINUOUS IMPROVEMENT

There continues to be a joint commitment to continuous improvement and a proactive approach to improving and sustaining quality which involves service providers, the Care Inspectorate and representatives of Dundee Health and Social Care Partnership. This is particularly evident when significant concerns arise. There have been many benefits of such an approach e.g. effective sharing of information, shared agreement about improvement activity required and monitoring of the same until such point concerns have been adequately addressed.

Care Home Services

The Care Home Team continues to provide support to care homes from a nursing and social work perspective. The Team now has a full complement of staff and continue to support, provide training and share knowledge and experience to care homes where required. Referral processes into the care home team have been reviewed in late 2024 / early 2025 to ensure easy access to supports.

Dundee Health & Social Care Partnership continue to host Care Home Providers Forums on a monthly basis which is now co-chaired with the Scottish Care Independent Sector Lead. Regular meetings also take place between the Partnership and the Care Inspectorate.

Turriff House continues to offer respite and intermediate care support. There has been an increase in the use of respite however this does fluctuate throughout the year with high usage being noted during traditional holiday seasons and lower use out with these periods. The criteria for intermediate care was reviewed in 2024 which has resulted in far greater use particularly from people from home in order to avoid unnecessarily hospital admission to Kingsway Care Centre.

Menzieshill House continues to be a leader across Scotland with regards to their inter-generational work with residents and children. They again received awards in 2024 for this work and have attended multiple events as guest speakers to showcase their success.

Janet Brougham House has been heavily involved with regards to ensuring equality and access for all service users in Dundee. Significant investigation has gone into the creation of a bedroom suitable to support bariatric persons. This has included input from professionals across Dundee HSCP and Dundee City Council. Whilst the adaptation work has not yet commenced, considerable development work has been progressed during the year.

In 2024 Mackinnon Centre respite service applied for a variation to their Care Inspectorate registration which was approved. Mackinnon Centre can now support up to 4 service users on a longer-term basis. This was taking place in 2023 however was not a permanent service until 2024. This has played a vital role in facilitating delayed discharges from hospital and providing a safe place for people with advanced complex needs or situations until full time care provision has been sourced. The unit is also providing a safe and appropriate space for service users in the community to access their power assisted bath / shower with support from their family or carers in the community.

Care at Home Services

DHSCP officers have continued to meet with providers to focus on making runs of work more efficient by collectively reducing gaps and proactively working together to meet service requests. Alongside the other positive developments, such as improved recruitment and retention within the service area as a result of the payment on shift model, this has meant the level of unmet in Dundee has been maintained at a relatively low level throughout the year. The challenge for 2025/26 will be to manage this alongside budgetary pressures by ensuring that services are deployed as efficiently as possible so that travel time and gaps on shift are kept to an absolute minimum.

Care At Home/Housing Support (Learning Disability & Mental Health)

During 2024-25 work has continued on Strategic Housing Investment Plan (SHIP) developments. These are new housing developments which provide supported accommodation to tenants who have a variety of assessed support needs and who have either a learning disability or mental health needs. One development was completed and handed over from to the Partnership during this year.

Support providers are identified/ agreed via the Dundee Collaborative Group, which uses a partnership working approach to decision-making and is viewed positively by providers involved in the process.

In 2024-25 a Test of Change was implemented to provide pre- and post- diagnostic support to individuals with Autism, as well as those not seeking a formal diagnosis, and who may not meet thresholds for receiving support from other commissioned services. This service is intended to address a gap in need and provide direct support as well as signposting individuals to other supports available across the city and work in partnership with other stakeholders to achieve this. Regular meetings were held to support the ongoing development and evaluation of the service, which has since been extended in duration and scope to allow for a more comprehensive review before confirming future commissioning intentions. The service has established links with statutory and other third sector provision across Dundee, supports individuals on the Tayside Adult Autism Consultancy Team (TAACT) waiting list, and is complementary to ongoing work developing the Neurodevelopmental

Substance Misuse / Homelessness

To follow

**APPENDIX A
DUNDEE HEALTH & SOCIAL CARE PARTNERSHIP
CARE INSPECTORATE GRADINGS FOR CARE HOMES IN DUNDEE - 1 APRIL 2024 TO 31 MARCH 2025**

