

Careline Home Support Housing Support Service

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Type of inspection:
Unannounced

Completed on:
27 November 2025

Service provided by:
Mr James Imrie and Mrs Carol Imrie, a
partnership trading as Careline Home
Support

Service provider number:
SP2004004446

Service no:
CS2004063857

About the service

Careline Home Support provides a housing support and care at home service to older people, people with learning disabilities, physical disabilities, mental health conditions, terminally ill people and people recovering from operations. The provider is Mr James Imrie and Mrs Carol Imrie, a partnership trading as Careline Home Support.

The main office is based in the Pollokshields area of Glasgow with satellite offices in Falkirk, and West Lothian. At the time of the inspection the service was supporting 250 people across East Renfrewshire, East Dunbartonshire, West Lothian, Falkirk and Glasgow. Some people pay for their support from the service through direct payments, and others are funded via their local council.

The registered manager co-ordinates the overall running of the service, supported by a senior co-ordinator. Service co-ordinators locally manage staff who provide direct support to people.

The hours of service provided vary depending on people's individual assessed needs, ranging from four hours a week up to 30 hours a week. Staff support is available to service users over a 24-hour period.

About the inspection

This was an unannounced inspection which took place between 24 November 2025 and 27 November 2025. The inspection was carried out by four inspectors from the Care Inspectorate.

To prepare for the inspection we reviewed information about the 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 or met with 25 people using the service
- spoke or met with 15 relatives or carers
- spoke with 14 staff and management
- reviewed survey feedback from one person supported/their relative and 12 members of staff
- observed practice and daily life
- reviewed documents.

Key messages

- The staff team worked well together to promote a positive experience for individuals.
- Individuals supported were happy with their experiences.
- Enhancing existing medication systems would support improvement.
- The staff team spoke positively regarding the availability and delivery of training.

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 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

1.3: People's health and wellbeing benefits from their care and support

We made an evaluation of good for this key question, as several important strengths, taken together, clearly outweighed areas for improvement. Whilst some improvements were needed, the strengths identified had a significant, positive impact on people's experiences.

People's health and wellbeing should benefit from their care and support. We observed a team of dedicated and compassionate staff who clearly cared for the people they supported. It was evident during the interactions and engagements we witnessed and heard about, that staff treated people with compassion, dignity and respect. One person told us "all staff are very respectful, they arrive on time, you could almost set your watch by them" whilst another commented "staff treat both (individuals supported) as people and taken their time and have got to know them".

People told us that they were supported by a consistent staff team who knew them well. Individuals advised that they were sent out a schedule of visits for the coming week. This allowed individuals to know who would be visiting them and when. One person told us "I receive an email with my scheduled visits on a Friday, and this helps me know for the next week". Staff recorded the outcomes of visits in a paper record within the individual's house and on an online platform. We shared some examples when information in personal plans and daily recordings or staff practice did not align. We asked the service to use internal quality assurance processes to continue to monitor the information in personal plans. This would ensure that information was accurate and ensure consistency of care for individuals.

Staff responded to changes in health care needs and liaised with external health professionals. This included community nurses, GPs and local falls teams. One relative told us "he (person supported) wasn't himself one day and staff alerted me, I was able to call the GP and he had an infection", whilst another commented "staff noticed a scratch on his leg, it didn't need further attention, but it was reassuring that they pointed this out to me and asked me to look at it". Staff managed unexpected situations well and additional support was provided when required. One person told us "(person supported) had a fall one day, the staff were very good at staying with her until help arrived and the senior staff also supported with allowing them this extra time, assuming by covering other visits. This helped to keep people well."

Having the right medicine at the right time is important for keeping people safe and well. Overall, medication was managed effectively to support people to take the right medication at the right time. Staff followed medication protocols to respond to individual's needs. The staff completed paper records during support visits. However, we shared with the service that the format in use did not align with current best practice. We asked the service to review the current documentation in place (see area for improvement 1). This would allow for more robust monitoring of the medication being administered and any that was declined.

Areas for improvement

1. To ensure that people can be confident with medication practices, the service provider should ensure that medication administration records are in line with current best practice.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that: "Any treatment or intervention that I experience is safe and effective" (HSCS 1.24).

How good is our staff team?

4 - Good

3.2: Staff have the right knowledge, competence and development to care for and support people

We made an evaluation of good for this key question, as several important strengths, taken together, clearly outweighed areas for improvement. Whilst some improvements were needed, the strengths identified had a significant, positive impact on people's experiences.

Individuals and their families confirmed that staff made a positive impact during care delivery. One person told us they had "no concerns about the quality of their work, they are all so polite and can tell their values are good" whilst another commented "they have good banter and relationship with him (person supported)." This helped to make people feel valued and respected.

Staff told us they felt well supported by the management team. Staff had regular supervision opportunities with senior staff to identify any practice, training and support needs promptly. The management team had also hosted an event for some of the newer staff to the service. This had resulted in ongoing professional relationships. This promoted peer to peer support for the staff team.

People should have confidence that the people who support them are trained, competent and skilled. The staff team spoke positively about training provided. A training programme had been developed following the completion of a training needs analysis. A wide range of mandatory training was delivered in person. A dedicated training room within the main office provided staff with a space to meet and participate in the training provided. Staff were provided with time to complete required training and completion rates were high. This helped promote a learning culture within the staff team. The training provided was relevant and helped staff meet the needs of people supported. One person told us "I am more than happy with the care. The staff have bonded with me. They have the right training". The service promoted online platforms for staff to maintain their professional registration. This helped staff to maintain their learning and development needs.

Observations of practice were undertaken to ensure staff applied training in their day-to-day work practice. This included staff interactions, communication, medication practice, infection control and the use of personal protective equipment. We asked the service to review the frequency of these observations, as through our observations not all staff were always working in line with the training they had received. This would allow the service to routinely monitor staff practice in relation to formal training.

People could be confident that new staff had been recruited safely, and the recruitment process reflected the principles of "Safer Recruitment, Through Better Recruitment". New staff confirmed that they had been afforded the opportunity to shadow more experienced staff. This helped them to get to know individuals and the expectations of the service.

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 provider should ensure that quality assurance processes result in clear action plans. Action plans should be routinely revised and updated.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which states 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 20 November 2024.

Action taken since then

Routine quality assurance processes were undertaken. These activities resulted in action plans. Action plans were routinely reviewed. We asked the service to ensure that action plans were closed of prior to the next audit being undertaken. This would ensure any outstanding actions were carried forward.

Overall, 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.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 staff team?	4 - Good
3.2 Staff have the right knowledge, competence and development to care for and support people	4 - Good

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