

# TLC Support Services Support Service

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**Type of inspection:**  
Unannounced

**Completed on:**  
21 January 2026

**Service provided by:**  
TLC Healthcare & Support Services Ltd

**Service provider number:**  
SP2023000184

**Service no:**  
CS2023000293

## About the service

TLC Support Services is a care at home provision for adults and older adults within the community. The service is registered to operate within Edinburgh, East Lothian, and West Lothian. They also provide support to one person in North Lanarkshire.

The service is privately owned and has been registered since September 2023. The team consists of a team manager who is also the director of the company, a part-time registered manager, two supervisory staff, administrator, and a team of support workers delivering care.

At the time of this inspection there were 109 people receiving support in the community from TLC Support Services. Most people were residing in Falkirk.

## About the inspection

This was an unannounced inspection which took place on 21 January 2026. The inspection was planned to follow up one requirement that was made at an earlier inspection on 7 November 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.

## Key messages

- Staff had completed induction, training, and ongoing development to ensure they could carry out their roles safely and effectively.

## 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 good is our staff team?	4 - Good
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Further details on the particular areas inspected are provided at the end of this report.

## How good is our staff team?

4 - Good

When we inspected TLC Support Services in November 2025, we made one requirement under 'How good is our staff team?'. This related to staff training and development.

We followed up this requirement on 21 January 2026. We found that the service had made good progress and met the requirement. We have re-evaluated quality indicator 3.2 'Staff have the right knowledge, competence and development to care for and support people' from adequate to good.

We have reported our findings under 'What the service has done to meet any requirements made at or since the last inspection' within this report.

## What the service has done to meet any requirements we made at or since the last inspection

### Requirements

#### Requirement 1

By 16 January 2026, the provider must ensure delivery of good quality, accessible induction and ongoing development opportunities to support staff to carry out their role safely and effectively.

To do this the provider must, at a minimum:

- a) Ensure staff have completed induction and refresher training covering all key areas of care delivery practice before delivering care to people.
- b) Provide effective and regular supervision that enables workers to develop and improve practice through reflection and feedback.
- c) Support workers are supported to meet and maintain their conditions of registration and the requirement for continuous professional learning and development.

This is in order to comply with Section 8(1)(a) of the Health and Care (Staffing) (Scotland) Act 2019.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that: 'I have confidence in people because they are trained, competent and skilled, are able to reflect on their practice, and follow their professional and organisational codes' (HSCS 3.14).

**This requirement was made on 7 November 2025.**

### Action taken on previous requirement

The service had introduced a structured induction programme for new staff. We saw that this had been followed for recent recruits, with a planned schedule of training and activities. This included opportunities to shadow experienced colleagues, alongside competency observations and completed assessments.

Staff training was up-to-date. New staff had finished all mandatory training before providing support and the wider team, including the management team, had completed required refresher courses. In addition to online learning, staff had attended face-to-face training in medication administration and manual handling. Plans were also in place for the whole team to complete adult support and protection training.

There had been increased emphasis on supporting staff through one-to-one and team meetings. Records showed that staff were meeting regularly with the management team.

Overall, there was a stronger focus on ensuring staff were supported to meet and maintain their registration requirements and to engage in ongoing professional learning and development.

### Met - within timescales

## 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 safe practice with medication support, the provider should ensure that people can be confident they receive support in accordance with their individual assessed care needs.

This should include, but not be limited to:

- a) Ensuring that staff are suitably trained in best practice for medication support.
- b) Service policies are reviewed and clear.
- c) Personal plans detail assessed support needs in relation to medication.
- d) Undertake audits, and any necessary follow up, of medication administration.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that: 'If I need help with medication, I am able to have as much control as possible' (HSCS 2.23); and '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 7 November 2025.**

# Inspection report

## Action taken since then

We did not review this area for improvement as part of this inspection.

**This area for improvement will be carried forward to the next inspection.**

## Previous area for improvement 2

To promote good standards of practice, the provider should ensure that people can be confident that adequate time is being given for commissioned care delivery.

This should include, but not be limited to, ensuring that care scheduling is planned in a sequential manner, without overlapping visits and with sufficient travel time for staff between visits.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that: 'People have time to support and care for me and to speak with me' (HSCS 3.16); and 'If I am supported and cared for by a team or more than one organisation, this is well coordinated so that I experience consistency and continuity' (HSCS 4.17).

**This area for improvement was made on 7 November 2025.**

## Action taken since then

We did not review this area for improvement as part of this inspection.

**This area for improvement will be carried forward to 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](http://www.careinspectorate.com).

## Detailed evaluations

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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