Name of Care Home and Provider Organisation	Service Type	Category DHSCP/ Private/ Vol	Inspection Completed Date	KQ1	KQ2	KQ3	KQ4	KQ5	Requirements	Upheld Complaint(s) received during 24-25	Enforcement / Notice of Improvement
				How well do we support people's wellbeing?	How good is our leadership?	How good is our staff team?	How good is our setting?	How well is our care and support planned?			
Balcarres HC-One Limited	Care Home (Older People)	Private	Last Inspected 11.12.23					No	No	No	
Balhousesie Clement Park Balhousesie Holdings Limited	Care Home (Older People)	Private	10.04.24	4	4	4	4	4	No	Yes	No
Balhousesie St Ronan's Balhousesie Holdings Limited	Care Home (Older People)	Private	06.06.24	3	4	3	4	3	Yes	Yes	No
			13.01.25	3	-	2	-	-	Yes	Yes	No
Ballumbie Court HC-One Limited	Care Home (Older People)	Private	08.05.24	5	5	5	5	5	No	No	No
Benvie Duncare Ltd	Care Home (Older People)	Private	20.06.24	Letter of Serious Concern issued by Care Inspectorate on day of inspection visit					Yes	No	Yes
			25.06.24	1	1	2	3	1	Yes	Yes	No
			02.07.24	Improvement Notice issued by Care Inspectorate					Yes	No	Yes
			14.08.24	3	3	3	-	3	Yes	Yes	No
			20.11.24	4	-	4	4	4	No	Yes	No
Bridge View Sanctuary Care	Care Home (Older People)	Private	22.01.25	4	-	5	-	-	No	Yes	No

The Bugties Enhance Healthcare Ltd	Care Home (Older People)	Private	Last Inspected 01.02.24					No	No	No	
Carmichael House Carmichael House (Dundee) Limited	Care Home (Older People)	Private	19.07.24	4	3	4	4	4	No	No	No
			21.11.24	-	-	-	3	-	Yes	No	No
			20.12.24	Visit by Care Inspectorate following complaint – no change to grades					No	Yes	No
Ellen Mhor Cynet Healthcare	Care Home (Learning Dis)	Private	Last Inspected – 14.12.23					No	No	No	
Forebank Care Home Brookesbay Care Group	Care Home (Older People)	Private	07.11.24	4	-	4	-	-	No	No	No
Harestane Care Home Priority Care Group Limited	Care Home (Older People)	Private	03.12.24	5	6	-	-	-	No	No	No
			Pilot Core Assurances Inspection – grades carried forward from previous inspection dated 11.10.23								
Janet Brougham House Dundee HSCP	Care Home (Older People)	Dundee HSCP	13.06.24	5	4	4	5	5	No	No	No
Lochleven Thistle Healthcare Ltd	Care Home (Older People)	Private	09.05.24	4	3	3	5	3	Yes	Yes	No
			10.09.24	-	-	-	-	4	No	No	No
McGonagall House Enhance Healthcare Limited	Care Home (Adults-ARBD)	Private	22.08.24	5	-	5	-	-	No	No	No
Mackinnon Centre Dundee HSCP	Care Home - Respite (Phys/Sensory Impairment)	Dundee HSCP	06.05.24	5	-	5	-	-	No	No	No
Menziesshill House Dundee HSCP	Care Home (Older People)	Dundee HSCP	23.07.24	5	4	5	5	5	No	No	No
Moyness Care Home Balhousie Holdings Limited	Care Home (Older People)	Private	Last Inspected 25.04.23					No	Yes	No	
Orchar Nursing Home Orchar Care Ltd	Care Home (Older People)	Private	Last Inspected 26.07.23. Visited on 26.07.24 to follow up a complaint – complaint not upheld					No	No	No	

