

MM Support Dundee and Angus Housing Support Service

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Type of inspection:

Announced (short notice)

Completed on:

14 November 2025

Service provided by:

Mitchell & Murdoch Care Ltd

Service provider number: SP2021000074

Service no:

CS2025000073



Inspection report

About the service

MM Support Dundee and Angus are part of private company, Mitchell and Murdoch. The service was registered in February 2025 to provide care at home and housing support.

About the inspection

This was an announced short notice inspection which took place between 10 and 13 November 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 registration information, information submitted by the service, and intelligence gathered since registration.

In making our evaluations of the service we:

- spoke with seven people using the service and eight of their families
- · spoke with seven staff and management
- · reviewed documents.

Key messages

- Staff were highly thought of by people using the service.
- People told us that the staff were kind, caring, and attentive to their needs.
- People continued to have varying experiences regarding the consistency and continuity of staff.
- Staff training needs to be reviewed to ensure staff have the right skills to support people.
- The service needs to ensure that staff recruitment is carried out safely.

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?	3 - Adequate
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, where several strengths impacted positively on outcomes for people and clearly outweighed areas for improvement.

People's experiences of care were largely positive. Most people we spoke with told us they were happy with the support they received. They described staff as respectful, kind, and cheerful.

People commented that staff looked after them well, that they supported them safely, and were helpful. Comments included: "The staff are just great, we couldn't wish for better for mum" and "I get on so well with my carers, I like to have a chat with them while they help me". This contributed to warm and trusting relationships.

People told us that staff followed their care plan. This included ensuring that personal care and help with areas, including moving or assisting them to eat and drink or take their medication, was carried out well. People were also asked if there was any other support they needed before staff left them. This helped people to maintain their wellbeing.

Staff supported people with their medication by either offering prompts or administering medication. Where staff were required to administer topical application medication, it was not always clearly recorded in their care plan, on a medication administration sheet, or recorded as given by staff. This is important to ensure that people's skin integrity is maintained. The manager agreed to review this.

How good is our leadership?

3 - Adequate

We evaluated this key question as adequate, where strengths only just outweighed weaknesses.

There was a quality assurance self evaluation tool and improvement plan for the service with audits being developed to ensure monitoring of service performance with the aim of continuous improvement. We found that some audits and supporting documentation, whilst identifying areas for improvement, were unclear about persons responsible and timescales for completion. This is important to help monitor and drive forward service improvements. The manager agreed to take this forward.

The leadership team acknowledged that service improvements were needed to further improve people's experiences of the service. We discussed the importance of involving the staff team and people using the service to identify where improvements were needed. An initial survey had been sent out to these groups to gather their views of what was working and where improvements were needed.

Managers evidenced learning from complaints and were taking action to address the issues raised.

The service was making appropriate notifications to the Care Inspectorate. This helped to ensure that we were kept up to date with events in the service.

The findings of key question 3 regarding safe recruitment were taken into account when evaluating this key question.

How good is our staff team?

3 - Adequate

We evaluated this key question as adequate, where strengths only just outweighed weaknesses.

Staff had developed a good rapport and understanding of the care and support needs of people using the service. This was evident in the connections that had been developed. One person commented about the staff team: "We could not ask for a better team of staff around mum".

Consistent relationships with familiar staff were valued. People appreciated when being supported by regular carers who knew them well. This helped to promote emotional wellbeing and a sense of security. However, people said there could be changes to who supported them and timings of visits. Some people were supported by staff of the opposite sex and this made them uncomfortable. Comments included: "I would like the same staff to call on me and I'd prefer female staff. I feel uncomfortable with men helping me wash" and "I just wish that they were able to give consistent times and let you know if they are running late or of any changes to staff".

We discussed with the provider how people were understanding that support arrangements sometimes needed to be changed but this meant people did not benefit from consistent support and that any changes needed to be communicated timeously (see area for improvement 1).

It is important to ensure that staff are recruited well to ensure that people are supported safely. Examination of recruitment records found that whilst some aspects of recruitment had been managed appropriately, that this was not consistent. The service had not sought a full work history from one staff member and for another staff member a right to work check had not been completed prior to employment (see requirement 1).

The service were accessing some staff training through NHS Education for Scotland TURAS. The training overview still had to be updated to evidence that staff had the correct skills for their role. A new training manager was due to start and would be taking this forward.

Requirements

1. By 30 January 2025, the provider must ensure that staff are recruited safely to ensure that people using the service are kept safe.

To do this, the provider should follow the 'Safer Recruitment Through Better Recruitment (2023)' guidance document.

This includes, but is not limited to:

- a) Ensuring right to work checks, Protection of Vulnerable Groups (PVG) checks, and, if necessary, overseas police checks have been completed prior to employees commencing work.
- b) Ensuring satisfactory employment references and, if necessary, character references are received prior to employees commencing work.

This is to comply with Regulation 9(1) (Fitness of employees) of The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/210).

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This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that: 'I am confident that people who support and care for me have been appropriately and safely recruited' (HSCS 4.24).

Areas for improvement

1. To ensure consistency of support, the provider should ensure that people are supported by a team of staff that know them and their needs well.

This should include taking account people's preferences and agreements made with them. This should further include communicating in advance who will provide support and that ensuring people are informed timeously of any changes.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that: 'I am supported and cared for by people I know so that I experience consistency and continuity' (HSCS 4.16).

How well is our care and support planned?

4 - Good

We evaluated this key question as good, as several important strengths, taken together, clearly outweighed areas for improvement.

Care and support planning should maximise people's capacity and ability to make choices. Plans had recently been updated, included identified outcomes, and held personalised information and outlined people's individual preferences and wishes. People told us that their plans were accurate and that the majority of staff followed them, asking them at each visit if they needed any further help. This meant that people were involved in deciding their care.

One person commented that when new staff attended them that they felt they had not read their plan and that they had to tell them what to do. It is important that staff are familiar with the needs of people before they support them.

The service was in the process of carrying out care reviews with all people using the service and of the care plans in place. This was to further ensure that people's needs were being met.

The service used an electronic care planning system which also included risk assessments. These were updated as people's needs or circumstances changed. People had paper copies of the care plans in their homes. Having a paper copy meant that the plan was accessible to people.

The leadership team had identified limitations to the current electronic care plan system and were due to introduce a new and more flexible format for staff to use and for people using the service to access if wished.

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?	3 - Adequate
3.1 Staff have been recruited well	3 - Adequate
3.3 Staffing arrangements are right and staff work well together	3 - Adequate

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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