

CERA - Lothians Housing Support Service

34 Whitecraig Road
Whitecraig
Musselburgh
EH21 8NE

Telephone: 01620 614085

Type of inspection:
Announced (short notice)

Completed on:
19 November 2025

Service provided by:
CERA Care Operations (Scotland)
Limited

Service provider number:
SP2009010680

Service no:
CS2017358641

About the service

At the time of the inspection, the service was registered to provide care at home to adults and children in East Lothian with its office based in Musselburgh. The service was offering care and support to 227 adults. Almost everyone were older people and there were no children receiving care and support. The service was registered with the Care Inspectorate on 15 February 2018 and the provider is CERA Care Operations (Scotland) Limited.

About the inspection

This inspection took place on 12 and 13 November 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 the 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 14 supported people and nine relatives and received 30 questionnaires
- spoke with eight care workers and five senior staff and managers
- had contact from two professionals working with the service
- 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.
- Most people experienced a consistent care team visiting them at home who knew them well.
- Some people were not being told when their visit times changed significantly.
- Staff were supported by observing staff competence, attending team meetings and 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.

People we spoke to were satisfied with the quality of the care and support received. Staff interacted warmly and respectfully with people and knew their history, routines and preferences. The large majority of people said they 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 included:

"Staff are all lovely and respectful."

"I like all the people, all really nice."

"They really are very good and kind."

Comments from relatives included:

"The carers are so encouraging with him."

"They are kind and care about my mum."

"The carers are lovely...very pleasant."

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 staff support.

Staff recruitment processes were thorough. There were regular quality checks by management about observing staff competence in people's homes. Staff were receiving regular supervision sessions regarding their performance and development. Staff meetings were taking place though needed to take place more regularly to assist with effective communication. This is to ensure 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, as part of their personal plan, the visit times and how long they were. Electronic access to the daily care notes and real time information regarding visiting care staff was available to improve communication with supported people and relatives. Some people were experiencing regular changes in visit times and not being told when their visit times changed significantly which was causing distress (see previous area for improvement seven).

We observed that staff worked together well, in a positive and engaging manner. Most people experienced a consistent care team visiting them at home who knew them well. This ensured people benefited from a warm atmosphere because there are good working relationships.

Comments from relatives included:

"They deal with Mum brilliantly and I can see by my Mum's reaction to them when I am in."

"Notes on the App are appropriate and when I am visiting, they are lovely."

"They are so nice and know mum's wit and nice the way they speak to her."

"Carers are very good at phoning if any issues."

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

In order to support people to maintain good personal and continence care, the manager should ensure each person experiencing care or their representative are involved in an assessment of their support in relation to personal and continence care. Reviews of the effectiveness of this support should be recorded at regular intervals or in response to any concerns or changes noted. These reviews should include seeking guidance from other professionals as appropriate.

This is to ensure care and support is consistent with Health and Social Care Standard 1.15:
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.

This area for improvement was made on 23 June 2025.

Action taken since then

People's personal plans had individualised descriptions of their personal care and continence care with what people were independently able to do and what they needed support with. Most of the six monthly reviews of personal plans, as required by legislation, had been completed with supported people and their relatives. This made sure that personal plans remained right for people as their needs change and 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 given the care and support they need to maintain good standards of continence care in line with their needs, choice and preferences for care.

This is in order to comply with:
Health and Social Care Standard 1.4: If I require intimate personal care, this is carried out in a dignified way, with my privacy and personal preferences respected.

This area for improvement was made on 6 August 2025.

Action taken since then

People we spoke to were satisfied with the quality of the care and support received. Techniques used to assist people to mobilise for personal care were undertaken in a safe and reassuring way. Care staff were being proactive if there were any continence concerns and referring to health professionals. A relative said "carers have been good at spotting when my father might have a UTI [Urinary Tract Infection]." We observed and people told us that staff used gloves and aprons appropriately. Any used continence aids, gloves and aprons were being disposed of correctly.

This area for improvement has been met.

Previous area for improvement 3

The service should make sure that people's environments are clean and comfortable for their use. Standards of hygiene and cleanliness throughout their home should be monitored regularly, and improvements made where required.

This is to ensure care and support is consistent with Health and Social Care Standard 1.23: My needs, as agreed in my personal plan, are fully met, and my wishes.

This area for improvement was made on 23 June 2025.

Action taken since then

People we spoke to were satisfied with the quality of the cleaning by care staff. We observed that care staff were leaving the essential areas of people's kitchens and bathrooms clean and tidy. We observed and people told us that staff used gloves and aprons appropriately. Any used continence aids, gloves and aprons were being disposed of correctly. Direct observations by managers of staff competence were being undertaken regularly in supported people's homes.

This area for improvement has been met.

Previous area for improvement 4

Medication should be managed in a manner that protects the health and wellbeing of service users. The provider should ensure that medicines are administered as instructed by the prescriber. The service should ensure that staff follow policy and best practice about Medication Administration Records (MAR) and documentation and that staff receive training and refresher training appropriate to the work they perform.

This is in order to comply with:
Health and Social Care Standard 1.24: Any treatment or intervention that I experience is safe and effective.

This area for improvement was made on 6 August 2025.