Pitkerro Care Centre Hudson Healthcare Ltd	Care Home (Older People)	Private	Last Inspected 14.02.24					No	Yes	No	
Redwood House Redwood House (Broughty Ferry) Limited	Care Home (Older People)	Private	23.01.25	4	4	4	3	3	Yes	No	No
Riverside View Care Home HC-One Limited	Care Home (Older People)	Private	17.07.24	4	4	4	4	3	Yes	Yes	No
			18.12.24	-	-	-	-	4	No	No	No
Sense Scotland Dundee Respite Sense Scotland	Care Home (Learning Dis)	Private	Last Inspected 22.11.23					No	No	No	
St Columba's Care Home Priority Care Group Limited	Care Home (Older People)	Private	03.06.24	3	3	3	4	3	Yes	No	No
Thistle Care Home Cygnet Social Care	Care Home (Learning Disabilities)	Private	Last Inspected 09.01.24					No	No	No	
Turriff House Dundee HSCP	Care Home (Older People)	Dundee HSCP	Last Inspected 25.01.24					No	No	No	
White Top Dundee HSCP	Care Home (Learning Dis - Respite)	Dundee HSCP	25.11.24	6	6	-	-	-	No	No	No
			Pilot Core Assurances Inspection – grades carried forward from previous inspection dated 09.08.22								

KEY:

- 6 excellent
- 5 very good
- 4 good
- 3 adequate
- 2 weak

1 unsatisfactory

APPENDIX B

DUNDEE HEALTH & SOCIAL CARE PARTNERSHIP

CARE INSPECTORATE GRADINGS FOR ADULT SERVICES (EXCLUDING CARE HOMES) - 1 APRIL 2024 TO 31 MARCH 2025

Name of Care Home and Provider Organisation	Service Type	Category DHSCP/ Private/ Vol	Inspection Date	KQ1	KQ2	KQ3	KQ4	KQ5	Requirements	Upheld Complaints received during	Enforcement / Notice of Improvement
				How well do we support people's wellbeing?	How good is our leadership?	How good is our staff team?	How good is our setting?	How well is our care and support planned?			

SUPPORT SERVICES – WITH CARE AT HOME

Autism Outreach Service (Dundee) Scottish Autism	Support Service	Voluntary	06.12.24	5	4	-	-	-	No	No	No
Balmoral Dundee Balmoral Homecare Ltd	Support Service	Private	05.02.25	4	3	4	-	3	Yes	No	No
DHSCP – Homecare – Social Care Response Service	Housing Support Service	Dundee HSCP	31.01.25	5	-	5	-	-	No	No	No
DHSCP – Care at Home City Wide	Housing Support Service	Dundee HSCP	20.01.25	4	-	5	-	-	No	No	No
Family Friends	Support Service	Private	15.08.24	5	-	5	-	-	No	No	No
Home Instead Dundee & South Angus MIAY Limited T/A Home Instead Dundee & South Angus	Support Service	Private	16.05.24	5	3	5	-	5	Yes	No	No
			19.02.25	-	4	-	-	-	No	No	No
Hillcrest Futures – North Grimsby/ Dundee Outreach Service Hillcrest Futures Limited	Support Service	Voluntary	13.05.24	4	3	4	-	4	Yes	No	No
			14.03.25	-	3	-	-	-	No	No	No

MM Support Mitchell & Murdoch Care Limited	Housing Support Service	Private	11.12.24	4	3	4	-	4	Yes	No	No
Prestige Nursing and Care – Dundee Prestige Nursing (Scotland) Limited	Support Service	Private	14.03.25	4	3	4	-	3	Yes	No	No
Right at Home Dundee, Angus and North-Fife Roundstone Quality Care Ltd	Support Service	Private	28.03.25	5	5	5	-	5	No	No	No
TLA Neighbourhood Services TLA Neighbourhood Service Limited	Housing Support Service	Private	21.03.25	4	3	4	-	-	Yes	No	No

CARE AT HOME/HOUSING SUPPORT (24/7 SERVICES)

Rose Lodge Caalcare Care and Support Services	Care at Home/ Housing Support	Private	28.08.24	5	-	5	-	-	No	No	No
Carr Gomm Support Services 6 Carr Gomm	Care at Home/ Housing Support	Voluntary	18.02.25	4	4	4	-	4	No	No	No
Cornerstone Dundee Housing Support and Care at Home Cornerstone Community Care	Care at Home/ Housing Support	Voluntary	02.08.24	4	-	5	-	3	Yes	No	No
Cornerstone Dundee Supported Living	Care at Home/ Housing Support	Voluntary	04.03.25	5	5	5	-	4	No	No	No
Dudhope Villa and Sister Properties	Care at Home / Housing Support	Private	22.05.24	4	4	4	-	4	No	No	No
Dundee City Council – Dundee Community Living	Care at Home/ Housing Support	Dundee HSCP	04.12.24	4	3	5	-	-	No	No	No
Dundee City Council – Weavers Burn	Care at Home/ Housing Support	Dundee HSCP	13.02.25	4	-	5	-	-	No	No	No

