

Kelvin Care Housing Support Service

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Type of inspection:
Unannounced

Completed on:
20 October 2025

Service provided by:
Kelvin Care Limited

Service provider number:
SP2023000142

Service no:
CS2023000220

About the service

Kelvin Care provides a combined housing support and care at home service to people living in their own homes in the north and west end of Glasgow. The provider is Kelvin Care Limited.

The service states that its purpose is to offer a high-quality, person-centred service for individuals in their own homes and communities. They have a dedicated team of experienced care staff supported by a care supervisor and manager who tailor services to meet individuals' needs and personal preference.

At the time of inspection 23 people were being supported.

About the inspection

This was an unannounced inspection which took place between 13 and 15 October 2025 with some additional meetings and phone calls on 20 October 2025. Our inspection took place between 9:30 and 17:00. 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 and complaints information, information submitted by the service and intelligence gathered throughout the inspection year.

To inform our evaluation we:

- spoke with four people using the service and four of their friends and family members;
- spoke with seven members of staff and management, and one social worker who works closely with the service;
- observed practice and daily life; and
- reviewed documents.

Key messages

People benefited from a stable, experienced staff team and were able to build good relationships with the people who supported them.

Staff were well supported and well trained and this meant they were able to provide good quality care with compassion.

The management team were still developing some processes for quality assurance that will support the service to focus on improvements.

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 staff team?	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 found significant strengths in aspects of the care provided and how these supported positive outcomes for people, therefore we evaluated this key question as very good.

People experiencing care consistently told us they were very satisfied with the support they received. They benefited from longer visit times and having the same staff member attend each time. This enabled staff to build trusting relationships and provide meaningful contact and contributed positively to people's overall wellbeing.

Infection prevention and control procedures were followed appropriately, and we observed good practice in this area.

Although only a small number of individuals required support with medication, the service used an electronic medication recording system. This helped to minimise the risk of medication errors and supported safe administration practices.

Staff demonstrated a strong understanding of the people they supported. As a result, staff were able to identify changes in individuals' needs promptly. Daily recording notes were completed to a high standard, ensuring that colleagues and external professionals were kept informed of any changes or incidents.

The electronic care management system was used effectively to monitor people's support, including incidents, accidents, and general wellbeing. Families and professionals reported that communication with the office team was very good and that they felt well-informed about any relevant developments. This meant that people and their families felt confident in the care they were receiving.

Personal plans were developed in partnership with people and their families, ensuring that support was tailored to individual needs and preferences. However, some plans would benefit from more detailed information about people's likes, dislikes, and personal histories. We discussed this with the manager, who confirmed that the service improvement plan includes the development of 'About Me' sections.

The electronic care planning system alerted management when care reviews were due. This was a useful tool for management to ensure they were keeping track of tasks and ensuring that people's plans were up to date and based on current, relevant information.

People told us they were supported with personal care in a respectful and dignified manner. Domestic tasks were carried out in line with individual preferences.

We noted that some aspects of a previously identified area for improvement had not yet been fully addressed. These related to quality assurance and self-evaluation processes. The service would benefit from further development of a robust self-evaluation framework and an improvement plan that draws on formal quality assurance systems, stakeholder feedback, and reflective practice. Strengthening these processes will help ensure the service maintains high standards of care, particularly during periods of growth or management absence. We have written an area for improvement to reflect this (see area for improvement 1).

Areas for improvement

1. To ensure that people continue to receive a high-quality service, the provider should regularly carry out a comprehensive self-evaluation. This process should incorporate feedback from people using the service as well as staff, and be used to inform a more robust and actionable service improvement plan. The self-evaluation should consider the effectiveness of processes that support quality assurance, such as tracking of people's reviews, staff supervision, and the timely updating of personal plans.

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).

How good is our staff team?

5 - Very Good

We found significant strengths in aspects of the care provided and these supported positive outcomes for people, therefore we evaluated this key question as very good.

Care packages had been agreed on an individual basis in collaboration with social work, the person receiving care, and their family. People told us they had developed positive relationships with the staff who supported them. Where personality clashes had occurred, there had been flexibility to request a change in worker, which had been accommodated appropriately. We saw examples where the service had responded to requests to adjust visit times to better suit individual needs. This demonstrated a flexible and person-centred approach to care delivery.

Staff had been well trained and were well supported in their roles. Training had been tailored to the specific needs of the individuals they supported. This ensured that staff had the necessary skills and confidence to provide safe and effective care.

Feedback from staff and families highlighted the high level of support that had been provided by the management team, particularly during emotionally challenging times such as bereavement. Management were described as approachable and responsive. We heard that managers covered care shifts to ensure continuity of service during staff absences. This also enabled them to maintain a strong understanding of frontline roles and responsibilities, supporting effective leadership.

The service benefited from a warm and supportive atmosphere, underpinned by positive working relationships. Staff reported good internal communication and regular opportunities to discuss their work and share ideas for improving outcomes. Staff were confident in building positive interactions with people and demonstrated a commitment to person-centred care.

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 promote people's health and wellbeing, the service should further develop its approach to self-evaluation and service improvement planning. This should include, but is not limited to, using information from formal quality assurance systems, feedback from stakeholders, and self-evaluation to inform improvement planning.

This ensures 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 24 September 2024.

Action taken since then

A service improvement plan was in place; the version reviewed dated from May. However, access to the document was limited to one member of staff, which suggested it was not being used as a working tool across the team. The plan lacked clear evidence of input from individuals using the service, staff, and families but it was matched to the Quality framework used for inspections. There was no formal self-assessment process in place at the time of inspection, however we were assured the manager was booked to attend training on this in the near future and would begin to work on this.

We have reworded this and reissued it under key question one to reflect the progress made.

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?	5 - Very Good
1.3 People's health and wellbeing benefits from their care and support	5 - Very Good
How good is our staff team?	5 - Very Good
3.3 Staffing arrangements are right and staff work well together	5 - Very Good

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