

Sense Scotland Dundee Respite Care Home Service

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Type of inspection:
Unannounced

Completed on:
30 January 2026

Service provided by:
Sense Scotland

Service provider number:
SP2003000181

Service no:
CS2005101796

About the service

Sense Scotland Dundee Respite is registered as a care home service to provide a residential short breaks service to a maximum of three adults who have support needs associated with learning disability, physical disability or sensory impairment. Sense Scotland is a voluntary sector organisation that provides services to people with disabilities across Scotland.

The service is provided seven days a week. People most often stay for short breaks of two or three nights during the week or over the weekend, but occasionally for longer stays. The aim of the service is to provide a fun and stimulating service for people in a relaxed environment. The service provides opportunities for people to access a range of activities both within the service and in the wider community, depending on an individual's needs and wishes.

About the inspection

This was an unannounced inspection which took place between 27 and 28 January 2026 in the service and continued virtually on 29 January 2026. 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 three people using the service and seven of their families

Spoke with five staff and management

Observed practice and daily life

Reviewed documents

Spoke with visiting professionals

Reviewed questionnaires submitted by the service and stakeholders

Observed practice and daily life

Reviewed documents

Key messages

- People's enjoyed visiting the service for respite
- The service worked hard to create a sense of being on holiday for people
- People and their relatives spoke highly of the service and the staff team
- Care plans and risk assessments did not always contain consistent, current, or accurate information
- The leadership team were responsive to suggestions for improvement.

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?	5 - Very Good
How good is our setting?	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?

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, their family members and a visiting professional all spoke highly of the service and the support people received whilst on a respite break. People being supported stated it was a "holiday" and we heard from relatives that people really looked forward to their respite stays and a family member commented it was a "home from home".

Staff knew people they were supporting well and as a result, were able to quickly recognise and respond to any changes in their health and wellbeing and this ensured that they got the support they needed without delay.

Communication needs were well considered and reflected within people's care plans. A variety of communication tools were used in accordance with people's preferred means of communication such as Makaton and pictorial prompts. This enabled people using the service to interact meaningfully with those around them and have their opinions, choices and requests listened to and acted on.

Where people were able to manage their own medication, they were supported to do so. However, where people needed to have their medication administered to them, some errors had been identified by the service during internal audits. This placed people at a potential risk of harm. The leadership team had taken a proactive approach to support staff in this area by analysing trends, observing practice and providing learning sessions. We shared links to further information that the service may find useful and suggested that they review how the training support was progressing. We also highlighted to the service that consistent recording of allergies across all paperwork even when there were none would support good practice and keep all people safe.

People had access to hot and cold drinks, snacks and fruit at all times. Meals were planned in conjunction with people's favourite food choices and people, and their families told us that they shopped for and cooked their own meals if they were able to do so and enjoyed baking whilst at the service.

People enjoyed the activities they took part in whilst in respite and family members spoke of them being "out and about" during their stays. People enjoyed swimming, darts, bowling, shopping, art and playing games. The opportunities to take part in a wide range of activities helped people continue their favourite pastimes, have fun and also enhance the holiday feeling of being in respite.

People's strengths and abilities were clearly valued and family members told us that people being supported were treated as individuals and encouraged to make choices and decisions.

People's privacy within the home was respected and people had access to all areas to come and go as they pleased. People could choose quiet time around the home or in their bedrooms or to be in communal areas with other people being supported and staff.

When we sampled care plans for people, we found that information in relation to welfare guardianship powers was not always available or clear. The service rectified this immediately and we were assured that the service were aware of who could make decisions for people that stayed for respite.

Overall, care plans contained person centred information about each person so that staff could ensure their needs were met whilst visiting. However, some risk assessments were not in place and this had the potential to place people at risk of harm. We discussed a concern in relation to a risk of choking for one person and were assured that the service would immediately review this and ensure risk assessments and guidance were up to date and shared with staff.

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.

People told us staff were friendly, caring and knowledgeable and had the right skills to meet their needs. Relatives and a visiting professional all spoke very highly of the staff team. We observed warm and caring interactions between staff and people being supported. This meant that people could be confident they would enjoy their visit and be supported in the right way.

We observed and spoke with confident staff during our visit. Staff generally felt they had the right training for them to do their jobs. Where specialist skills were needed e.g. to care for someone who was PEG fed, managers ensured that the skills of staff working with a person were right and that any specialist knowledge was provided. This meant that people could be assured they would get the correct care and support they needed.

Staff skills mix was carefully considered before people's stays and this involved people's likes and dislikes and hobbies. Less experienced staff were paired with more experienced workers. Scheduled care was matched by appropriate or additional staffing numbers which meant that people were being supported by the right number of staff. Most staff felt that they had time to do their job properly. Where there were shortfalls in staffing due to staff absences or sickness, you filled these gaps with the assistance of staff from other Sense services to ensure that there was no negative impact on the people you supported.

