

Care & Support Services, Dumfries & Galloway Council

Housing Support Service

Cargen Tower
Garroch Business Park
Garroch Loaning
Dumfries
DG2 8PN

Telephone: 01387 271 100

Type of inspection:
Unannounced

Completed on:
9 February 2026

Service provided by:
Dumfries & Galloway Council

Service provider number:
SP2003003501

Service no:
CS2004071636

About the service

Care and Support Services is registered to provide support to adults with a disability and older people within their own home. The provider is Dumfries and Galloway Council.

At the time of inspection, 312 adults were being supported by the service. Support ranged from 30 minutes to seven hours per day for people living within the following areas of Dumfries and Galloway: Nithsdale, Annandale and Eskdale, Stewartry, and Wigtownshire.

The registered manager works from the main office base in Dumfries and is responsible for coordinating the overall running of the service. Area managers and Support Supervisors manage the staff teams who provide direct support to people.

About the inspection

This was an unannounced inspection which took place on 02, 03, 04, 05 and 06 February 2026. The inspection was carried out by two inspectors 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 26 people using the service and nine relatives
- spoke with staff and members of the management team
- received 127 completed questionnaires (this includes all types)
- observed practice and daily life
- visited 26 people in their own home
- reviewed documentation
- obtained feedback from stakeholders

Key messages

- Staff developed meaningful relationships with people based on warmth, respect and compassion.
- People felt valued as individuals and were confident in how the service responded to their needs.
- Families reported being happy with the care and support their loved ones received.
- People's care and support benefited from consistent staff teams.
- People's personal plans and health assessments should be further developed to evidence good outcomes for people.

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 staff team?	5 - Very 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

We found significant strengths in aspects of the care provided and how these supported positive outcomes for people, therefore we evaluated this key question as very good.

Staff spoke warmly and respectfully about the people they support and demonstrated strong knowledge of individuals' routines, preferences, and healthcare needs. Positive relationships were clearly evident, and people told us they felt listened to and respected. This contributed to people experiencing support that was not only safe, but also rights based and person centred.

There was also a clear ethos of promoting independence, with staff offering gentle encouragement where appropriate. People had confidence in the staff supporting them, and this extended to their health and wellbeing needs.

Staff showed a very good understanding of people's routines, preferences and health conditions. Interactions were warm, compassionate and respectful. People consistently told us they felt valued, listened to and supported with dignity. One person said, "I can't fault them - they treat me with dignity and respect, they are wonderful." Another added, "Everyone involved in my care has been great and everyone is so nice and friendly."

Several people described the positive impact staff had on their wellbeing. A person told us, "The staff are an impressive team - I would be lost without them," highlighting the strong relationships that underpin safe and effective health and wellbeing support.

Family members also expressed high levels of trust. One relative shared, "The carers always go above and beyond for my aunt's care, they are so supportive. They help keep my aunt at home - I can't thank them enough."

The service engaged well with health and social care professionals, including social work, occupational therapy, physiotherapy and other community services. Professionals provided positive feedback about the service's engagement and how effectively staff accessed the right support at the right time.

We saw evidence of appropriate referrals being made promptly, and advice from specialists being followed. This contributed to early identification of changing needs and ensured people's health was monitored and reviewed effectively. Professionals were involved in annual reviews when needed, supporting joined up approaches to care.

Adult Support and Protection procedures were well understood and consistently followed. Staff were clear about their roles and responsibilities, and we saw examples of concerns being reported appropriately and monitored within the electronic system. This supported safe decision making and ensured that people were protected from harm, in line with relevant guidance.

We found that the service had robust medication systems and clear structures that ensured people received their medication safely and in line with their assessed needs.

It would be good to see some further information on medication assessments within people's personal plans. We discussed this with managers, and they have taken this on board to include it when updating people's personal plans.

Medicines with a PRN (pro re nata) or 'when required' dose can treat many different conditions. People's plans should contain enough information to support staff to administer when required medicines. Records did not always include this detail, and we have made an area for improvement. (See area for improvement 1)

Areas for improvement

1. To support people's wellbeing and ensure they experience interventions that are safe and effective if receiving when required medicines, medication administration records chart should include:

- the reasons for giving when required medicine;
- how much has been given including if a variable dose has been prescribed;
- the time of administration for time sensitive medicines; and
- the outcome and whether the medicine was effective.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state, 'Any treatment or intervention that I experience is safe and effective.' (HSCS 1.24)

How good is our staff team?

5 - Very Good

We found significant strengths in aspects of the care provided and how these supported positive outcomes for people, therefore we evaluated this key question as very good.

