

# Lynedoch Care Ltd - Care at Home Support Service

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**Type of inspection:**  
Unannounced

**Completed on:**  
6 December 2024

**Service provided by:**  
Lynedoch Care Ltd

**Service provider number:**  
SP2004007053

**Service no:**  
CS2004084232

## About the service

Lynedoch Care Ltd - Care at Home is registered to provide a service to adults in their own homes. The service is available Monday to Sunday, 24 hours per day.

The service operates from an office base in the Morningside area of Edinburgh. At the time of the inspection a service was being provided to 49 people.

## About the inspection

This was an unannounced inspection. We visited the service on 02 and 03 December 2024. 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 nine people and their relatives.
- spoke with and obtained feedback from 12 staff and management.
- observed practice and daily life.
- reviewed documentation.
- reviewed feedback responses from our Care Inspectorate questionnaire from 11 people using the service and their relatives.

## Key messages

- Staff interactions with people experiencing care were warm, friendly and respectful.
- People were recognised as having their own views and were involved in making decisions.
- Staff took time to find out people's wishes and preferences, promoting a relaxed atmosphere.
- Medication processes were managed well and management staff had clear oversight to ensure good standards were maintained.
- The provider should make improvements to their business continuity planning to ensure potential emergency situations have minimal impact on essential care processes.
- People benefitted from consistent and stable staff teams who worked well together.
- People's care and support was consistent and stable because staff teams worked very well together.

## 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 staff team?	5 - Very 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 key question as good where several strengths impacted positively on outcomes for people and clearly outweighed areas for improvement.

Staff knew people well and treated them with respect and compassion. We observed positive interactions which were warm, chatty and friendly. People said they were very happy with their staff who were 'kind' and 'helpful'. We were assured people could build trusting relationships with staff, which helped meet their wellbeing outcomes.

Staff supported people at a pace which suited their individual needs and preferences. We observed positive interactions where staff took time to find out people's wishes, promoting a relaxed atmosphere. Staff were attentive to people's food and fluid needs and preferences, providing support to prepare meals and drinks when required. People could be assured of support from staff who were attentive and considerate of their individual circumstances.

Personal plans contained clear information about people's health and wellbeing needs. Staff demonstrated good knowledge about people's health conditions and how this impacted on their day-to-day experiences. People and their relatives told us they felt reassured by staff who were 'understanding' and 'couldn't be more helpful'. We spoke to the management team about introducing additional training opportunities for staff around different health conditions. The manager agreed to act on this as it would enhance staff members' skills and knowledge.

Records of administration of prescribed medication were well organised and accurately completed, with good oversight from the manager which helped maintain good standards. Staff were trained in the administration of medication and observations of their practice were carried out by senior staff. Staff encouraged people to maintain as much control over their medication as possible to maximise their independence. Overall, people could be confident they were supported safely with their medication needs.

People and their families were involved in reviewing their care and support, including information relating to their health and wellbeing. Most care reviews had taken place however some had been delayed due to significant IT issues which had impacted on the manager's time. Although there were plans to complete all remaining reviews within the next few months, unexpected events meant people's opportunity to express their views had been affected. The provider should review and update their business continuity plans to ensure future emergency situations have minimal impact on essential care processes. See area for improvement one.

Further details can be found under the section: "What the service has done to meet any areas for improvement we made at or since the last inspection"

### Areas for improvement

1. To support best outcomes for people and minimise disruption to essential care processes, the provider should review and update its business continuity policies and procedures. This should include but is not limited to, identifying solutions to manage potential failures in their IT systems.

This is to ensure care and support is consistent with Health and Social Care Standards (HSCS) which state: 'I benefit from a culture of continuous improvement, with the organisation having robust and transparent quality assurance processes' (HSCS 4.19).

## 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.

Staff felt well supported by their seniors and each other and this was underpinned by effective communication to share information. This meant issues within the service were identified quickly and staff could respond appropriately.

People received a weekly staffing schedule and although there could be unexpected changes, these were communicated effectively so people knew who to anticipate throughout the day. People could be assured their care and support would be consistent and stable because people worked well together.

Staffing levels were based on individual need and the scheduling system took account of factors which helped match people with the most compatible staff. Staff had sufficient time to engage in meaningful conversations and interactions with people. Consequently, people could get to know their staff well, helping them achieve better outcomes.

Recruitment processes were thorough and completed in line with current guidance. Prior to lone working all staff were required to carry out a period of induction and shadowing with more experienced colleagues. Consequently, people could be confident their staff were recruited safely.

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

### Areas for improvement

#### Previous area for improvement 1

To support people to achieve the best possible outcomes, the provider should hold regular review meetings. This is to ensure that formal discussions capture what is working well for the person and any improvements that may be needed. Meetings should take place in consultation with the person and their family members or representatives, at least once in each six-month period.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that: 'My views will always be sought and my choices respected, including when I have reduced capacity to fully make my own decisions' (HSCS 2.11) and 'I am fully involved in developing and reviewing my personal plan, which is always available to me' (HSCS 2.17).

**This area for improvement was made on 7 April 2023.**

## Action taken since then

The provider had processes in place to ensure people were involved in reviewing their own care. People told us they were supported to make important decisions and felt involved in developing their personal plans.

Within the last six months, the majority of review meetings had taken place with individuals and their representatives. Some were delayed however, due to the manager's time being taken up with unexpected and significant information technology (IT) issues. The management team was in the process of planning further meetings to ensure all reviews would be carried out.

Further details can be found under the section: "How well do we support people's wellbeing"

**This area for improvement has been met.**

## Previous area for improvement 2

To support the best possible outcomes for people and promote a culture of continuous improvement, the provider should work with others to implement a robust improvement plan. To do this, the provider should, at a minimum:

- a) Create clearly defined and measurable actions when improvements have been identified.
- b) Establish clear lines of responsibility and accountability for identified improvements.
- c) Implement robust plans to meet the service's performance targets.

This is to ensure that care and support is consistent with Health and Social Care Standards (HSCS) which state that: 'I benefit from a culture of continuous improvement, with the organisation having robust and transparent quality assurance processes' (HSCS 4.19).

**This area for improvement was made on 7 April 2023.**

## Action taken since then

The provider had a comprehensive improvement plan in place with clearly defined actions and timescales for developing the service. The actions had been reviewed and revised by the management team. People could be assured the provider promoted a culture of continuous improvement.

We discussed the benefits of self-evaluation, including involvement of key stakeholders in this process and how this approach could be adopted to further support improvements in the service.

**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 well do we support people's wellbeing?	4 - Good
1.3 People's health and wellbeing benefits from their care and support	4 - Good
How good is our staff team?	5 - Very Good
3.3 Staffing arrangements are right and staff work well together	5 - Very Good

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