

Homecare Scotland Care Services Ltd Support Service

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Type of inspection:
Unannounced

Completed on:
5 December 2025

Service provided by:
Homecare Scotland Care Services Ltd

Service provider number:
SP2018013045

Service no:
CS2018363199

About the service

Homecare Scotland Care Services provides care at home and support service. The service is primarily for adults, and also some children. All people who use the service live in their own home. The service provides domiciliary care, complex care packages, and live in packages. There are office bases in Forres, Aberdeen and Glasgow which deal with the coordination of services in Moray, Aberdeen City and Glasgow areas respectively.

About the inspection

This was an unannounced inspection which took place on 24 November to 5 December 2025. 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 information, information submitted by the service and intelligence gathered since the last inspection.

In making our evaluations of the service we:

- Spoke or received surveys with 14 people using the service and 10 of their family/ representatives.
- Spoke or received surveys with 21 staff and management.
- Observed practice and daily life.
- Reviewed documents.
- Spoke with visiting professionals.

Key messages

- The people using the service liked all the carers and said they did their job very well.
- Relatives told us they trust the carers and are comfortable speaking with everyone in the organisation.
- The carers all said they enjoy their work and feel supported by the managers.
- The managers were effective in ensuring everyone felt part of a well supported and caring team.

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

People's health and wellbeing was supported at a very good level. There were clear strengths and few areas for improvement.

The support plans guided staff in how people wanted their care delivered, as well as what tasks needed to be completed. The plans were clear, with instructions about likes and dislikes as well as needs. All the writing was respectful with an emphasis on people's independence. The carers were following the plans, and people and relatives told us that they appreciated the good care they received. One relative from the Forres area told us they mark Homecare as 11 out of 10.

An electronic app (Birdie) was used for recording the care plans, the daily notes and tracking the carers' visit times. This showed that the visits were taking place at the allocated times, and carers stayed with people for the expected duration. Notes were written after each visit and these were clear and would be helpful for the next carer to check what was happening. They would also be useful to look back on, and see any patterns for people, for example one care log mentioned a person's mood being 'low' or 'flat' and described how a person was 'a bit shaky and nervy.' Another person's daily notes mentioned their food, what was offered, what was accepted and how much was eaten. These aspects correlated directly to concerns noted in the care plan and enabled carers to understand how people were feeling over a period of time, and alter their support accordingly.

There were good relationships throughout the organisation, and between; carers, staff, families and managers. This reassured people that their care and any concerns were being addressed by a whole team approach which ensured very good results.

The carers were carrying out all aspects of support at a very good level. They were careful with using, and disposing of, personal protective equipment (PPE) which helped to lessen the risk of infection. People who required support with their moving and positioning were supported in an efficient and safe manner. The carers worked in a quiet and dignified manner which helped people to feel respected. There were some particularly good examples of individualised communication with people who had differing requirements, for example hearing aids and dementia. The carers were patient and did not rush people to make decisions and gave people time to vocalise their responses. On a practical level, the medication was being administered and recorded accurately and this enabled people to gain the full benefit from their medicines.

The quality assurance from the leadership team was helpful in supporting good care for people. An example was the medication competency checks which took place regularly and were recorded on a good clear form. One example of a very good way the service recorded the quality assurance was a client care plan and supervision workbook. This document was person centred and held all quality assurance and checks for the person and related these to their ongoing care. This ensured quality assurance was not a stand alone event but instead it showed progress or matters arising throughout the year. The visit log in this document showed meetings and calls with family, a learning disability nurse and the care staff team. The integrated aspect of the recording enabled a wide range of pertinent views to positively influence people's care.

How good is our staff team?**5 – Very Good**

The staff team were working together at a very good standard, showing many strengths to support people and few areas where improvements were required.

There were enough staff to cover all the hours that people needed for their support, and the managers were recruiting to ensure they could continue to meet everyone's needs. Staff were recruited safely, for example everyone proved their right to work in the UK, their clear criminal records and provided two good references (as well as other checks) before being considered for a position. When new employees started work they had an induction period comprising of training, shadowing and competency checks before they could work alone with people. This covered areas such as medication, use of personal protective equipment and care. The induction period was tracked by the human resources department to make sure it was followed, and discussions were held regularly with leaders to ensure everyone was happy and doing well. This gave people reassurance that their staff would be safe to work with them. People's relatives told us they trusted the staff.

Everyone was up to date with their skills and knowledge for all general and basic training. Where people had specific needs, their staff team received specific training, for example in escalation and breakaway techniques. This was reassuring for people who knew their needs would be met by suitably skilled workers.

The staff told us that they were happy to work with Homecare Scotland and they were well supported by their managers. A minority said they would appreciate more structured meetings and we made sure that the managers were aware of this, and they said they would consider how to meet all staff's needs.

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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