

## Bright Care (Edinburgh) Housing Support Service

The Old Clubhouse  
Unit 7  
106 Biggar Road  
Edinburgh  
EH10 7DU

Telephone: 01313 444 670

**Type of inspection:**  
Unannounced

**Completed on:**  
24 June 2025

**Service provided by:**  
Bright Care at Home Limited

**Service provider number:**  
SP2009010602

**Service no:**  
CS2010249701

## About the service

Bright Care (Edinburgh) provides a housing support service and care at home service to older adults living in their own homes. The service provided includes visits for housekeeping, companionship, assistance to continue enjoying hobbies and interests and personal care support. They also offer sleepover and live-in support.

46 people were using the service at the time of our inspection.

## About the inspection

This was an unannounced inspection which took place between 17 and 20 June 2025. We visited the registered office on 17 June, sampled documentation remotely on 18, and visited and phoned people on 19 and 20 June 2025. We provided feedback to the manager on the 24 June 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, or received comments via our online questionnaires from 15 supported people and 20 of their relatives.
- Spoke with five staff and management. Plus, a further 12 from our online survey.
- Received feedback from two health and social care professionals.
- Observed staff practice and daily life.
- Reviewed a range of documents.

## Key messages

- People praised the quality of the staff who supported them.
- We observed positive, respectful, and natural interactions between staff and those being supported. This was achieved through ensuring high levels of staff consistency.
- Staff displayed a strong sense of duty of care towards people.
- People's personal plans were of a very good quality, detailing how people would like to be supported, incorporating their personal preferences well.
- As part of this inspection, we assessed the service's self-evaluation of key areas. We found that the service had an effective and well completed self-evaluation, that was reflective of our findings.

## 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?	5 - Very Good
How good is our staff team?	5 - Very Good
How well is our care and support planned?	5 - Very 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 made an evaluation of very good for this key question. There were very few areas for improvement. Those that did exist had minimal adverse impact on people's experiences and outcomes.

We visited people at their home addresses and observed positive, respectful, and natural interactions by the staff team. People were supported by a small group of staff they knew well. People and families found this reassuring. It meant they developed trusting relationships with the staff. One person told us: "I am very happy with my [working] relationship with X, my carer. I look forward to her coming and very much enjoy the time we spend together. It is like a visit from a helpful friend".

People felt respected and listened to because their wishes and preferences were used to guide how they were supported. They felt safe and confident in the care they received. A further person said to us: "Both carers are very supportive and kind and I greatly appreciate having them stay with me [live in carers] so that I feel safe and well in my own home".

Management ensured visiting times suited people as much as possible and staff did not feel rushed on their visits, as they had adequate travel time. This enabled people to feel relaxed, receiving care with person centred approaches. Visiting times were also consistent which enabled people to plan their day well. People described communication from carers and management in the office as positive and responsive.

Staff demonstrated a good knowledge of people's needs, these insights were assisted by detailed agreed personal plans and support guidance, which were current and reflected people's health and wellbeing needs. This meant people could be confident staff supporting them were well informed and worked consistently to help them achieve the outcomes they had identified.

Many people were vulnerable to falls and appropriate person-centred risk assessments guided staff on how to support and meet their needs. The manager had a good analysis of incidences of falls; trends and patterns to explore ways of minimising them occurring where possible.

Staff responded appropriately and liaised with external health professionals when required. They were knowledgeable about people's support needs and relatives spoke positively about the care their family members received.

## How good is our leadership?

5 - Very Good

We made an evaluation of very good for this key question. There were very few areas for improvement. Those that did exist had minimal adverse impact on people's experiences and outcomes.

Managers utilised a variety of quality assurance systems which provided oversight of the care delivered to people. This included the auditing of visiting times, staff consistency and observations of practice. Any learning and feedback from people, complaints or incidents contributed to a well written improvement plan.

Leadership was supportive, responsive and visible, which enabled staff to voice their concerns, share ideas and explore ways to promote resilience. Staff knew their contribution was valued and recognised by the management of the service. This helped keep people motivated, remain adaptable and to focus on how best to provide care and support.

Observations of staff practice were undertaken on a regular basis. This included how staff interacted with people and how people's care needs were met. Any identified learning outcomes were followed through.

Very good systems were in place to monitor aspects of service delivery. They included a comprehensive self-evaluation tool which was based on the Care Inspectorate's framework, underpinned by the Health & Social Care Standards. All the above contributed to a well written improvement and development plan.

### How good is our staff team?

**5 - Very Good**

We made an evaluation of very good for this key question. There were very few areas for improvement. Those that did exist had minimal adverse impact on people's experiences and outcomes.

Staff felt supported in their role and had confidence in management should they have to raise any concerns. They felt valued. One carer told us: "The communication between staff and management is good, with lots of encouragement and praise".

Regular supervision was used constructively and supported staff's personal and professional development. There were clear records of learning being undertaken and planned, which informed learning for each member of staff. Staff were aware of their responsibilities for continuous professional development, to meet any registration requirements. The manager monitored the frequency of supervision meetings, to ensure they were consistent for all staff.

Staff completed a range of online and face to face training courses. Competency based training was also delivered and included administering medication and supporting people with their moving and handling. We were advised that number of staff were subject to conditions of qualifications, set by the Scottish Social Services Council and the manager was conscious of the timescales required.

### How well is our care and support planned?

**5 - Very Good**

We made an evaluation of very good for this key question. There were very few areas for improvement. Those that did exist had minimal adverse impact on people's experiences and outcomes.

People's personal plans gave staff clear direction about how to deliver each person's care and support. The sample of care documentation provided a very good overview of the person's life history, what was important to them, their choices, wishes and preferences. This ensures the care and support delivered to people were person centred and meaningful to them.

Care planning was electronic and enabled information to be easily available to people and their relatives who could also see the notes recorded by carers. Review meetings were fully recorded to capture discussions held and actions agreed. Adopting this approach, whether in person or held over the phone enables people and their relatives to feel they have fully participated and benefited in the review process.

Staff fed back via their staff satisfaction surveys to the manager that they would like to have greater input in supporting people to develop their personal care plans. This suggestion had been fully embraced by the manager and plans were in place to implement 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](http://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?	5 - Very Good
2.2 Quality assurance and improvement is led well	5 - Very Good
How good is our staff team?	5 - Very Good
3.2 Staff have the right knowledge, competence and development to care for and support people	5 - Very Good
How well is our care and support planned?	5 - Very Good
5.1 Assessment and personal planning reflects people's outcomes and wishes	5 - Very 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](http://www.careinspectorate.com)

## Contact us

Care Inspectorate  
Compass House  
11 Riverside Drive  
Dundee  
DD1 4NY

[enquiries@careinspectorate.com](mailto: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.