

Clayton Care Limited Support Service

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Type of inspection:
Announced (short notice)

Completed on:
19 August 2025

Service provided by:
Clayton Care Limited

Service provider number:
SP2010011215

Service no:
CS2010274459

About the service

Clayton Care provides care at home to people living in their own home in Edinburgh. The service supports people with learning or physical disabilities and mental health needs.

32 people were using the service at the time of our inspection.

About the inspection

This was a short-notice announced inspection conducted between 12 and 15 August 2025. We visited the office and met with the manager on 12 August, reviewed evidence on 13 and 14 August, and visited individuals in their homes on 15 August. Feedback was provided to the manager on 19 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 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 one of their relatives.
- Received feedback from a further three people and eight of their relatives via our online questionnaire.
- We spoke with five members of staff and the management team. Along with a further nine staff, via our online questionnaires.
- Received feedback from one professional who had regular engagement with the service.
- Observed staff practice and daily life.
- Reviewed a range of documents.

Key messages

- We observed warm, respectful, and natural interactions between staff and the individuals they support.
- Personal plans were of a good standard, offering clear guidance to staff on how to meet people's care needs and achieve agreed outcomes.
- Staff, as well as some supported individuals and their relatives, expressed that communication with management could be improved. Staff noted a lack of regular team meetings and highlighted the value of having more opportunities to come together, share experiences, and discuss best practices.
- Since the previous inspection, a range of quality assurance measures has been introduced. While these were adequate, they should be expanded to include a continuous improvement and development plan.
- As part of this inspection, we reviewed the service's self-evaluation of key areas. We found that self-evaluation was not yet being carried out. We discussed the benefits of adopting this approach to support ongoing service improvement.

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?	3 - Adequate
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 key question as good. While there were notable strengths which had a significant positive impact, further improvements were needed to ensure people consistently experience the best possible outcomes.

During our visits to individuals' homes, we observed warm, respectful, and natural interactions between staff and those they support.

High levels of staff consistency, without reliance on agency workers, contributed to strong, trusting relationships between staff, the people supported, and their families.

People were encouraged to live as independently as possible and actively participate in meaningful community activities. These included attending day centres, engaging in work placements, pursuing educational opportunities, and maintaining connections with friends and family.

Medication records were inconsistently completed. Some errors, particularly involving controlled drugs, that posed potential risks to individuals' health. In response, the manager implemented audits, staff retraining, and competency assessments, which have helped reduce the frequency of errors.

Staff required a deeper understanding of safe medication administration and accurate record-keeping. Continued focus is essential to ensure medications are administered safely by skilled and competent staff, preserving trust and confidence among those supported. Reflective accounts following errors were recommended to the manager, to foster learning and awareness of the potential impact.

Accident and incident records were well maintained, offering clear documentation of events. The manager provided effective oversight, regularly reviewing these records to identify patterns or trends. This proactive approach enabled timely interventions and helped mitigate the risk of recurrence.

Overall, people expressed satisfaction with the quality of care they received. One individual shared: "Amazing care staff who look after my son and care for all his needs".

How good is our leadership?

3 - Adequate

We evaluated this key question as adequate. While there were strengths which had a positive impact, several key areas required improvement.

Managers implemented a variety of quality assurance systems to monitor the care provided, including staff practice observations, audits, and satisfaction surveys involving supported individuals, their families, and staff. Although these measures were useful in identifying areas for positive change, the findings were not integrated into a structured plan for continuous improvement and development.

Communication from management with staff, supported individuals, and relatives could be improved through more consistent, transparent, and inclusive practices. Regular updates, open feedback channels, and personalized communication would help everyone feel informed, valued, and engaged, ultimately strengthening trust and improving the quality of care.

There was a noticeable reliance on Care Inspectorate scrutiny to drive improvements, rather than the management team adopting a more proactive stance. We recommended the manager consider conducting a self-evaluation of the service's performance in meeting people's care needs. This would strengthen the existing quality assurance systems and serve as a valuable benchmarking tool, to support ongoing improvement and development initiatives.

Areas for improvement

1. The provider should ensure that people benefit from receiving support by an organisation that has a positive culture of continuous improvement, and development in the form of an action plan that is specific, measurable, actionable, realistic and timebound (SMART).

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

How good is our staff team?

4 - Good

We evaluated this key question as good. While there were notable strengths which had a positive impact, further improvements are needed to ensure people consistently experience the best possible outcomes.

Our observations of staff practice showed they were well-intentioned and genuinely committed to caring for the individuals they support.

Staff views on the support they received from the management team were mixed. While some felt managers were approachable, others expressed a desire for greater visibility and availability to discuss concerns. Although peer support was strong, there was a shared view that more direct support from managers would be beneficial, particularly in areas such as scheduling regular team meetings.

Communication emerged as a key area for development. Staff highlighted the need for more opportunities to share learning, discuss client care to ensure continued positive outcomes, and stay informed about current best practices.

Staff participated in a variety of training courses, both online and in person. However, there was a heavy reliance on online delivery, with fewer opportunities for classroom-based, face-to-face learning. While some in-person sessions were available, staff expressed a strong interest in expanding these to support deeper, more meaningful learning experiences.

Regular observations of staff practice were carried out, focusing on interactions with individuals, how care needs were met, and identifying areas for reflective discussion and training. Records were well maintained, and we saw clear evidence any personal development needs identified during spot checks were followed up, during supervision meetings with managers.

How well is our care and support planned?

4 - Good

We evaluated this key question as good. While there were notable strengths which had a positive impact, further improvements are needed to ensure people consistently experience the best possible outcomes.

We examined a sample of nine personal plans. These plans provided staff with clear, practical guidance on delivering care and support tailored to each individual. The documentation offered a thorough overview of each person's life history, values, choices, wishes, and preferences, ensuring the care provided was person-centred and meaningful.

Risk assessments were detailed and well-structured, clearly identifying each risk, its likelihood and potential impact, along with appropriate control measures. This supported a proactive approach to risk enablement.

Individuals had agreed-upon goals they wished to achieve over time, such as staying physically active, maintaining friendships, or participating in community activities. Regular reviews were conducted to monitor progress and ensure staff were effectively supporting people in reaching their goals.

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

The provider should ensure that people benefit from receiving support by an organisation that has a positive culture of continuous improvement and development in the form of an action plan that is specific, measurable, actionable, realistic and timebound (SMART).

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

This area for improvement was made on 9 July 2024.

Action taken since then

There was a noticeable reliance on Care Inspectorate scrutiny to drive improvements, rather than the management team adopting a more proactive stance. We recommended the manager consider conducting a self-evaluation of the service's performance in meeting people's care needs. This would strengthen the existing quality assurance systems and serve as a valuable benchmarking tool to support ongoing improvement and development initiatives.

Previous area for improvement 2

The provider should ensure that there are meaningful opportunities for staff to meet as a team. This is to support the ongoing development of staff, ensuring they are competent, skilled and able to reflect on their practice to continue to meet people's needs.

This is to ensure care and support is consistent with the Health and Social Care Standards (HSCS) which state: '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 9 July 2024.

Action taken since then

staff expressed a strong interest in having more face-to-face opportunities to meet, whether at team meetings or training events. This would support communication and time to have reflective practice discussions. This has been highlighted in the body of this report.

Complaints

There have been no complaints upheld since the last inspection. Details of any older upheld complaints are published at 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 leadership?	3 - Adequate
2.2 Quality assurance and improvement is led well	3 - Adequate
How good is our staff team?	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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