Linkfield Residential Ltd
Care Home Service

19 Linkfield Road
MUSSELBURGH
EH21 7LQ

Telephone: 01316655566

Type of inspection:
Unannounced

Completed on:
15 July 2026

Service provided by:
Linkfield Residential Ltd

Service provider number:
SP2021000122

Service no:
CS2021000206

About the service

The service is a care home providing care and support for up to seven adults who have a learning disability, located in Musselburgh, East Lothian. There were seven people experiencing care with the service during the inspection. The care home was registered with the Care Inspectorate on 17 August 2021 and the provider is Linkfield Residential Ltd.

The home is a detached villa, situated in a residential area, close to local transport links and amenities. It consists of two floors, with a large lounge and dining room on the ground floor. The service has a large, well-tended enclosed garden also.

About the inspection

This was an unannounced inspection that took place on 7 July 2026. The inspection was conducted by one inspector from the Care Inspectorate. To prepare for the inspection we reviewed information about the service. This included previous inspection findings, information submitted by the service and intelligence gathered.

We evaluated how well people's health and wellbeing was supported as well as the quality of leadership.

To inform our evaluation we:

- spoke with six supported people and one relative and received nine care questionnaires
- spoke with four staff, two managers and received seven staff questionnaires
- spoke with two professionals working with the service and received two questionnaires
- observed daily life at the service
- observed how well care staff supported people
- considered the cleanliness and quality of the physical environment
- reviewed documents and electronic records.

Key messages

- Most people were satisfied with the quality of the care and support received.
- People experienced a consistent support team who knew them well.
- Mealtimes were well staffed and snacks were available for people.
- The environment was clean, tidy and homely.
- Positive behavioural support plans had been developed.
- A service improvement plan needed developing to drive change and improvement where necessary.

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 leadership?	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 the service as operating at a good level for this key question. There were several strengths with the care and support provided and how this supported positive outcomes for people.

Staffing arrangements worked well with no agency staff being used, therefore care and support was consistent and stable. People did not feel rushed by staff when being supported and staff knew their history, routines and preferences. Techniques used to assist people to mobilise were undertaken in a safe and reassuring way. People were supported to access social and leisure opportunities in the community.

People experiencing care told us "the staff are really good," "I like it here, people are friendly and staff are friendly" and "I am loving it." This meant people could build trusting relationships at the service.

Comments from relatives included "[my relative] is settled at the home and enjoys the company of the staff and of the other residents" and "[the service needs] adequate staff to take clients to more activities."

Staff were attentive and people were enjoying unhurried mealtimes in a relaxed atmosphere. Support with eating and drinking was undertaken in a dignified way. Medication administration was organised with regular audits being undertaken. This ensured that people experienced safe and effective medication. Health issues of people experiencing care were well monitored and actions taken. This supported the service to effectively respond to signs of deterioration in people's health. Management of people's finances was undertaken in an individualised way and people were supported to be involved.

People's rooms and communal areas were clean and tidy, though retained a welcoming and homely setting. People's rooms were comfortable with personal decoration. The furnishings and equipment were in good condition. Staff were seen to wear, use and dispose of personal protective equipment such as gloves and aprons in line with guidance.

How good is our leadership? 4 - Good

We evaluated the service as operating at a good level for this key question. There were several strengths with the leadership and quality assurance.

If there were any concerns regarding people's health and wellbeing, relatives were communicated with quickly. We saw that the service had good governance and quality assurance processes in place, which included the observation of staff practice. Any incidents were reported and advice sought where needed. The service sought feedback from people experiencing support and their relatives through satisfaction surveys. The service was also gaining feedback from people experiencing care through regular meetings. However, personal plans could be outcomes focussed with specific action setting with people.

Comments from professionals involved in the service included "the manager is well informed, seeks support appropriately and also acknowledges areas for improvement, working collaboratively to meet them" and "they have tried very hard to support her and understand her needs and it is a good safe environment."

The service needed an improvement plan to show what improvements have been identified, what difference these changes will make to the people using the service and the timescales for implementation. This is to

ensure that there is a culture of continuous improvement for people experiencing support (see area for improvement one).

Areas for improvement

1. The provider should ensure that the service has an improvement plan to drive change and improvement where necessary.

In order to achieve this, the service provider should ensure that:

a) Improvements have been identified that are most likely to support better outcomes for people.
b) Actions are chosen that are achievable and sustainable.
c) There are reasonable timescales for implementation.
d) There is a way to review progress and identify where further action may be needed.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which states that:

'I benefit from a culture of continuous improvement, with the organisation having robust and transparent quality assurance processes' (HSCS 4.19).

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

The service should ensure that positive behavioural support plans are developed for supported people who experience behaviours that cause concern.

In order to achieve this the behavioural support plans should include behaviour descriptors and support strategies that care staff can engage with for the following situations:
- Green (pro-active plan for normal behaviour)
- Amber (active plan for when behaviour of concern may occur)
- Red (reactive plan for behaviour of concern)
- Blue (post-reactive plan for calming down and remaining cautious as behaviour could return to red)

This is to ensure care and support is consistent with Health and Social Care Standards (HSCS) which states that:

'I get the most out of life because the people and organisation who support and care for me have an enabling attitude and believe in my potential' (HSCS 1.6).

'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 24 April 2025.

Action taken since then

The service had met with East Lothian Health and Social Care Partnership and then developed positive behavioural support plans with behaviour descriptors and support strategies for each person experiencing care.

This area for improvement has been met.

Complaints

There have been no complaints upheld since the last inspection. Details of any older upheld complaints are published at www.careinspectorate.scot.

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 leadership?	4 - Good
2.2 Quality assurance and improvement is led well	4 - Good

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Compass House
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