Action taken since then

Staff involved in medication administration were following policy and best practice regarding medication administration documentation. Essential training for medication administration was up to date and direct observations by managers of staff competence were being undertaken regularly in supported people's homes. The service had processes in place to undertake competent auditing of medication documentation. This ensured that medication administration was safe and effective.

This area for improvement has been met.

Previous area for improvement 5

To support people's health and wellbeing, the provider should ensure that people's food and fluid intake are effectively assessed, reviewed and action taken to address any concerns. This should include, but is not limited to, ensuring effective monitoring of people's food and fluid intake records and onward referrals to appropriate professionals.

This is in order to comply with:

Health and Social Care Standard 1.19: My care and support meets my needs and is right for me.

This area for improvement was made on 6 August 2025.

Action taken since then

Care plans recorded people's nutrition and hydration needs and preferences. When there were concerns about a person's food and drink intake this was monitored effectively. We observed care staff encouraging people to eat in a patient and dignified way. A relative said "they will let us know what he has eaten and will make him something even if he says he is not hungry."

This area for improvement has been met.

Previous area for improvement 6

In order to support good outcomes for people experiencing care, the manager should ensure that the provider's complaint policy and procedure is fully implemented and complied with.

This is in order to comply with:

Health and Social Care Standard 4.21: If I have a concern or complaint, this will be discussed with me and acted on without negative consequences for me.

This area for improvement was made on 6 August 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.

Previous area for improvement 7

The service should ensure people are informed in writing regarding their care at home contract details and any significant changes.

In order to achieve this the service should undertake the following:

- a) Inform people, in writing, regarding when their care and support visits take place (morning, lunchtime, teatime or evening) and the length of their visits.
- b) To prioritise communicating with people when their visit times change significantly.

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

'My care and support is consistent and stable because people work together well' (HSCS 3.19).

This area for improvement was made on 19 December 2024.

Action taken since then

People had been informed in writing, as part of their personal plan, the visit times and how long they were. Some people were experiencing regular changes in visit times and were not being told when their visit times changed significantly which was causing distress.

This area for improvement has not been met.

Previous area for improvement 8

To ensure people's health and wellbeing is supported, the provider should ensure that people's care plans are updated to contain clear and detailed information on how people are to be supported. This should include but is not limited to, ensure risk assessments are completed and these to inform care plans which gives clear guidance to staff on how risks are to be minimised.

This is to ensure care and support is consistent with Health and Social Care Standard 1.19:
My care and support meets my needs and is right for me.

This area for improvement was made on 10 December 2024.

Action taken since then

People's personal plans detailed each area of care, for example, mobility, and had personalised information about how best to support someone, which was up to date. Specific risk assessments, where necessary, had been completed. Most of the six monthly reviews of personal plans, as required by legislation, had been completed with supported people and their relatives. This made sure that personal plans remained right for people as their needs change and everyone had the opportunity for their views to be heard.

This area for improvement has been met.

Previous area for improvement 9

The service should have people's preferences recorded in their care and support plan to give guidance to staff when to call families/ chosen representatives. There should be a clear protocol for staff to follow in such events particularly when people become unwell.

This is in order to comply with:
Health and Social Care Standard 1.23: My needs, as agreed in my personal plan, are fully met, and my wishes and choices are respected.

This area for improvement was made on 6 August 2025.

Action taken since then

People's personal plans detailed each area of care, for example, mobility, and had personalised information about how best to support someone, which was up to date. There were clear protocols for staff to follow when supported people became unwell. The service also had basic first aid training which was annual mandatory training for care staff and was up to date.

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	4 - 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

To find out more

This inspection report is published by the Care Inspectorate. You can download this report and others from our website.

Care services in Scotland cannot operate unless they are registered with the Care Inspectorate. We inspect, award grades and help services to improve. We also investigate complaints about care services and can take action when things aren't good enough.

Please get in touch with us if you would like more information or have any concerns about a care service.

You can also read more about our work online at www.careinspectorate.com

Contact us

Care Inspectorate
Compass House
11 Riverside Drive
Dundee
DD1 4NY

enquiries@careinspectorate.com

0345 600 9527

Find us on Facebook

Twitter: @careinspect

Other languages and formats

This report is available in other languages and formats on request.

Tha am foillseachadh seo ri fhaighinn ann an cruthannan is cànan eile ma nithear iartras.

অনুরোধসাপেক্ষে এই প্রকাশনাটি অন্য ফরম্যাট এবং অন্যান্য ভাষায় পাওয়া যায়।

یہ اشاعت درخواست کرنے پر دیگر شکلوں اور دیگر زبانوں میں فراہم کی جاسکتی ہے۔

ਬੇਨਤੀ 'ਤੇ ਇਹ ਪ੍ਰਕਾਸ਼ਨ ਹੋਰ ਰੂਪਾਂ ਅਤੇ ਹੋਰਨਾਂ ਭਾਸ਼ਾਵਾਂ ਵਿੱਚ ਉਪਲਬਧ ਹੈ।

هذه الوثيقة متوفرة بلغات ونماذج أخرى عند الطلب

本出版品有其他格式和其他語言備索。

Na życzenie niniejsza publikacja dostępna jest także w innych formatach oraz językach.