Hillcrest Futures Dundee – Alexander Street, Lismore Terrace, Longfield Drive Hillcrest Futures Limited	Care at Home/ Housing Support	Voluntary	10.09.24	4	-	4	-	-	No	No	No
Hillcrest Futures – Dundee Learning Disability Services Hillcrest Futures Limited	Care at Home/ Housing Support	Voluntary	01.05.24	5	-	5	-	-	No	No	No
Hillcrest Futures – Dundee Tullideph, David Street, Martingale, Birkdale Services Hillcrest Futures Limited	Care at Home/ Housing Support	Voluntary	09.12.24	4	-	4	-	-	No	No	No
Magdalen House Priority Care Limited	Care at Home / Housing Support	Private	26.11.24	3	-	4	-	-	Yes	No	No
Sense Scotland Supported Living: Dundee 1 & Surrounding Areas Sense Scotland	Care at Home/ Housing Support	Voluntary	17.03.25	5	4	4	-	4	No	No	No
Sense Scotland Supported Living: Dundee 3 & Surrounding Areas Sense Scotland	Care at Home / Housing Support	Voluntary	11.04.24	4	-	4	-	-	No	No	No
Scottish Autism – Tayside Housing Support & Outreach Service Scottish Autism	Care at Home / Housing Support	Voluntary	19.12.24	5	-	4	-	-	No	No	No
Transform Community Development	Care at Home / Housing Support	Voluntary	29.07.24	4	4	4	-	4	No	No	No
Turning Point Scotland – Dundee Turning Point Scotland	Care at Home/ Housing Support	Voluntary	28.01.25	5	-	5	-	-	No	No	No

KEY:

- 6 excellent
- 5 very good
- 4 good

- 3 adequate
- 2 weak
- 1 unsatisfactory

ITEM No ...11.....

**APPENDIX C
DUNDEE HEALTH & SOCIAL CARE PARTNERSHIP – CARE HOME SERVICES
CARE INSPECTORATE REQUIREMENTS 2024-25**

Date of Inspection	Name of Org/Service	Service Type	How well do we support people's wellbeing	How good is our leadership?	How good is our staff team?	How good is our setting?	How well is our care and support planned?
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06.06.24	Balhousie St Ronan's	Care Home - Private	3	4	3	4	3
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6 outstanding requirements from previous inspections held during 2023-24 – 3 remain not met

13.01.25	Re-grading		3	-	2	-	-
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Requirement 1

By 31 March 2025, the provider must make proper provision for the effective assessment and management of pain and the proper provision of end of life care. In particular, the provider must:

- a) ensure a detailed, person centred and structured pain management care plan for individuals experiencing pain;
- b) ensure the pain management care plan includes the provision for symptom management prior to interventions;
- c) ensure the efficacy of pain relief is consistently assessed and the outcomes used to direct the pain management plan;
- d) ensure that the personal needs, wishes and choices for individual's end of life care are sought, agreed and fully recorded in the care plan;
- e) ensure individual's end of life needs, wishes and choices are facilitated and fully met;
- f) ensure all care plans, including those related to personal care, oral care, continence care and mobility fully reflect the individuals end of life needs, wishes and choices;
- g) ensure the consistent observation of the individual receiving end of life care to ensure their health, safety and welfare.

Requirement 2

By 31 March 2025 the service provider must, having regard for the size and nature of the care service, the statement of aims and objectives, and the number and needs of the service users:

- a) ensure that at all times suitably qualified and competent persons are working in the care service in such numbers as are appropriate for the health, welfare and safety of service users;
- b) ensure that the dependency assessment tool accurately reflects people's care and support needs and takes account of staff and managers professional judgement.

