

Clydesdale Homecare Housing Support Service

Council Offices
South Vennel
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Type of inspection:
Unannounced

Completed on:
22 January 2026

Service provided by:
South Lanarkshire Council

Service provider number:
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CS2004073584

About the service

The Clydesdale Home Care Service provides a housing support and care at home service to people living in their own homes across the Clydesdale area of South Lanarkshire. The service operates from an office base in Lanark. The provider is South Lanarkshire Council.

The service supports people to remain safely and independently at home through a range of planned care and support, including personal care, meal preparation and assistance with medication.

At the time of the inspection, the service was supporting around 216 people. The service operates seven days a week, and is managed locally by a team of coordinators, team leaders and a registered manager who oversees daily practice, staff support and service delivery.

About the inspection

This was an unannounced inspection carried out by two inspectors that was carried out on 20, 21 and 22 January 2026 between 07:00 and 17:00.

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 11 people using the service during shadow visits
- spoke with 9 relatives through telephone and face to face discussions
- spoke with 16 staff members, alongside reviewing 23 staff survey responses
- received survey feedback from 12 visiting professionals and spoke with one visiting professional during our visits
- observed staff carrying out visits in people's homes
- reviewed documentation.

Key messages

- People experienced warm, respectful and reliable support from carers who knew them well.
- Staff recognised changes in people's health quickly and acted promptly to keep them safe and well.
- Continuity of care was strong, with people supported by regular staff wherever possible.
- Staff were confident, skilled and motivated, and worked well together to support positive outcomes.
- Training was well managed, and staff used their learning effectively in daily practice.
- Management oversight was strong, with leaders maintaining clear visibility of staffing, scheduling and quality assurance processes.
- The service demonstrated a proactive, responsive approach to communication with families and professionals.

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.

During visits, we observed relaxed and positive interactions. Staff knew people well, took time to talk with them, and approached support in a way that upheld dignity and independence. People described their carers as "wonderful" and "so kind and respectful," and several told us they looked forward to their visits because staff "always listen" and never appeared rushed. Families echoed this, with one relative saying the carers were "fantastic" and that they "couldn't have done this without them."

Staff were highly alert to changes in people's presentation and escalated concerns quickly. We heard examples where early action prevented further deterioration, and one person shared how their carer ensured they attended hospital when unwell, saying, "I don't know if I would still be here if it wasn't for them." Staff worked closely with coordinators and assessment staff to adjust support when needed, including adding visits or increasing medication assistance. As part of their daily practice, staff monitored people's general health, including changes to skin condition, mobility, nutrition and hydration. They told us they looked for signs such as reduced appetite, skin breakdown, swelling or changes in weight, and they recorded and reported these promptly. This contributed to early intervention and helped prevent avoidable deterioration.

We found that carers promoted positive health routines and encouraged people to eat and drink well. Staff shared observations with families and community nurses when they noticed concerns around intake or hydration, and where required they supported people to access equipment or aids to help with safe eating and drinking. District nurses also told us that communication from the homecare staff was effective, timely and focused on the person's needs.

Communication with other professionals worked well, and families consistently described communication from the service as excellent. Medication support was managed safely, with trained staff, clear documentation and prompt reporting of errors. People also benefitted from a regular core team of carers who understood their routines and health needs. This reduced anxiety and supported trust, particularly for people living with dementia or complex health conditions. Relatives told us they valued this continuity and the reassurance it brought.

Personal plans were clear, written in first person language and used effectively by staff, which supported coordinated care. Plans included information about skin care, nutrition, mobility, risks and personal outcomes. Reviews took place within required timescales and earlier when people's needs changed. This responsive approach ensured that care remained right for the person, and families told us they felt fully involved in shaping support.

Daily recordings were generally reliable, though a few entries were brief. Including short notes about mood, eating and drinking, skin condition or general presentation would strengthen continuity and help staff identify early patterns of change. This was a minor improvement within otherwise strong practice.

People benefited from carers who were attentive, skilled and genuinely invested in their wellbeing. This ensured that care was safe, compassionate and proactive, clearly supporting positive outcomes for their health and overall quality of life.

How good is our staff team?**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.

We found significant strengths in staffing arrangements, with well coordinated practice and a stable workforce contributing to positive experiences for people. People experiencing care and relatives consistently told us they felt well supported and respected by staff, and the feedback gathered through discussions, emails and questionnaires reflected high satisfaction with the quality of care.

During shadow visits, staff demonstrated strong understanding of each person's needs. They communicated respectfully, promoted independence and prepared appropriately before entering people's homes. We observed patient, kind and thoughtful practice that supported positive outcomes. Staff also demonstrated clear understanding of escalation processes and acted promptly when concerned about someone's wellbeing.

The service had no vacancies, and staffing levels were stable. Absences were managed through peri staff and overtime, which helped maintain continuity. Scheduling was managed locally, and changes to staffing patterns and hours had been communicated clearly. The scheduling team had improved their understanding of homecare after shadowing and attending meetings, which contributed to more consistent visit planning. People were supported by their preferred or regular carers wherever possible, and staff told us continuity had improved.

Staff reported having enough time to complete visits safely and provide high quality support. Teamwork was strong, and staff described a supportive culture, with one person saying, "I love my job... they all deserve the very best of care," and another noting that management "always check in," which made them feel valued.

Training was well organised and up to date. Staff had access to a blended programme of online and face to face learning covering medication, infection prevention and control, adult protection, moving and assistance and dementia awareness. Staff were encouraged to take responsibility for their own learning and were supported to complete qualifications. Supervision and observations were slightly behind schedule but were taking place and provided meaningful reflection and guidance. Staff told us they valued supervision and found it supportive and focused on wellbeing.

Regular team, patch and management meetings helped staff stay connected, share information and remain involved in ongoing service developments. Leaders maintained strong oversight of scheduling, performance, supervision, reviews and support plans, ensuring these remained up to date and continued to support safe, reliable care. We found that staffing arrangements were well organised, flexible and person centred, with staff motivated, skilled and committed to providing high quality support.

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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