

# CERA - Lothians Housing Support Service

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**Type of inspection:**  
Announced (short notice)

**Completed on:**  
20 March 2024

**Service provided by:**  
CERA Care Operations (Scotland)  
Limited

**Service provider number:**  
SP2009010680

**Service no:**  
CS2017358641

## About the service

CERA - Lothians is registered as a combined care at home and housing support service providing care in peoples' homes across East Lothian.

At the time of inspection the service supported 291 service users.

## About the inspection

This was a short notice unannounced inspection which took place on 13 March 2024 and 18 March 2024 between 09:00 and 15:30 where the inspector shadowed one carer. 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:

- spoke with people using the service and their families/friends
- talked with members of staff and the management team
- observed staff practice and daily life of people using the service
- reviewed documents.

## Key messages

Staff were led well by a strong management team.

Staff had very pleasant interactions with service users and knew them well.

Staff treated service users and their homes with care.

Staff felt that training and supervision helped them carry out their role.

The implementation of a service app was positive in making sure the majority of people could be kept up to date.

## From this inspection we evaluated this service as:

In evaluating quality, we use a six point scale where 1 is unsatisfactory and 6 is excellent

How well do we support people's wellbeing?	4 - Good
How good is our leadership?	4 - 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?

4 - Good

We evaluated this service as performing at a good level. This means that there were a number of important strengths which when taken together clearly outweigh areas for improvement. The strengths had a significant positive impact on people's experiences and outcomes.

People said, "some are just really lovely" and "they are friendly faces and I've built up friendships."

There was very kind interactions with no rushing of people and staff left the home as they found it, tidying as they went along. This meant that people felt respected and cared for. A few people did not have consistent carers and were not always notified of changes being made. People who did not use the service app were more affected by inconsistency or lack of information but in the main families were extremely positive that they received up to date information.

The managers planned to develop a newsletter to tell people about changes in the service, including the process for complaint management. We will monitor this at the next inspection.

Staff knew people well and as a result could engage positively with them and their families. Staff knew when there were problems and could contact GP and other services for assistance.

People told us how they have benefited from using the service. Comments included, "The service allows her to stay at home," "(service user) would struggle if on her own," "mother was forgetting to shower properly" and "(service user) got mixed up with medications." Some service user skin conditions had improved due to regular skin care.

Some people appreciated that by using the service, the family members had peace of mind because their loved one was cared for.

In addition, family have reported on several occasions that they had confidence in the care that was provided because family members were happy and knew people well.

The following comment shows that people were listened to and action was taken by CERA. This demonstrated that staff and managers worked with common values to make sure that people were treated with dignity and respect. One stated "working for CERA I am happy, I am happy knowing that the service users in which we provide care and support to are given a voice and are treated with the utmost respect and dignity and if these needs are not met CERA management team ensure that all issues are dealt with promptly, I like that! It means I can do my job assured that my concerns are dealt with and that gives me a happy feeling."

## How good is our leadership?

4 - Good

We evaluated this service as performing at a good level. This means that there were a number of important strengths which when taken together clearly outweigh areas for improvement. The strengths had a significant positive impact on people's experiences and outcomes.

The office was accessible, spacious, open plan with private areas and felt very calm. Information was provided about what the service offered which meant that people were clear of what to expect. It also meant they had contact numbers for staff, including out of hours. People told us that the service was supportive and responsive, and any issues raised were remedied quickly. This gave people the sense of being listened to and cared for.

A range of audits were carried out to monitor the quality of the service. These could be improved by the inclusion of an action plan to ensure the actions identified are addressed and there is continued improvement.

Some further audits could be beneficial for the service which would help identify trends and themes and hence allow them to take action.

The management team had led the service through significant change with the amalgamation of another service. All people had been contacted, consulted and their care reviewed to make sure that their care met their needs. Staff were given regular training, supervision and support. The team worked well together communicating and collaborating well. This meant that people could be confident that staff tried to deliver consistent care to a good standard.

Work was needed to update the service improvement plan. This will help focus the management team in working towards their planned improvements in the service. The management team planned to work on this and we will monitor this at the next inspection.