A further 2 requirements remain outstanding from previous inspections referred to above (see 06.06.24)

20.06.24	Benvie	Care Home - Private	Letter of Serious Concern issued by Care Inspectorate				
25.06.24			1	1	2	3	1
02.07.24			Improvement Notice issued by Care Inspectorate				
14.08.24			3	3	3	-	3
20.11.24			4	-	4	4	4

Letter of Serious Concern

Requirement 1

By 14 July 2024, you must ensure that service users experience compassionate, palliative and end-of-life care that meets their health, safety, and wellbeing needs. In order to achieve this, you must demonstrate that:

- a) Service users who need palliative and end-of-life care have accurate care plans in place which set out how their care needs and preferences, including physical, spiritual, and psychological needs, are to

be met. b) Nursing and care staff are familiar with and implement a service user's palliative and end-of-life care plan.

c) Nursing and care staff can identify, and respond to, any change in a service user's physical and/or mental health needs, including, but not limited to, any sign that a service user is experiencing pain, discomfort and/or distress, or transitioning to end of life care.

Recommendation 2

By 14 July 2024, you must ensure that service users are provided with regular fluids, and support to drink in accordance with their hydration needs and preferences. In order to achieve this you must demonstrate that:

- a) Service users' care plans record their hydration needs and preferences.
- b) Nursing and care staff are familiar with, and implement, service users' hydration needs care plan.
- c) Nursing and care staff record fluid intake accurately as set out in the care plan which is reviewed daily, with action taken if targets have not been met.
- d) Nursing and care staff can identify, and respond to, any change to a service user's hydration needs.

Recommendation 3

By 11 August 2024, you must ensure that there are, at all times, adequate numbers of skilled and competent staff on each shift, to meet service users' health, safety, and wellbeing needs. In order to achieve this you must:

- a) Gather accurate information about service users' needs and use it to assess how many nursing and care staff with the right skill mix are required on each shift, and on each unit during the day and night.
- b) Roster and deploy staff in accordance with your assessment informed by each service user's care plan.
- c) Demonstrate that you are able to anticipate and respond to changes in service users' needs, and will amend staff numbers accordingly when required.

Recommendation 4

By 11 August 2024, you must ensure that the care service is led and managed in a manner that results in service users' health, safety and wellbeing needs being met. In order to achieve this you must:

- a) Establish and clarify the roles and responsibilities of all staff providing leadership and/or care across the service, and ensure this is shared and understood by all staff.
- b) Establish clear communication processes and systems to share information about service users current or changing needs on a daily basis. This should include but is not limited to wound care, falls, nutrition and hydration, palliative and end of life care, and assessment of pain.

c) Establish clear clinical oversight methods of care planning, and delivery of treatment and care. This may include but is not limited to observation of service users' care experiences, observation of staff practice and communication, and regular review/audit of care plans, daily notes and records.

4 additional requirements remain outstanding from previous inspections.

Follow up inspection 14.08.24 – **All requirements in Letter of Serious Concern met. Other requirements remain outstanding as not assessed at this inspection**

Follow up inspection 20.11.24 – **All outstanding requirements met**

19.07.24	Carmichael House	Care Home - Private	4	3	4	4	4
21.11.24			-	-	-	3	-

Requirement 1

By 2 February 2025, the service provider must ensure that water is supplied and maintained at temperatures suitable for the needs of people using the service.

09.05.24	Lochleven	Care Home - Private	4	3	3	5	3
10.09.24			-	-	-	-	4

Requirement 1

By 7 June 2024, the provider must ensure any restriction to people's right to freedom of movement is fully assessed and agreed prior to implementation. To do this, the provider must, at a minimum:

- a) ensure that the consideration of lap straps and/or sensor beams is based on a thorough and individual risk assessment with appropriate records to reflect decisions made. This should involve the person and/or their representatives and other professionals as appropriate
- b) ensure that the use of forms of restraint is regularly reviewed and reflects any changes to the person's health and wellbeing.

Follow up inspection 10.09.24 – **Outstanding requirements met**

23.01.25	Redwood House	Care Home - Private	4	4	4	3	3
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Requirement 1

By 1 April 2025 the provider must ensure people are supported to keep safe and well as their health and wellbeing needs are fully considered. To do this the provider must, at a minimum, ensure:

- a) care and support plans include any relevant risk to them that could affect their health and wellbeing
- b) risks and associated support measures are clearly stated and with sufficient detail within people's care and support plans and assessed at agreed intervals
- c) care and support plans include information on all important care needs and health conditions
- d) that all care documentation is kept up to date and used to evaluate and amend people's care as needed and
- e) quality assurance systems are effective at identifying and monitoring that risks and important care needs for people are suitably responded to in the care and support planning.

