

Delight Supported Living Edinburgh and East Lothian

Housing Support Service

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Type of inspection:
Announced (short notice)

Completed on:
29 October 2025

Service provided by:
Delight Supported Living Ltd

Service provider number:
SP2009010723

Service no:
CS2016350594

About the service

The service provides care at home to adults in East Lothian with its office based in Musselburgh.

The service was registered with the Care Inspectorate on 20 December 2016 and the provider is Delight Supported Living Limited. At the time of the inspection the service offered care and support to 100 people who were almost all older people.

About the inspection

This inspection took place on 22 and 23 October 2025 after 24 hours notice to the service. The inspection was conducted by two inspectors from the Care Inspectorate. To prepare for the inspection we reviewed information about this service, this included previous inspection findings, information submitted by the service, complaints and intelligence gathered.

We evaluated how well people's health and wellbeing was supported as well as the quality of staffing.

To inform our evaluation we:

- spoke with 12 supported people and four relatives and received eleven questionnaires
- spoke with eight care workers and two managers and received 10 questionnaires
- had contact from three professionals working with the service and received four questionnaires
- observed how well care staff supported people
- visited the office to see how it was run
- reviewed documents and electronic records.

Key messages

- People were satisfied with the quality of the care and support received.
- Staff interacted warmly and respectfully with people.
- The planning of the support visits was organised and significantly late or missed visits were not an issue.
- Staff were well supported by observing staff competence, attending team meetings and face-to-face supervision sessions.

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?	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 the service as operating at a good level for this key question. There were several strengths with the care provided and how this supported positive outcomes for people.

Staff interacted warmly and respectfully with people and knew their history, routines and preferences. People did not feel rushed by staff and were supported to communicate in a way that was right for them, at their own pace. This meant people could build trusting relationships at the service.

Comments from people experiencing care and relatives included:

"I am very happy; all the carers are great and nice."

"Care itself is great, they know their job."

"They are friendly, they care and try their best."

A professional working with the service commented "Delight often go above and beyond for their patients especially when supporting them to health appointments."

Techniques used to assist people to mobilise were undertaken in a safe and reassuring way. Support with eating and drinking was undertaken in a dignified way. We observed and people told us that staff used gloves and aprons appropriately. People were asked what they wanted to eat and meal preparation was competent. Staff cleaned and tidied up after themselves. Medication administration was organised with regular audits by management. This ensured that people experienced safe and effective medication.

How good is our staff team?

4 - Good

We evaluated the service as operating at a good level for this key question. There were several strengths with the staff training and support.

Staff recruitment processes were thorough. There were frequent quality checks by management about observing staff competence in people's homes. Staff had face-to-face supervision regarding their performance and development as well as regular staff meetings to assist with effective communication. This ensured people experienced good quality care and support based on relevant guidance and best practice.

The planning of the care visits was organised and significantly late or missed visits were not an issue. People had been informed, in writing, of the visit times and how long they were. Electronic access to the daily care notes and real time information regarding visiting care staff was in the process of being made available to supported people and relatives. Staffing arrangements worked well with no agency staff being used, therefore people experienced a consistent care team. We observed that staff worked together well, in a positive and engaging manner. This ensured people benefited from a warm atmosphere because there were good working relationships.

Comments from people experiencing care and relatives included:

"I mostly have the same carers all the time."

"I have regular carers, most of the time."

"The staff are respectful and always manage to get my dad to smile."

Professionals working with the service commented:

"Anytime that I have needed to liaise with a member of staff, there is always someone available."

"They have consistent carers which helps build relationships."

"I do feel that the service is managed well and the coordinators are very helpful and responsive."

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 develop a plan for six monthly reviews of care. These should evidence if agreed outcomes are met. Where these have not been met then actions should be recorded to enable these to be followed up and monitored.

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

'I am recognised as an expert in my own experiences, needs and wishes' (HSCS 1.9).

'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 area for improvement was made on 19 November 2019.

Action taken since then

The service was almost up to date with the six monthly reviews of personal plans (as required by legislation) to take place with supported people and their relatives. There had also been plenty of additional reviews when there were specific issues that needed attention. This made sure that everyone had the opportunity for their views to be heard.

This area for improvement has been met.

Previous area for improvement 2

People should be confident their complaint will be processed in accordance with good practice complaint handling and there is communication with the complainant throughout this process. The organisation should review its complaint's policy to incorporate all the stages of good practice complaint handling.

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

'If I have a concern or complaint, this will be discussed with me and acted on without negative consequences for me' (HSCS 4.21).

This area for improvement was made on 19 June 2025.

Action taken since then

The complaint policy had been effectively implemented. Complaints had been investigated thoroughly. There were apologies where necessary and appropriate actions undertaken to resolve the complaints and improve practice.

This area for improvement has been met.

Complaints

Please see Care Inspectorate website (www.careinspectorate.com) for details of complaints about the service which have been upheld.

Detailed evaluations

How well do we support people's wellbeing?	4 - Good
1.1 People experience compassion, dignity and respect	5 - Very Good
1.3 People's health and wellbeing benefits from their care and support	4 - Good

How good is our staff team?	4 - Good
3.3 Staffing arrangements are right and staff work well together	4 - Good

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