

Meloosha Homecare East Lothian Support Service

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Type of inspection:
Unannounced

Completed on:
24 November 2025

Service provided by:
Treasured Home Care Limited

Service provider number:
SP2024000283

Service no:
CS2025000040

About the service

Meloosha Homecare (East Lothian) provides care at home to people living in their own homes across East Lothian and the surrounding areas. The service has been registered with the Care Inspectorate since 4 February 2025. At the time of inspection, there were 12 people using the service.

About the inspection

This was a full inspection which took place on 18, 19 and 20 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 and got feedback from seven people or their representatives
- spoke with seven staff and management
- observed practice and daily life
- reviewed documents
- spoke with professionals associated with the service.

Key messages

- Interactions between staff and people experiencing care were warm, personalised and staff were compassionate.
- People were supported to be as independent as possible.
- Staff shared that the leadership team were approachable and visible.
- A consistent approach to staffing allocations meant people were supported by staff who knew them well.
- Care and support plans were person centred, holistic and updated regularly.

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 leadership? | 4 - Good |
| How good is our staff team? | 4 - 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

Interactions between staff and people experiencing care were warm and personalised, and staff demonstrated compassion throughout. During observations, people were supported to do things at their own pace and as independently as possible. Nobody was rushed, even when carers had a short allocated visit time. Carers spoke to people with kindness and empathy. People who were supported with meals were encouraged to eat while maintaining as much independence as possible. Staff respected people's homes and asked permission before carrying out tasks. This highlights that people were treated with respect and their independence was promoted.

From sampling people's care plans, it was evident that individuals were assessed holistically, with their physical, social and psychological needs taken into account. From reviewing communication between the service and people experiencing care or their representatives, it was clear that the service kept on top of health-related, updated and escalated concerns when necessary.

Where individuals were unable to make decisions for themselves, it was easy to identify who should be contacted. Relatives reported that communication was effective and they felt included. Communication was used well to ensure the service was aware of any change to people's circumstances or needs between visits, and relatives were kept informed about anything that arose during visits. This highlighted that the service recognised the importance of including relatives and being aware of changes that could affect people's care.

A strong Adult Support and Protection policy, along with relevant training, provided staff with the knowledge required to recognise when people might be at risk and how to report concerns. A robust medication policy and training, supported by a system that alerted staff when medication had not been signed for, helped to protect people's safety.

People shared that if staff finished essential tasks during visits, they would sit and have a cup of tea or spend time doing something meaningful to the client. One person shared that they were learning their carer's language. Those who were able to were encouraged to take part in physical activity, whether through walks in their local area, trips to the local supermarket or chair-based exercises. This meaningful engagement contributed to the wellbeing of people experiencing care.

People expressed that they felt listened to, and that carers had taken the time to get to know them, their histories, and their interests. They felt they had built relationships with the staff who supported them. People we spoke to shared that their privacy and dignity was respected and they felt safe with the staff providing their care.

How good is our leadership?**4 – Good**

The service used feedback from people, relatives and staff to drive improvements. A review system accessed via a phone application allowed people experiencing care to leave feedback after each visit, which was then sent directly to the management team. From the feedback sampled, comments were managed discreetly and actions were taken to improve the quality of care delivered when areas for improvements were identified. This highlights that the service valued the opinions of people experiencing care.

Practice observations were carried out with staff, including unannounced spot checks. Feedback was shared with staff during supervision sessions in a constructive manner, while more urgent findings were discussed immediately. This supported staff development and improved the quality of care delivered.

Incidents, accidents and complaints were handled appropriately and used as learning opportunities to improve the service. A relative shared, "when I had a minor issue with something that was happening, I wrote an email to the office. I quickly received a response and it was dealt with sensitively and sorted straight away."

Staff reported feeling supported and described the leadership team as strong and visible. Both people experiencing care and staff shared that the management team was actively involved in providing care and were always available if support was needed. When asked for feedback about the management team, one professional said "(They are) exceedingly passionate. (They are) lovely and have a great understanding of people's needs."

A service improvement plan identified areas the service had recognised as requiring development, using a structured format that enabled them to prioritise actions and monitor progress. The service was in the process of embedding audit systems into its routine practice, strengthening existing quality assurance processes.

How good is our staff team?**4 – Good**

Pre-employment checks were completed and staff shared that their induction and shadowing period provided them with the support needed to begin working independently. This protected the safety of people experiencing care.

Staff were appropriately registered with the Scottish Social Services Council (SSSC) and the service was aware of those who still needed to complete SVQ training. The management team acknowledged the need for improved monitoring of staff registration and SVQ progress, and a strengthened system was implemented during inspection. Staff training was mostly up to date, with essential training completed. Face-to-face training for moving and handling was planned, where a member of staff with 'train the trainer' qualification will share their knowledge. This meant people were supported by staff who were appropriately trained.

People supported by the service were cared for by a small and consistent group of staff. Individuals who required fewer visits were usually supported by the same staff member, except when sickness or annual leave cover was needed. This consistency meant that people were well supported by staff who knew them well, which helped build trusting relationships.

People we spoke to shared that they had never experienced a cancelled visit, and staff were rarely late. When delays occurred, people received a phone call to keep them informed. Individuals also stated that they received an email notification when their carer was on their way confirming who would be arriving. People expressed a preference for knowing who would be visiting in advance. Following this feedback during inspection, the service began implementing this.

Visit times reflected people's needs and wishes. Individuals reported that the service was responsive to requests for change whenever possible to accommodate personal circumstances. This highlights that the service considered people's preferences when planning their care.

Staff received regular supervision and observations of practice and reported feeling well supported. They shared that they were comfortable discussing any personal circumstances that might impact their work and felt encouraged in their professional development. One member of staff said "I have been here a few months. I love it and all the people I work with."

How well is our care and support planned?

4 - Good

Care and support plans were person-centred, holistic and regularly updated. People's physical, psychological, emotional, and social needs were all considered when creating plans.

Care plans included information about individuals' ability to make decisions and promoted independence where possible. Plans highlighted how people responded to different methods and styles of communication and how staff could adapt to support their understanding.

Staff said they were able to share any updates needed for plans, and the leadership team recognised that carers worked with people daily and their views were important. Relatives and clients shared that they felt included in the care-planning process.

Risk assessments were in place and reflected the specific risks relevant to each individual. Training records showed that staff had completed training on positive risk assessment. This supported staff in enabling people to take appropriate positive risks to enhance their wellbeing.

Support plans would benefit from being more goals-focussed, including clear details about the strategies in place to help people achieve their goals. The service recently strengthened their audit processes. More regular audits of care plans would help identify outdated information and areas for improvement, ensuring that plans remain current and continue to promote the wellbeing of people experiencing care.

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 leadership? | 4 - Good |
| 2.2 Quality assurance and improvement is led well | 4 - Good |
| How good is our staff team? | 4 - Good |
| 3.3 Staffing arrangements are right and staff work well together | 4 - 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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