The management team assured the quality of the service by making contacts with clients regularly. Since October 2023, 360 contacts were made by managers to check the quality of the service and to hear feedback from service users and their families.

### How good is our staff team?

4 - Good

We evaluated this service as performing at a good level. This means that there were a number of important strengths which when taken together clearly outweigh areas for improvement. The strengths had a significant positive impact on people's experiences and outcomes.

Recruitment of staff was good with appropriate checks made and references sought.

Training was comprehensive with a two day induction and ongoing training where staff were prompted by the electronic system to complete this.

Staff felt positive about the training and felt it prepared them for work.

Checks that staff were registered with an appropriate regulatory body (Scottish Social Services Council) were in place and monitored.

People could be assured that staff had the skills and knowledge to deliver care.

Observation of staff showed that they were aware of infection prevention and control and used PPE. They stated that they could access supplies. This meant that risks of infection were reduced.

### How well is our care and support planned?

4 - Good

We evaluated this service as performing at a good level. This means that there were a number of important strengths which when taken together clearly outweigh areas for improvement. The strengths had a significant positive impact on people's experiences and outcomes.

Care plans differed in their content but showed relevant information. Some were set out in a person centred way and showed preferences and choices of service users. Guidance for staff was given where service users experienced stress and distress which helped them manage situations.

Care plans were moving to an electronic app. This meant that they could be easily kept up to date with changes in care.

This had been a popular introduction by staff, some service users and families.

People commented: "I check the app which is great. Can see everything." and "She gets the app and I can see when they've been and when she has had medications and what they are."

Instant changes could be made with care plan updates and information on staff changes or lateness. Medications systems were in the app and any changes were updated promptly which meant that people received the right medication at the right time. The service was encouraging and supporting people to access the app so that they could be fully involved in their care.

## What the service has done to meet any requirements we made at or since the last inspection

### Requirements

#### Requirement 1

1. By 2 September 2022, the provider must support people to receive their 'as required' medication to maintain their health and wellbeing. To do this, the provider must, at a minimum:
  - a) ensure staff administering 'as required' medication have clear training and guidance on when to administer it
  - b) ensure that there is adequate recording in place to document when the medication is given and the reason for giving it
  - c) ensure staff have clear guidance for when to seek advice from medical professionals when administering medication
  - d) implement a system for management to audit and review medication protocols for individuals.

**This requirement was made on 5 August 2022.**

#### Action taken on previous requirement

Medication management has moved forward since this requirement was made. Staff have access to an app which sets out medications, what they are, the dose, maximum dose over 24 hours, when to administer and for what reason. Staff have been trained in medications and in the use of the app. Recordings are made and there is an alert to advise on contacting others.

Manager can audit and monitor the use of this tool.

We were satisfied that sufficient improvement had been made to meet this requirement.

**Met - within timescales**

## 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

In order to ensure positive outcomes for people receiving support, the manager should ensure that people are informed of when support will be delivered outwith the agreed parameters, in line with their Service User Guide.

**This area for improvement was made on 15 June 2023.**

#### Action taken since then

There was sufficient information to show that people were informed of changes in support. This area for improvement was met.

#### Previous area for improvement 2

The service should provide all service users and their relatives with accurate information on what can be provided as part of the agreed support. This would include reference to travel time. Where travel time is not part of the allocated time then this must be effectively monitored to ensure that people get the correct support as agreed.

**This area for improvement was made on 15 June 2023.**

#### Action taken since then

We were satisfied that this issue has been reinforced to service users. Since this AFI was made the service has moved to banded hours of care. The manager planned to again reinforce this in a newsletter. This area for improvement was 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 well do we support people's wellbeing?	4 - Good
1.1 People experience compassion, dignity and respect	4 - Good
1.2 People get the most out of life	4 - Good
1.3 People's health and wellbeing benefits from their care and support	4 - Good

How good is our leadership?	4 - Good
2.2 Quality assurance and improvement is led well	4 - Good

How good is our staff team?	4 - Good
3.1 Staff have been recruited well	4 - Good
3.2 Staff have the right knowledge, competence and development to care for and support people	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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