

## 2 Carolines Crescent Care Home Service

2 Carolines Crescent  
Ellon  
AB41 8BN

Telephone: 01358 723 813

**Type of inspection:**  
Unannounced

**Completed on:**  
17 July 2025

**Service provided by:**  
Inspire (Partnership Through Life) Ltd

**Service provider number:**  
SP2003000031

**Service no:**  
CS2003000327

## About the service

2 Carolines Crescent is a small care home providing 24-hour support to a maximum of five adults. The service provides support to people with learning disabilities and any associated physical disabilities. At the time of the inspection the service was providing support to five people.

The service is a large two storey detached house situated within a quiet residential area in the town of Ellon, Aberdeenshire. The accommodation comprises of five bedrooms, some of which have an en suite, others have nearby bathrooms. There is a large communal lounge and open plan kitchen/dining area. The service also has an outdoor area to the rear of the property which is accessible to all.

The service is provided by Inspire (Partnership Through Life) c/o Community Integrated Care.

## About the inspection

This was an unannounced inspection which took place between 14 July 2025 and 16 July 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 four people using the service and three of their family/representatives
- spoke with five staff and management
- observed practice and daily life
- reviewed documents
- reviewed completed survey responses from people, staff, and visiting professionals. We received a total of seven responses.

## Key messages

- People were supported a small staff team that knew them well.
- People told us they were happy with the service they received.
- Staff were confident to support people in line with their needs and wishes.
- The home had a warm and inviting atmosphere.
- Most areas of the home were well maintained.

## 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 setting?	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 evaluated this key question as very good, where the service demonstrated major strengths in supporting positive outcomes for people with very few areas for improvement identified.

People were supported by a consistent and familiar staff team. People had clearly built up warm, trusting relationships with staff, which contributed to a sense of safety and emotional wellbeing.

Staff demonstrated a strong understanding of the individuals they supported. They spoke confidently about people's needs, preferences, and wishes. They had received appropriate training to support a range of health conditions, including diabetes, dementia, and epilepsy. This ensured the care and support which people experienced was safe and person-centred.

Staff promptly recognised changes in people's health and responded appropriately. They sought advice from healthcare professionals, such as GPs and pharmacists, for day-to-day concerns and made timely referrals to wider healthcare teams, including occupational therapists, physiotherapists, and speech and language therapists. These changes were communicated effectively with families and within the staff team to maximise opportunities to promote people's health and wellbeing.

The service maintained a robust medication management system in line with best practice guidance and where people were able to take a more active role in their medication management, this was supported. However, practice did not always align with the systems in place. For example, during our visit, one person's medication was left unattended for a period of time which presented a risk to others within the service. In addition, the management of topical and suspension medication was not in line with best practice. These were not labelled on opening. This meant there was a risk of the medication being used beyond their effective date of use. Although regular medication audits were undertaken, these had not been effective in identifying areas for improvement. We highlighted this observation to the leadership team and immediate remedial actions were taken.

The service actively encouraged physical activity and engagement with being outdoors. People participated in walks, swimming, and gardening. One individual took pride in maintaining the garden, including cutting the grass, which contributed to his sense of purpose and wellbeing.

The service recognised the importance of meaningful activity and supported people to pursue their interests, such as attending church, men's shed, and walking groups. In response to changes in day service provision, the service worked hard to maintain continuity for three individuals attending a work placement and identified new opportunities for another person. Staff deployment allowed for one-to-one support at weekends, enabling personalised experiences. This meant people benefitted from having a fulfilled life and had a sense of connection with others.

Support plans were in place and these were accessible through an electronic system. These plans included detailed information about people's needs and preferences. However, some health assessments, such as epilepsy and moving and handling, were not easily accessible. In addition, where people had experienced a decline in health, such as experiencing falls, detailed risk assessments were not always in place. These may have been stored in paper folders. The service is encouraged to consider integrating them into the electronic care planning system to ensure staff have all necessary information readily available to provide support which meets people's identified needs and preferences.

Meal planning was inclusive and person-led. People used cookbooks and photographs to plan meals and the weekly menu offered variety and choice. People could access snack cupboards and shop for their own snacks. One person was supported to batch cook meals for his packed lunches, reflecting his preferences and promoting independence.

## How good is our setting?

### 4 - Good

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

The home had a warm, homely feel. Bedrooms were highly personalised, with individuals having ample belongings and space to engage in activities, such as watching TV, listening to music, or using games consoles. This meant that people could choose to use communal and private areas and enjoy time away from the busier environment.

The home was generally clean and tidy. Cleaning schedules were in place to support staff to ensure that all areas of the home were kept clean. However, these were not consistently completed. The service should ensure attention is paid to these to ensure a consistently clean environment which promotes infection prevention and control guidelines.