We sampled recruitment records in the service and found these to be in line with safe recruitment guidance. There was a comprehensive induction for new staff joining which meant people could be assured that they would be safe when visiting.

Staff told us they generally felt well supported, and were given regular supervision. They felt able to raise any concerns with the management team and felt that these would then be addressed appropriately. Team meetings were held and there was plan to hold these six weekly going forward.

Overall, staff felt that there was good communication across the service and they felt that they worked well together. Staff were happy in their roles and were passionate and committed to providing personalised care to those they were supporting.

How good is our setting?**5 - Very Good**

We found significant strengths within the setting and the environment people lived in which supported positive outcomes for people, therefore we evaluated this key question as very good.

The service provided a welcoming and clean environment and there was no clutter or excessive noise. This was a nice environment to visit and spend time in.

The home had recently been refurbished and was tastefully decorated throughout. There was a homely feel. Carpets had been replaced with wipeable flooring making it more hygienic and easier to keep clean. Bedrooms had technology such as Alexa's and Smart TV's and were spacious as were ensuite facilities. People had access to well-tended gardens which were well used in better weather.

We identified a small number of areas that required additional attention for action however these were addressed very quickly. This included some wear and tear to padding on a bed, locking of the clinical waste area in the garden and providing separate spaces within the laundry for clean and dirty washing.

In one area of the service a safety gate had been placed on a doorway however this was only used for one individual when they stayed at the service. We were satisfied that appropriate paperwork was in order in relation to the welfare guardian's permission and was used only to reduce risks to that individual.

Overall, this was a comfortable, welcoming and enabling environment for people to enjoy their respite.

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.

Support plans were person centred and contained information that helped to build a clear picture of that person. Plans were focussed on people's strengths and abilities - what people were able to do, and they referenced people's choices and decision making. They could be further enhanced by considering how the plans could be presented in a format that everyone could understand such as easy read or pictorial formats. This would enable people to have a more control over the choices and decisions made. Communication with family was good and they received regular updates.

Outcomes should be considered in some people's plans as they were not so much outcome focussed as task focussed. This would ensure that people could enjoy their respite and be confident that their personal goals and aspirations would be met.

Some risks identified in support plans didn't have risk assessment which placed people at risk of harm. The leadership team agreed to review all risk assessments as a matter of priority to ensure people were safe.

We identified some significant gaps in how often some care plans had been reviewed. This meant that there was a risk some people may not get the right care and support they needed. Care plans must be reviewed a minimum of every six months in line with legislative requirements. We saw that the process of review for all care plans had started and there was a commitment to improve care planning, risk assessment and reviewing. We have made this an area for improvement.

Areas for improvement

1. To support people's right to experience high quality support, the provider should regularly review and update people's support plans.

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).

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 support people's safety and wellbeing the provider should ensure that they report to the Care Inspectorate all notifiable events.

This is in order to reflect the requirements of the Public Services Reform (Scotland) Act 2010, and The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 and The Social Care and Social Work Improvement Scotland (Applications and Registration) Regulations 2011.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that: 'I benefit from different organisations working together and sharing information about me promptly, where appropriate, and I understand how and why my privacy and confidentiality are respected' (HSCS 4.18).

This area for improvement was made on 22 November 2023.

Action taken since then

In accidents and incidents sampled, some incidents which were notifiable had not been reported to the Care Inspectorate. These were discussed with the leadership team and the updated guidance was shared. This area for improvement has therefore not been met and will carry forward to the next inspection.

Previous area for improvement 2

To support people's right to experience high quality support, the provider should regularly review and update its documentation, this should include, but not be limited to people's support plans, the service's policies and procedures and the service's improvement/development plan.

This is to ensure that care and support is consistent with the 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 4.18).

This area for improvement was made on 22 November 2023.

Action taken since then

There were clear service policies and procedures in place and staff understood where to look for information and understood what was expected of them.

A service improvement plan was in place with target dates. We suggested putting in regular review points to ensure goals remained on track. Although it was evident that people using the service, staff and relatives had been consulted, we suggested that more of this feedback be incorporated within the improvement plan

to tell the story of you said, we did and demonstrate how this feedback then shaped the direction of the service.

The service had started to review support plans and there had been improvements in relation to reviews. We identified further work was required to ensure that people's care files were consistent, accurate and up to date and that these accurately reflected their current needs and care arrangements.

This area for improvement has been partially met in relation to the improvement plan and policies and procedures however in relation to regularly reviewing and updating information is unmet so a new area for improvement will replace this one to incorporate this matter.

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?	5 - Very Good
3.3 Staffing arrangements are right and staff work well together	5 - Very Good
How good is our setting?	5 - Very Good
4.1 People experience high quality facilities	5 - Very Good
How well is our care and support planned?	4 - Good
5.2 Carers, friends and family members are encouraged to be involved	4 - Good

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