17.07.24	Riverside View	Care Home - Private	4	4	4	4	3
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18.12.24			-	-	-	-	4
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Requirement 1

By 9 October 2024, the provider must ensure that people are provided with high quality care and support and that this is evidenced by accurate recording of care. To do this, the provider must, at a minimum, ensure that:

- a) all care provided is in line with each person's personal plan and is recorded consistently on appropriate recording charts
- b) a robust process is put in place for the monitoring and review of personal care provided and any relevant recording charts.

Follow up inspection 18.12.24 – **Requirement met**

03.06.24	St Columba's Care Home	Care Home - Private	3	3	3	4	3
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Requirement 1

By 20 November 2023, the provider must keep people safe from harm by managing the administration of medication safely. To do this, the provider, must at a minimum:

- a) Put in place and effectively implement a system to provide assurance that people are having their prescribed medication administered in accordance with their individual needs.
- b) Ensure that monitoring arrangements identify any errors in administration or recording of a person's medication and appropriate actions are taken.
- c) Ensure staff competency in medication administration.

Requirement 2

By 29 July 2024, the provider must ensure people living in the care service are supported by staff who have been safely recruited. To do this, the provider must, at a minimum:

- a) Ensure all essential pre-employment checks are carried out prior to commencing employment in the service.
- b) Ensure adequate learning provision is made for staff to be able to meet people's needs and keep people safe.

Requirement 3

By 29 July 2024, the provider must ensure people receive care and support that is right for them. To do this the provider must at a minimum:

- a) Ensure care plans and risk assessments contain accurate and up to date information.
- b) Ensure care plans are subject to review with the person and/or their legal representative at least once in every six-month period.

A further 2 requirements remain outstanding from a previous inspection.

Legend:

- 6** excellent
- 5** very good
- 4** good
- 3** adequate
- 2** weak
- 1** unsatisfactory

**APPENDIX D
DUNDEE HEALTH & SOCIAL CARE PARTNERSHIP - ADULT SERVICES (EXCLUDING CARE HOMES)
CARE INSPECTORATE REQUIREMENTS 2024-25**

Date of Inspection	Name of Org/Service	Service Type	How well do we support people's wellbeing	How good is our leadership?	How good is our staff team?	How good is our setting?	How well is our care and support planned?
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05.02.25	Balmoral Dundee	Support Service – with care at home Private	4	3	4	-	3
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Requirement 1
By 9 May 2025 the provider must ensure people are safe and receive care and support that is well-led and managed and which results in better outcomes for people. This should be achieved through establishing a culture of continuous improvement, with robust and transparent quality assurance processes. To do this, the provider must:
a) ensure there are effective systems in place to monitor all aspects of the service provided.

Requirement 2
By 6 June 2025, the provider must ensure that each person's care plan and daily recording reflects their current individual care and support needs. To do this, the provider must, at a minimum ensure:
a) care plans and recordings are sufficiently detailed, written in a person-centred manner, and reflect the care assessed and provided; and
b) care plans are monitored and evaluated routinely to ensure the care and support remains effective.

16.05.24	Home Instead Dundee and South Angus	Support Service – with care at home Private	5	3	5	-	5
19.02.25			-	4	-	-	-

Requirement 1
By 31 July 2024, the provider must make proper provision for the health, welfare and safety of people using the service. To do this, the provider must evidence that all required staff have registered with the appropriate body within statutory timescales.

Follow up inspection 19.02.25 – **Requirement met**

13.05.24	Hillcrest Futures- North Grimsby/ Dundee Outreach Service	Support Service- with care at home Voluntary	4	3	4	-	4
14.03.25			-	3	-	-	-

Requirement 1
In order ensure service improvements are made, by 31 May 2024, the provider must submit a plan to the Care Inspectorate to make proper provision for the health and welfare of service users. Providers must ensure that robust quality assurance systems are put in place which are regularly monitored by managers of the service. This must include but is not restricted to:
a) Update and improve consistency of information within service user support plans and risk assessments across the service.
b) Ensure support plans accurately reflect support outcomes agreed with service users at commencement of service provision.
c) Ensuring six monthly reviews are carried out and support plans are updated accordingly.
d) Stakeholder engagement is carried out, to inform improvements to the service and are included within service development plans.