Recent upgrades to some areas of the home had benefitted people living in the service. The service had involved people in choosing flooring and colour schemes. This meant that people felt listened to and were able to influence the environment in which they live. The service could further develop opportunities for people to be involved in giving their views about how the environment works for them.

The leadership team carried out quality assurance systems to have oversight of the quality of the environment. However, these did not always identify some areas of the home which would benefit from upgrades. Although the leadership team escalated maintenance actions appropriately to the landlord, the service should consider actions they could take which would improve people's surroundings (see area for improvement 1).

## Areas for improvement

1. The provider should ensure quality assurance systems promote the identification of areas of the home which would benefit from improvement. These should be escalated to those responsible for the maintenance of the home. However, the service should support improvements where appropriate.

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 4.19); and 'I experience an environment that is well looked after with clean, tidy, and well maintained premises, furnishings, and equipment' (HSCS 5.22).

## 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 to get the most out of life, the service should actively review people's goals and support people to achieve these goals.

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).

**This area for improvement was made on 7 June 2022.**

#### Action taken since then

Staff recorded people's identified aspirations and goals within the electronic care planning system. People were being supported to work towards these and, in some cases, people had achieved some identified areas.

The service could further improve the recording around this to ensure goals are progressed in line with agreed timeframes and the outcome assessed.

**This area for improvement has been met.**

#### Previous area for improvement 2

To ensure the cleanliness and safety of the home, the manager should review and audit cleaning schedules to include areas that have been overlooked.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that: 'My environment is secure and safe' (HSCS 5.17); and 'I experience an environment that is well looked after with clean, tidy, and well maintained premises, furnishings, and equipment' (HSCS 5.22).

**This area for improvement was made on 7 June 2022.**

#### Action taken since then

The home appeared clean. Cleaning schedules guided staff so that areas of the home were not missed and, therefore, supported good infection control practice.

Staff should ensure that these schedules are always documented correctly.

**This area for improvement has been met.**

**Previous area for improvement 3**

To ensure the correct guidance is being followed, the service should review and archive out-of-date information ensuring all relevant information is easily accessible.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that: 'I experience high quality care and support based on relevant evidence, guidance, and best practice' (HSCS 4.11).

**This area for improvement was made on 7 June 2022.**

**Action taken since then**

Documentation reviewed during the inspection indicated that guidance was up-to-date and supported staff to provide the right support to meet people's outcomes.

Some guidance was not as easy to access and the service should ensure that improvements are made to enable all relevant information to be accessible.

**This area for improvement has been met.**

**Previous area for improvement 4**

Improvements are needed to the oversight of the home's environment, thus identifying any repairs and improvements that are required. This is to ensure that people live in a home that is in a good state of repair, decoration, and that it is comfortable.

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 4.19); and 'I experience an environment that is well looked after with clean, tidy, and well maintained premises, furnishings, and equipment' (HSCS 5.22).

**This area for improvement was made on 7 June 2022.**

**Action taken since then**

The leadership team utilised a variety of audit tools, some of which supported the identification of any repairs and improvements that were required.

**This area for improvement is no longer in place and has been incorporated into a new area for improvement within the section 'How good is our setting?'.**

**Previous area for improvement 5**

The service should create and implement a service-specific improvement plan involving the people who live in the home, staff, and relatives to ensure any developments to drive the service forward are person-led.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that: 'I am actively encouraged to be involved in improving the service I use, in a spirit of genuine partnership' (HSCS 4.7); and 'I am supported to give regular feedback on how I experience my care and support and the organisation uses learning from this to improve' (HSCS 4.8).

**This area for improvement was made on 7 June 2022.**

## Action taken since then

The service is supported by an electronic system which captures identified improvement actions and tracks the progress made. Many of these were driven as a result of audit activity with less input from people using the service, their relatives, and staff.

The service should continue to develop the way in which people are involved in contributing to the service improvement plan.

**This area for improvement has not been met.**

## Previous area for improvement 6

The provider must put in place a quality assurance system with a programme of repairs and upgrades to ensure that the internal and external areas of the care home are in good physical order and that furnishings and equipment are of a good standard.

This is to ensure that care and support is consistent with Health and Social Care Standards (HSCS) which state that: 'I experience an environment that is well looked after with clean, tidy, and well maintained premises, furnishings, and equipment' (HSCS 5.22).

**This area for improvement was made on 7 June 2022.**

## Action taken since then

The leadership had some oversight of areas of the home which would benefit from repairs and upgrades. For further information please see the section 'How good is our setting?'.

**This area for improvement is no longer in place and has been incorporated into a new area for improvement within the section 'How good is our setting?'.**

## 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 setting?	4 - Good
4.1 People experience high quality facilities	4 - Good

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