

NE Home Care Service Leith Housing Support Service

101 Niddrie Mains Road Edinburgh EH16 4DS

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Type of inspection:

Announced (short notice)

Completed on:

28 August 2025

Service provided by:

City of Edinburgh Council

Service provider number: SP2003002576

Service no:

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Inspection report

About the service

NE Homecare Service Leith is a housing support and care at home service. The provider is the City of Edinburgh Council, the service is part of the Edinburgh Health and Social Care Partnership. The service has the main office in Niddrie Mains with a local office in Leith. The service provides cover across North East Edinburgh.

The service is registered to provide care and support to adults over the age of 16. People who access the service are mainly older adults, who are assessed and supported with reablement after an illness or hospital stay. The service offers support between 8am and 9.30pm each day.

About the inspection

This was a short announced inspection which took place between 13,19 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 family member
- spoke with ten staff and management
- · observed practice and daily life
- reviewed documents
- received feedback from three involved professionals

Key messages

- · People were supported well with their health and wellbeing
- People were positive and motivated by the support they received
- People knew the staff teams that supported them
- People were supported by a range of professionals who offered their expertise
- Support was responsive to people's changing needs

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?	5 - Very Good
How good is our staff team?	5 - Very 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?

5 - Very Good

We made an evaluation of very good for this key question. An evaluation of very good applies to this service as they have shown major strengths in supporting positive outcomes for people.

People were supported in their homes by a staff team they knew. We observed staff introducing themselves on arrival with a warm greeting. People told us 'staff are lovely, make a difference to my life, give me choices,' 'staff are kind and thoughtful, encourage you to be as well as you can be.' The service did not use agency staff. People had support that ranged from one to four visits per day. People told us they knew when to expect staff and they arrived on time. On the rare occasion staff were going to be delayed the office made contact to advise people. This meant people had positive relationships and support from a team that were consistent.

Where people required support with medication administration, systems were in place. The service promoted people to be independent, some managed their own medications. Staff training included annual updates as well as direct observations of practice to remain competent. Managers undertook regular audits and checks and were currently reviewing and updating the medication policy. As a result people had support, if required, from a team that were skilled.

People's health and wellbeing needs were being met by a range of professionals that included the occupational therapist and physiotherapist. One professional told us 'staff provide consistent skilled, support and genuine care for people.' Staff were able to make referrals quickly if frontline staff identified people were unwell or required further assessment. One person told me they had met the physiotherapist, who was working with them to become more mobile. This meant people were well supported by staff and professionals to maintain their health and wellbeing as they worked well together.

Where people needed equipment at home this was provided after assessment. If staff recognised a change in people's ability they were able to make referrals for further assessment. One person we spoke to told us they were waiting on the arrival of new equipment. Staff received regular manual handing training. The managers maintained a matrix to ensure training was up to date. People could be confident that staff were trained to support them and that they were prompt in reporting any health changes.

Few people had support at mealtimes. The staff encouraged people to be as independent as able. For those that were independent they chose their own menu plans and meals. Where staff provided meal time assistance people made their own choices about what they wanted to eat and drink. This meant people enjoyed what they ate or drank at mealtimes if supported.

Staff had access to personal protective equipment (PPE) and used this appropriately when providing care in people's homes. Direct observations for staff included supervision of the use of PPE and handwashing techniques. This meant people could be confident in staff to minimise the risk of infection.

How good is our staff team?

5 - Very Good

We made an evaluation of very good for this key question as we found significant strengths in aspects of the care provided and how these supported positive outcomes for people.

We observed kind, warm interactions between staff and people with positive staff working relationships. Staff were observed to be respectful in people's homes. Staff told us they got on well with their colleagues and managers and felt supported. One person said, 'we work well as a team'. For people this meant they received care and support from a stable staff team that worked well together.

New employees had a period of induction, with the opportunity to shadow more experienced staff. Staff had core mandatory training as well as the opportunity to undertake vocational courses. Staff identified areas where additional training would be helpful and managers were going to look at taking this forward. Training sessions were on line or face to face. Managers had oversight of staff training and when updates were required. Team meetings were regular for staff. This meant people could be confident staff had the skills and training to support and care for them.

Staff had supervision, direct observations of practice and annual conversations to support ongoing learning and development. Staff told us they felt supported by their managers and had enough time to reflect on their practice in supervision. One staff member saying 'can talk things through, enough time'. People were able to provide feedback during observations of practice. This meant people received care and support from a staff team that had time to reflect on their practice.

People were visited by consistent staff teams. The rota for staff was scheduled as four days on four off. All had access to a work mobile phone to see their scheduled visits. Staff and managers were in regular contact with each other and communication about changes were by phone ,text or email. At weekends and out of office hours an on call system was in place. This meant people experienced consistent care from staff teams whom they knew.

How well is our care and support planned?

4 - Good

We evaluated this key question as good where several strengths impacted positively on outcomes for people and clearly outweighed areas for improvement.

People had a personal plan at home they or their family member had helped to complete. An electronic version was held centrally by the managers and updated as required. Staff completed daily notes and communication updates at each visit. Risk assessments were completed and held in each plan. Some people's goals and outcomes had still to be added to their plans. Reviews were held at a minimum every four weeks with a fuller review at six weeks. People we spoke to told us they knew who to contact for advice and that communication was good.

Recent changes to peoples plans included new paperwork for setting personal goals and outcomes to promote their independence. Staff were in the process of receiving training to assist them complete this with people. Managers had recognised this as an area for improvement. We will monitor this at our next

Inspection report

inspection. Where people had legal documentation it was held in their plan. This meant people had a personal plan that was right for them.

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?	5 - Very Good
1.3 People's health and wellbeing benefits from their care and support	5 - Very Good

How good is our staff team?	5 - Very Good
3.3 Staffing arrangements are right and staff work well together	5 - Very 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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