

Call -In Homecare West Lothian. Support Service

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Type of inspection:
Unannounced

Completed on:
16 October 2025

Service provided by:
Call-In Homecare Ltd

Service provider number:
SP2004007104

Service no:
CS2020379928

About the service

Call-In Homecare West Lothian is a support service providing care at home services to people living in their own homes. The service was registered in January 2021 and is a privately owned company which is part of Clece Care Group.

The service is provided by a team of community care assistants and is managed by the service manager, coordinator, and care and quality assurance officer. There is oversight and support from the regional manager, operations director, and governance team.

At the time of the inspection, there were 53 people receiving support from the service.

About the inspection

This was an unannounced inspection which took place on 29 and 30 September and 1, 2, and 16 October 2025. The inspection was carried out by two inspectors 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 13 people using the service and two of their relatives
- spoke with, and received feedback from, 11 staff and management
- spent time with care workers observing their practice
- reviewed documents
- received feedback from supporting professionals.

Key messages

- People experienced warm and compassionate care.
- The office team were regularly providing care because there were not enough care workers. The senior management team were committed to supporting improvement in this area.
- Staff worked well as a team and were ensuring people received the care and support they needed.

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?	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.

We observed warm and compassionate interactions between staff and people. Many people described that they had developed positive relationships with their established staff team, which had supported them with their health and wellbeing. We heard, "They are brilliant, I am very happy and comfortable with all my carers" and "The staff are really good, I am confident in what they do for me. I see the same staff which I like". Other people described that some temporary staff were less familiar with them and what support to provide, which was frustrating at times. One relative said, "[named carer] is excellent but I am less confident with some other carers as I don't know them as well". This meant that people experience better outcomes with staff who knew them well.

Staff clearly understood their role in supporting people with their health and wellbeing, describing how they ensured people were receiving the right support and advocating for people in terms of their changing care needs. This ensured that people were getting the right care and support.

The service had developed positive relationships with external healthcare providers which had supported the health and wellbeing of people. They were ensuring that people were accessing the right services when they needed to.

Personal plans were detailed regarding people's care needs and medical conditions, however some were not updated, audited, or reviewed regularly. This meant that some information or changes to people's care and support were not consistent within their personal plans. We discussed this with the manager, who agreed to prioritise updating people's information.

People were being supported well with their medication, dependent on their wishes and needs. This was being managed safely using an electronic medication recording system. Managers monitored this regularly ensuring that medication was administered appropriately. This meant that people could be confident that their medication was being managed well.

Mealtimes were relaxed and unhurried. People were supported with drinks, snacks, and meals during their support time. We observed staff supporting people to make choices of what they would like to eat and drink. This meant that people's preferences were respected.

How good is our leadership?

3 - Adequate

We evaluated this key question as adequate. While the strengths had a positive impact, key areas needed to improve.

The office team knew people very well and were supportive to the staff. People receiving care and support expressed confidence in speaking to the manager, trusting they would make every effort to assist.

During the last inspection, we noted that the manager and staff were making considerable efforts to ensure everyone received appropriate care and support, despite facing significant staffing challenges. While the service had prioritised recruitment, progress was limited due to a difficult employment market. The office

team continued to step in regularly to deliver care, ensuring that individuals' needs were met. We were encouraged to see that care and support remained a priority and that the management team had a strong understanding of the people they supported. However, this focus came at the expense of other areas of the service, including progress on previously identified areas for improvement. We discussed this with the manager and senior management team who expressed commitment to making improvement. We were reassured by their intention and action plan but acknowledged that meaningful change would take time. In order to support the service to make these improvements, we have made an area for improvement which we will follow up at the next inspection (see area for improvement 1).

Areas for improvement

1. To ensure people's health and the wellbeing of staff and people, the provider should ensure that quality assurance and leadership tasks are prioritised by managers.

This should include, but not be limited to, ensuring that managers are not regularly delivering direct care and support, to enable staffing and quality assurance processes to be completed.

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).

How good is our staff team?

