

## Kirriemuir Day Care Support Service

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Telephone: 01575 574 057

**Type of inspection:**  
Unannounced

**Completed on:**  
27 August 2025

**Service provided by:**  
Kirriemuir Day Care Limited

**Service provider number:**  
SP2003000063

**Service no:**  
CS2003000407

## About the service

Kirriemuir Day Care is based in the residential town of Kirriemuir. The service is situated near to the centre of the town and provides support to adults and older people in a day centre and a care at home service.

At the time of the inspection 48 people were using the service.

## About the inspection

This was an unannounced follow up inspection which took place on 26 August 2025. 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 and complaints information, information submitted by the service and intelligence gathered since the last inspection.

In making our evaluations of the service we:

- Spoke with six people using the service.
- Spoke with staff and management.
- Observed practice and daily life.
- Reviewed documents.

## Key messages

- Quality assurance processes were contributing to improvements within the service.
- Medication administration records were accurate and up to date.
- Formal observation of staff practice had been introduced.
- People's personal plans were detailed and person centred.

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

### Requirements

#### Requirement 1

By 8 August 2025, the provider must ensure people have personal plans, and risk assessments in place which are sufficiently detailed, personalised and provide staff with effective guidance on how to support people. These plans should be reviewed within regulatory timescales or sooner if required.

This is to comply with Regulation 4(1)(a) (welfare of service users) and Regulation 5 (personal plans) of The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/210).

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that:

'My personal plan (sometimes referred to as a care plan) is right for me because it sets out how my needs will be met, as well as my wishes and choices'. (HSCS 1.15).

**This requirement was made on 25 April 2025.**

#### Action taken on previous requirement

The service had made good progress towards improving the content and accuracy of people's personal plans. A new template had been introduced. We found personal plans were well written, detailed, and personalised. This reassured us that staff had essential information required to provide person centred support.

Where a risk had been identified, a risk assessment had been undertaken which was personalised and reflective of the person's care and support needs.

People's care and support was reviewed within regulatory timescales. One person told us they "felt listened to" at their review meeting and they had been "involved in developing their person plan". This meant people received care and support tailored to their needs and wishes.

We found some review meeting minutes to be brief and lacked detail. This meant people's outcomes were

not always captured. We brought this to the manager's attention and had confidence that this would be addressed. We will follow this up at our next inspection.

This requirement has been met.

## 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

To ensure people receive their medication as prescribed, the service should ensure medication administration records are accurate and up to date.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that:

'I experience high quality care and support based on relevant evidence, guidance and best practice'. (HSCS 4.11).

**This area for improvement was made on 25 April 2025.**

#### Action taken since then

We sampled medication records and found these to be up to date and contained clear direction to guide staff.

Records were audited which provided an improved oversight. This allowed any errors or discrepancies to be detected and acted upon timeously.

This area for improvement has been met.

#### Previous area for improvement 2

To ensure people benefit from a culture of continuous improvement, the provider should develop their quality assurance processes. This should include clear action plans with timescales where deficits and/or areas for improvement have been identified. Action plans should be regularly reviewed and signed off as complete, once achieved by an appropriate person.

This is to ensure that care and support is consistent with the 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 25 April 2025.**

#### Action taken since then

Effective quality assurance systems were in place, with regular audits conducted. Issues were documented and addressed through action plans, which were signed off upon completion. The management team met monthly to review the outcomes. This meant we could be confident that improvements were driven forward.

People's views about the service were actively sought. A members' committee was in place and were meeting regularly. This meant that people were regularly consulted about their care and service that they receive. People's input had directly influenced service improvement, for example, the purchase of a new television for the day centre.

This area for improvement has been met.

### Previous area for improvement 3

To ensure that people can be confident that staff supporting them are competent and skilled, the provider should introduce formal observations of staff practice to support staff to understand how their training and development impacts on practice and to improve outcomes for people who use the service.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that:

'I have confidence in people because they are trained, competent and skilled, are able to reflect on their practice, and follow their professional and organisational codes'.  
(HSCS 3.14).

**This area for improvement was made on 25 April 2025.**

#### Action taken since then

Formal observation of staff practice had been introduced. The management team undertook regular spot checks to assess staff performance and competency. Outcomes from these were discussed with the staff member. This helped to highlight good practice as well as address areas for improvement.

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).

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