

Care Me Ltd Support Service

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Type of inspection:
Announced (short notice)

Completed on:
23 October 2025

Service provided by:
Care Me Ltd

Service provider number:
SP2023000108

Service no:
CS2023000165

About the service

Care Me Ltd is a privately owned care at home service, providing care and support to adults in West Lothian.

The provider Care Me Ltd has been registered by the Care Inspectorate to provide the service since 06 June 2023.

About the inspection

This was an announced (short notice) inspection which took place between 9 and 23 September 2025. The inspection was carried out by an 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 one person using the service and one of their family
- Spoke with 4 staff and management
- Observed practice and daily life
- Reviewed documents

Key messages

- People and relatives were happy with their care and support
- Staff were delivering care and support with compassion and warmth
- Appropriate standards were not being used to evaluate practice
- Some staff were not receiving formal support and guidance
- Improvement plans were lacking in the service
- Personal plans lacked relevant, clear information that was up to date and appropriately reviewed

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?	3 - Adequate
How good is our staff team?	3 - Adequate
How well is our care and support planned?	3 - Adequate

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

We observed warm and compassionate interactions between staff and people. Staff were respectful and friendly in their communication, ensuring people understood what was being said.

Staff and relatives described that people's health and wellbeing had improved during the time of using the service. This meant that people were less anxious and had improved their wellbeing in general.

Staff recognised and responded quickly to emergency situations. This enabled people to gain the right healthcare at the right time.

People were appropriately supported with their medication, with prompts used to ensure that people maintained their independence.

Food and drink met people's nutritional and cultural needs. Staff supported people with making snacks and heating pre-prepared meals. Mealtimes were unhurried and relaxed.

How good is our leadership?

3 - Adequate

We evaluated this key question as adequate, where strengths only just outweighed weaknesses

Quality assurance processes had been used with some staff to ensure competency in a variety of areas. This was completed by senior staff during observation visits, followed by discussions and reflective accounts. The standards and codes of practice used to monitor practice were not in keeping with staff in a social care role and were based on clinical settings. These practices were also not in keeping with the service's policies and procedures. This meant that staff practice was not being benchmarked appropriately against the correct standards. See area for improvement one.

Staff commented that senior staff and managers were available to gain advice from, and were approachable and available. However, management oversight had been very limited. Some staff had taken on a range of responsibilities, with little or no formal opportunities to gain guidance, develop skills or increase their knowledge. This meant that some staff were not adequately supported to perform their role. See requirement one.

Some feedback had been gained from people using the service and staff, but this information was not used to influence the development of an improvement plan. We had discussed the importance of developing a self-evaluation process at the last inspection, however this had not been completed. This meant that there was no planning for positive outcomes for people, based on their needs and wishes. See area for improvement two.

Incidents and accidents had been dealt with well, however, managers had not appropriately notified the Care Inspectorate within regulatory timescales. See area for improvement three.

Requirements

1. By 10 December 2025, to ensure that people's care and support needs are met effectively, the provider must ensure staff knowledge, competency and development needs are met well.

To do this, the provider must, at a minimum:

- a) provide ongoing support, regular supervision and appraisal opportunities for all staff, to reflect on their practice and wellbeing with detailed records kept
- b) ensure all staff have the appropriate knowledge and skills for their role

This is in order to comply with section 7(1)(a) of the Health and Care (Staffing) (Scotland) Act 2019.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) 3.14 which states, "I have confidence in people because they are trained, competent and skilled, are able to reflect on their practice and follow their professional and organisational codes".

Areas for improvement

1. To ensure the health, wellbeing and safety of people, the provider should ensure the appropriate use of standards, quality frameworks and codes of practice are used to evaluate staff practice.

This should include but not be limited to, developing and implementing regular quality assurance audits and establishing dynamic improvement processes.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) 3.14 which states, "I have confidence in people because they are trained, competent and skilled, are able to reflect on their practice and follow their professional and organisational codes".

2. To ensure the health, wellbeing and safety of people, the provider should ensure that quality assurance and improvement influence positive outcomes for people.

