

Dudhope Villa and Sister Properties Housing Support Service

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Dundee
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Type of inspection:
Unannounced

Completed on:
26 November 2025

Service provided by:
Dudhope Villa and Sister Properties

Service provider number:
SP2004004668

Service no:
CS2004064634

About the service

Dudhope Villa and Sister Properties is registered with the Care Inspectorate to provide a combined Care at Home and Housing Support Service. The service aims to meet the support requirements of individuals for personal care and support needs, general counselling, advice and guidance. The service provides accommodation on a full board basis at Dudhope Villa and in the sister properties around Dundee. The service is provided on a 24 hour basis, with a constant staff presence in Dudhope Villa and planned visits and on-call support to the sister properties. At the time of our inspection, support was being provided to 31 people.

About the inspection

This was a full inspection which took place on 11 and 12 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 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 10 people using the service
- spoke with five staff and management
- observed practice and daily life
- reviewed documents.

Key messages

- The service supported people who have complex support requirements, many of whom relied heavily on the support from the service provided.
- Dudhope Villa had an established and settled staff group; many of the people supported by the service told us that staff were like family to them.
- Staff knew the people they supported very well and people benefitted from the consistency this provided.
- Staff were caring and compassionate and told us that they had enough time to do their jobs well.
- The staff team was mutually supportive and worked well together.
- Staff told us that the manager and the owner were accessible, approachable and supportive.
- The service provides a wide range of roles for people. To ensure that there are no conflicts of interest, people should be encouraged to access independent advocacy services.

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 how well the service supported the wellbeing of people experiencing care and support and overall concluded that the performance of the service in this area was good. We identified that there were important strengths and taken together these strengths clearly outweighed areas for improvement. These strengths had a significant positive impact on people's experiences and outcomes.

All of the people we spoke to who use the service told us that the staff provided them with good support. We saw warm, encouraging and positive relationships between the staff and the people they supported. People with more complex support requirements lived in Dudhope Villa, where support was available throughout the day. We saw that these people responded well to the structure this offered. People who were more independent lived in their own flats, a number of which were close to Dudhope Villa. Several of these people visited the villa regularly, for meals and social contact with other people and the staff. There was a strong sense of community and we saw that many friendships had been made between people supported by the service. The knowledge staff had of each person helped to create a strong supportive environment and was a significant factor in the quality of support people experienced.

People should be able to choose to have an active life and participate in a range of recreational, social, creative, physical and learning activities. The service organised seasonal social events and an annual holiday, which people told us that they enjoyed. Staff supported people to access the community for their day to day shopping requirements and for social interests. The service produced a newsletter, which reported on recent activities and forthcoming events.

People's personal plans should be right for them and set out how their needs will be met, as well as their wishes and choices. People contributed to their support plans and participated in reviews. There was good information about people's backgrounds and their personal histories. People's physical and mental health needs were documented. What was important to people, their independence skills, as well as their support needs, was clearly documented. There was information about how staff could best support each person to achieve their goals and if there were any obstacles to these goals. Support plans could have been strengthened by the addition of a hospital passport, which is a document that provides relevant information about a person, for hospital staff, in the event of an unexpected admission to hospital.

Information in people's support plans about their capacity to make decisions about their health and well-being was unclear or contradictory. To safeguard people's rights and to promote their well-being the service should discuss issues of capacity with the relevant professionals and people's representatives. We noted that the provider had the responsibility of being both the landlord and the support provider for people, and for one person also their appointed power of attorney. We identified this as a potential conflict of interests. We advised the manager that people should be supported to understand and uphold their rights and encouraged to access independent advocacy services to do this.

People should experience high quality care and support based on relevant evidence, guidance and best practice. We inspected the service's quality assurance and improvement documents, as well as their policies and practice procedures. We saw that the manager had reviewed, updated and improved the service's policies and procedures. There was the addition of a service improvement and development plan. This plan identified areas for improvement, how these would be met and who is responsible for driving them forward. The plan would have been enhanced if clearer timescales for implementation had been detailed.

How good is our staff team?

4 - Good

We evaluated how good the staff team was and overall concluded that the performance of the service in this area was good. We identified that there were important strengths and taken together these strengths clearly outweighed areas for improvement. These strengths had a significant positive impact on people's experiences and outcomes.