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 were supported by staff that they generally knew and had been matched well with them. Where possible, staff were engaging in meaningful conversations with people. This supported people to develop trust in their staff team.

Staff worked well together. There was a sense of confidence and respect across the team. When new staff were recruited they spent time with experienced staff and had opportunities to learn and discuss good practice. This was helping staff build their understanding and grow within their roles.

Permanent staff were flexible in changing their support to meet the needs of people and the service. The service was lacking in permanent established staff and, at times, were using temporary staff. Managers were actively involved in the care and support of people to cover staffing gaps. This had enabled them to develop good relationships with people and have a good understanding of their care needs. However this was impacting on the managers' ability to manage all aspects of the service. We have made an area for improvement in 'How good is our leadership?' within this report.

Some people described that staff did not always arrive at the agreed times to provide their care. This had the potential to impact on people's personal outcomes and daily lives. However, people we spoke to were understanding of this and were overall happy with the care they experienced. We discussed this with the manager who agreed that people should receive their care and support when expected and that they would ensure that any changes in their support should be communicated to people quickly. We will follow this up at our next inspection.

Staff described communication within the team as good, with generally good communication from the office. Some staff were frustrated at a lack of information when they had expressed concerns regarding people's wellbeing. This meant that communication was, at times, lacking in consistency and had the potential to impact on people's health and wellbeing.

Staff used the electronic system to record the support they had provided for people, which supported staff to have insight into the person's health and wellbeing. However, staff did not have regular opportunities to meet to discuss their practice or share experiences with their peers. This meant that staff could not benefit from shared learning across the team and ensure consistency of care for people.

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 ensure the management team have time to manage the service and have appropriate oversight of the service, the provider should ensure there is adequate support in place for staff recruitment and contingency planning.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that: 'I use a service and organisation that are well led and managed' (HSCS 4.23).

This area for improvement was made on 2 October 2024.

Action taken since then

The service had a dedicated recruiter, however progress with recruitment has been slow. We observed that the service does well in retaining staff and was replacing staff who had retired or were experiencing long-term absences. However, the staffing levels had not increased.

The service actively promoted the organisation and careers in care at local employment fairs, while continuing to advertise opportunities throughout the area.

In order to ensure people received the support they required, we observed that the management team were continuing to provide significant level of support.

We assessed that this area for improvement had not been met in full. We have replaced this with a new area for improvement in the section 'How good is our leadership?' of this report. This will be followed up at the next inspection.

Previous area for improvement 2

To ensure people receiving their care at the right time, the service should monitor visit times and amend visit schedules to meet people's needs and preferences.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that: 'I know who provides my care and support on a day-to-day basis and what they are expected to do. If possible, I can have a say on who provides my care and support' (HSCS 3.11).

This area for improvement was made on 2 October 2024.

Action taken since then

We noted that visit times were being monitored by the service and also the local Health and Social Care Partnership. However, we continued to see visit times being changed by care staff. This was being done to accommodate people's needs and wishes. It was also helping to reduce travel time between visits. We heard that most people receiving a service were happy with the service but these changes meant that quality assurance was not effective in effecting change.

We assessed that this area for improvement had not been met in full. We have replaced this with a new area for improvement in the section 'How good is our leadership?' of this report. This will be followed up at the next inspection.

Previous area for improvement 3

The provider should ensure that people receive their care and support at an agreed time. Visit schedules should be achievable with sufficient travel time between visits and, where possible, take account of people's needs and preferences for visit times.

These should be monitored with action taken to rectify any issues identified.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that: 'My care and support meets my needs and is right for me' (HSCS 1.19); and 'People have time to support and care for me and to speak with me' (HSCS 3.16).

This area for improvement was made on 6 October 2023.

Action taken since then

This is an outstanding area for improvement which links to previous area for improvement 2.

We assessed that this area for improvement had not been met in full. We have replaced this with a new area for improvement in the section 'How good is our leadership?' of this report. This will be followed up at the next inspection.

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?	4 - Good
3.3 Staffing arrangements are right and staff work well together	4 - Good

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