This should include but not be limited to, developing and implementing regular quality assurance audits and establishing dynamic improvement processes.

This is to ensure that care and support is consistent with the Health and Social Care Standard (HSCS) 4.19 which state that, "I benefit from a culture of continuous improvement, with the organisation having robust and transparent quality assurance processes".

3. To assure people that the provider is promoting their safety and protection, the provider should ensure that all notifiable incidents are reported to the Care Inspectorate within the stated timescales.

This should include but is not limited to updating and cascading information on notification reporting guidance to all appropriate staff in the service. Also reporting all notifications to appropriate organisations it works with, following agreed guidance.

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

How good is our staff team?

3 - Adequate

We evaluated this key question as adequate, where strengths only just outweighed weaknesses

Staff arrangements appeared to match the needs of the people well, while staff retention within the service ensured consistency for people.

Staff had developed good rapport and understanding of the care and support needs of people using the service. This was evident in the connections that had been developed. One person commented about the staff team "they are very nice and helpful".

Team communication was limited to staff completing a summary of their shift. This was electronic and appeared to be a daily repetition of the tasks performed, with no other information shared with other staff. This meant that information on the health and wellbeing of people was limited, which had the potential to negatively impact on people's wellbeing. See area for improvement one.

Staff describe senior staff as being available for support for staff, responding quickly to their need for support and guidance. Team meetings were infrequent and lacked opportunities to discuss practice and experience.

Areas for improvement

1. To ensure the health and wellbeing of people, the provider should ensure that information about the person's care and support are shared with other staff.

This should include but not be limited to ensuring that all staff are formally recording detailed care and support completed for each person, and that documentation is available for all staff to access.

This is to ensure that care and support is consistent with the Health and Social Care Standard (HSCS), which states; 4.27 "I experience high quality care and support because people have the necessary information and resources".

How well is our care and support planned?

3 - Adequate

We evaluated this key question as adequate, where strengths only just outweighed weaknesses.

Personal plans had been improved since our last inspection, with more details shared.

This information had not been updated when there were changes in people's care and support needs, including that risk assessments had not been completed after falls. This meant that people's care and support needs were not reflected well within their personal plan. Information within the personal plans was not clear and was contradictory in places. This meant that personal plans were not accurate or easy to read. See requirement one.

Personal plans identified people's support needs in terms of their decision making, but did not describe any legal powers that supported this decision making. See area for improvement one.

Personal plans had not been formally reviewed and timescales were outwith regulatory requirements. See requirement one.

Requirements

1. By 10 December 2025, the provider must ensure that information within personal plans contains relevant information on the health, wellbeing and safety needs of the person, to ensure people receive the appropriate care and support.

To do this, the provider must, as a minimum:

- a) ensure that all information is accurate within personal plans
- b) ensure people and their representatives agree with the content of personal plans
- c) formally review personal plans at least every 6 months
- d) ensure all information related to people's care and support is easily accessible for staff
- e) ensure personal plan audits are implemented and regularly completed, ensure actions are implemented.

This is to comply with Regulation 45(2)(b)(ii)(iii) of The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/210).

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS), 1.15 which states, "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.

Areas for improvement

1. To ensure that people's rights are maintained and respected the provider should ensure that any legal powers to make decisions for people being supported, should be clearly stated within the person's personal plan.

This should include but not be limited to ensuring that all staff are aware of legal authority held for each person, and that documentation is available for all staff to access.

This is to ensure that care and support is consistent with the Health and Social Care Standard (HSCS) 4.1, which states "My human rights are central to the organisations that support and care for me" and (HSCS) 2.3, which states "I am supported to understand and uphold my rights".

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 leadership?	3 - Adequate
2.2 Quality assurance and improvement is led well	3 - Adequate
How good is our staff team?	3 - Adequate
3.3 Staffing arrangements are right and staff work well together	3 - Adequate
How well is our care and support planned?	3 - Adequate
5.1 Assessment and personal planning reflects people's outcomes and wishes	3 - Adequate

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