The staff team was well established. All but one member of staff had been with the service for over four years; with the newest recruit joining earlier this year. We saw that this produced a tight knit staff group, who were very supportive of each other. The continuity of the staff group had provided people with consistent support and also nurtured very trusting relationships with them. We heard from people that staff supported them with budgeting, day to day living and to attend appointments. Staff understood their role and were knowledgeable about people's support needs and wishes. Several staff told us that they loved their work. We saw that the service had confident, experienced and compassionate staff. Staff supported people to make choices that reflected their likes, dislikes and preferences. People told us that the staff who supported them were never rushed and always had enough time for them. Staffing levels were generally good. We were told that there were occasional 'pinch points' during peak holiday times or because of staff sickness, but staff were happy to work extra shifts, to ensure the quality of support people received was not adversely affected.

People should be able to have confidence in the staff who support them because they are trained, competent and skilled, are able to reflect on their practice and follow their professional and organisational codes. Staff member's training requirements were identified through staff supervision and their annual appraisals. Staff undertook mandatory training and were encouraged to attend additional training. Training had remained relevant. The service had recently introduced training in dementia care, to reflect the changing support needs of some of the people it supported. As part of the staff group's learning and development the service had introduced some online training resources, which staff had found informative and relevant to their roles.

Staff recruitment had been undertaken in accordance with safer recruitment guidance. Staff told us that they were well supported by their seniors, the manager and the owner. Staff received an appraisal annually and formal supervision on a quarterly basis, with a senior or the manager. Additional support and advice was available to staff, whenever it was required. Any new staff had more frequent supervision and were mentored by experienced colleagues. Staff told us that supervision was a supportive experience, where they were encouraged to reflect on their practice and identify areas for additional training and development.

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

To ensure people's right to experience high quality support, the provider should produce and regularly review and update a comprehensive service improvement or service development plan. This plan should identify what improvements to the service are necessary; what actions are required to make them; who is responsible for ensuring they are made, as well as a target date for completion.

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

This area for improvement was made on 22 May 2024.

Action taken since then

The provider had produced a service improvement, or development plan. The plan tended to outline the service's work performance rather than areas of the service that it aimed to improve. Target dates often stated 'ongoing' rather than giving a firm date for completion. However, in some important areas the provider had identified what actions were required to improve the performance of the service. In addition, the provider had stated how they intended to make these improvements and, in most instances, identified who would be responsible for driving these forward.

We concluded that this area for improvement had been met.

Previous area for improvement 2

To ensure that people's human rights are respected, the provider should ensure that the personal and legal information it holds on them is accurate, up to date and properly recorded and stored in accordance with general data protection regulations.

This is to ensure that care and support is consistent with Health and Social Care Standards (HSCS) which state that 'if I need help to manage my money and personal affairs, I am able to have as much control as possible and my interests are safeguarded' (HSCS 2.5) and 'I use a service and organisation that is well led and managed' (HSCS 4.23).

This area for improvement was made on 22 May 2024.

Action taken since then

Although the provider had improved the management and storage of information held on supported people, they had not located all relevant personal and legal information.

We concluded that this area for improvement had not been met.

Previous area for improvement 3

To support positive outcomes for people, the provider should make sure there is a regular review and development of staff training and learning needs. The provider should use a wide range of training methods and maximise the opportunities for staff to access or attend training, which reflects current legislation, policy and best practice guidelines.

This is to ensure that care and support is consistent with Health and Social Care Standards (HSCS) which state that: '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 22 May 2024.

Action taken since then

Staff training was more organised. The provider had identified additional areas where staff training was required and was using online training resources with good effect.

We concluded that this area for improvement had been met.

Previous area for improvement 4

People's support plans should meet their assessed needs and reflect their desired outcomes. Support plans should include information on all important care needs and health conditions. In addition, they should be regularly reviewed and the information in them should be up to date and accurate.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that: '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) and 'my care and support is provided in a planned way, including if there is an emergency or unexpected event' (HSCS 4.14).

This area for improvement was made on 22 May 2024.

Action taken since then

There had been a significant improvement in the quality of support plans. These were well structured and more person centred. Some information around people's level of capacity and legal information was still unclear. However, we concluded that the provider had made sufficient progress to meet this area for improvement.

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 staff team?	4 - Good
3.3 Staffing arrangements are right and staff work well together	4 - Good

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