The service had very good staffing arrangements that supported positive outcomes for people. Strong oversight systems were in place to monitor staffing capacity, including monthly reviews of hours worked and hours delivered. Although the service had experienced some recent pressures, managers told us this was beginning to ease. Staff regularly picked up additional hours, and bank staff were used effectively to maintain stability. Importantly, there were no missed visits reported, which demonstrated reliable and consistent care.

Rotas were well organised and staff were clear about their shifts, roles and responsibilities. The use of locality based teams promoted continuity, which people valued. One person told us they were "very happy with the consistent core carers," and others spoke positively about the relationships developed with their regular team. While rotas changed to reflect people's needs, staff told us the rolling rota system supported a good work-life balance.

Some people said they would like to know in advance which staff were scheduled to visit. The service discussed ways to support this, including email notifications or providing paper copies of updated rotas. People also told us they appreciated meeting new staff initially through shadowing to build familiarity and confidence.

Staff support and oversight were strong and well embedded. Regular supervision and check ins took place, and staff described these as helpful and supportive. One staff member told us, "Managers always listen and help is given." Supervision incorporated staff reflection and feedback from people using the service. Competency assessments and observations of practice ensured staff worked safely and to expected standards.

Team meetings were held every six weeks with clear minutes covering learning, development, practice issues and service updates. Weekly huddles strengthened communication and promoted effective oversight. Staff consistently described a positive team culture, with comments including, "I feel we are always listened to and always heard," and "It's a great team to work with."

Staff wellbeing was a clear priority. A wellbeing champion was in place, and staff had access to counselling, wellbeing cafés, online resources and action plans. Trauma informed practice was being rolled out, further strengthening the service's supportive culture. One staff member reflected, "The care we provide here is the best I've seen... we are a kind, compassionate team."

Overall, staffing arrangements were stable, well managed and responsive, resulting in people experiencing high quality, compassionate and consistent care. The positive feedback from both people using the service and staff further demonstrated the strengths of the service's staffing model.

How well is our care and support planned?

4 - Good

We evaluated this key question as good where several strengths impacted positively on outcomes for people and clearly outweighed areas for improvement.

Leaders demonstrated a clear commitment to improving the quality and consistency of personal planning. Personal plans were in place within people's homes and were used at every visit, helping staff deliver care that aligned with individuals' assessed needs. Staff knew people well and were able to describe their needs confidently, indicating effective communication and leadership oversight.

Prior to using the service, assessments took place to obtain information on people's needs. This was to ensure the service would be appropriate and the provider had the resources required to meet the needs of people supported.

Monthly audits of personal plans were carried out, and review documentation showed that most reviews were completed within six months. Reviews were outcome focused and follow up actions were recorded clearly. Families confirmed they were included in reviews and felt their views were reflected in the updated plans. This demonstrated an inclusive and collaborative approach to improvement.

Some plans contained richer personal detail than others, particularly around what mattered to people, personal histories and preferred communication strategies. Leaders recognised that more consistent approaches to gathering and recording this information would enhance care delivery. Strengthening guidance around managing stress or distress, and describing effective techniques used by staff, would further support continuity across the team. (See area for improvement 1).

Oversight of daily recording was in place, and staff confirmed that notes in the care diary helped them understand any changes or concerns, particularly after time off. However, recording practices varied, with some entries being brief and task focused. Leaders were aware of this and had begun promoting more person centred and descriptive documentation.

Where people had specific clinical needs, such as blood glucose monitoring or catheter care, leaders acknowledged the need to strengthen protocols. Staff described relying on their own knowledge and seeking senior support when unsure. Clear, individualised guidance within care plans would promote safer and more

consistent practice. (See area for improvement 1)

Overall, leadership was supportive, responsive and committed to strengthening practice. Systems for auditing and review were effective, and leaders were aware of areas requiring development. With continued focus on improving consistency in documentation and clinical guidance, the service is well placed to build on its good performance.

Areas for improvement

1. The service provider should further develop personal plans to ensure they contain clear, specific and person centred information. Improving these areas will support a consistent approach aligned with individuals' wishes and choices. Plans should include:

- What matters to the person, key preferences, routines and what is important to them.
- Personal history, relevant background information to support personalised care.
- Moving and handling guidance including clear steps, equipment required and the agreed method of support.
- Health specific guidance - individual protocols for clinical needs, including monitoring and escalation.

This is to ensure that care and support is consistent with the Health and Social Care Standards which state: '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).

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 staff team?	5 - Very Good
3.3 Staffing arrangements are right and staff work well together	5 - Very 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

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 ਵਿਚ 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.