Recommendation 2

In order to ensure that staff are supported, and have the knowledge and skills required to carry out their roles, by 30 November 2024, providers must ensure that staff receive:

- a) Supervision at intervals set within service own policies and procedures.
- b) Observations of staff practice are carried out and recorded at regular intervals.
- c) Staff meetings/consultations are carried out to ensure that staff have information and updates about the service, have opportunities to provide feedback, and are involved in service developments.

In addition, 1 requirement from 25 April 2019 remains unmet.

Follow up inspection 14.03.25 – **All outstanding requirements met**

13.05.24	MM Support	Support Service – with Care at Home Private	4	3	4	-	4
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By 31 March 2025, the Provider must ensure that all relevant accidents and incidents are notified to the Care Inspectorate.

- a) Notifications must be submitted in line with "Records that all registered services (except childminding) must keep and guidance on notification reporting" (February 2012, Care Inspectorate).
- b) All relevant staff responsible for providing such notifications must have their knowledge of 'Records that all registered services (except childminding) must keep' and 'guidance on notification reporting (February 2012, Care Inspectorate)' evaluated to ensure compliance.

14.03.25	Prestige Nursing and Care - Dundee	Support Service – with Care at Home Private	4	3	4	-	3
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Recommendation 1

By 31 May 2025, the provider must ensure that all relevant accidents and incidents are notified to the Care Inspectorate. To do this the provider must, at a minimum:

- a) Ensure that notifications are submitted in line with 'Adult care services: Guidance on records you must keep and notifications you must make' (March 2025, Care Inspectorate).
- b) All relevant staff responsible for providing such notifications must have their knowledge of 'Adult care services: Guidance on records you must keep and notifications you must make' evaluated to ensure compliance.

Recommendation 2

By 31 May 2025, you must ensure that the care service is led and managed in a manner that results in service users' health, safety, and wellbeing needs being met. To do this the provider must, at a minimum: a) Ensure that the quality of service users' care is assessed by knowledgeable, skilled, and compassionate staff in leadership roles using a range of methods. This may include, but is not limited to, observation of service users' care experiences, observation of staff practice and communication, seeking service user and staff views, and review of care documentation.

- b) Ensure that where quality assurance processes identify areas for improvement, leaders take action and make any improvements to service users' care and the environment at the time.
- c) Ensure that quality assurance processes are used to identify any further staff training or support that is necessary to ensure service users' health, safety, and wellbeing needs are met.

21/03/25	TLA Neighbourhood Services	Housing Support Service – with Care at Home Private	4	3	4	-	-
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Recommendation 1

By 31 May 2025, the provider must ensure that all relevant accidents and incidents are notified to the Care Inspectorate. To do this the provider must, at a minimum:

a) Ensure that notifications are submitted in line with 'Adult care services: Guidance on records you must keep and notifications you must make' (March 2025, Care Inspectorate).
 b) All relevant staff responsible for providing such notifications must have their knowledge of 'Adult care services: Guidance on records you must keep and notifications you must make' evaluated to ensure compliance.

02/08/24	Cornerstone Dundee Housing Support and Care at Home	Housing Support Service – with Care at Home Voluntary	4	-	5	-	3
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Recommendation 1
 By 2nd November 2024, the provider must ensure that people’s health and wellbeing is supported by comprehensive and accurate records. To do this, the provider must, at a minimum:
 a. ensure care plans accurately and consistently reflect the current health and care needs of the person with priority given to nutrition and dietary requirements
 b. ensure risk assessments accurately reflect any identified risks to the person's health and includes an assessment of those risks and the steps that are to be taken to reduce or mitigate these risks
 c. ensure that there is a system in place to regularly review care plans and risk assessments and that they are updated when required
 d. ensure that all staff are confident and competent operating electronic systems which are used to document care plans, reviews, and risk assessments
 e. ensure the management implements an ongoing quality assurance system which creates effective oversight in monitoring reviews, risk assessments and updated care plans.

26/11/24	Magdalen House	Care at Home/ Housing Support Service Private	3	-	4	-	-
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Recommendation 1
 By 07 February 2025, you must ensure people’s health and wellbeing is consistently supported by their care and the provider must ensure all care documentation is in place, updated in response to any health changes and reflective of people’s care needs. In particular you must: ensure MUST assessments are in place and appropriately monitored.

- Legend:
- 6** excellent
 - 5** very good
 - 4** good
 - 3** adequate
 - 2** weak
 - 1** unsatisfactory

