

Caring Hearts - Renfrewshire Housing Support Service

301D Embroidery Mill Building
Abbey Mill Business Centre
Paisley
PA1 1TJ

Telephone: 01418405504

Type of inspection:
Unannounced

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Service provided by:
Caring Hearts Limited

Service provider number:
SP2013012051

Service no:
CS2025000048

About the service

Caring Hearts Renfrewshire is a registered Care at Home and Housing Support Service provided by Caring Hearts Limited. The service is provided to adults and older people with a wide range of physical and mental health conditions living in their own homes across Renfrewshire. Support delivered included personal care, help with domestic tasks, and support with eating and drinking.

The central office is located in Paisley and at the time of the inspection the service was supporting 376 people.

About the inspection

We carried out an unannounced inspection from 7 to 13 January 2026 between 09:00 and 17:30. Two inspectors from the Care Inspectorate carried out the inspection. To prepare for the inspection, we reviewed previous inspection reports, complaint and registration details, and updates from the service.

In making our evaluations of the service we:

- spoke with 16 people using the service and 18 family members
- spoke with 8 staff and management
- spoke with one visiting professional
- reviewed survey responses from 49 staff and 8 visiting professionals
- observed practice over two days
- reviewed documents.

Key messages

- People were supported by a kind and compassionate staff team who knew them very well.
- Small, stable staff teams helped people feel reassured and comfortable.
- People benefited from a well led service, where leaders sought feedback and continually worked to improve the service.
- People received care that reflected their needs and wishes because personal plans wer person-centred and detailed.

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 leadership?	5 - Very Good
How good is our staff team?	5 - Very Good
How well is our care and support planned?	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 evaluated this question as very good because we found significant strengths in how the service supported people's health and wellbeing. These strengths had a clear positive impact on people's outcomes.

People experienced care from a committed and knowledgeable staff team who knew them very well and treated them with compassion. Feedback from people and their families was overwhelmingly positive, and people spoke with real warmth about the difference the service made to their lives. One person told us, "They make you feel great, they are really fantastic, very professional", while another said "They go above and beyond, will bend over backwards to help you." We saw staff interacting with people in a warm and respectful manner. Staff took time to talk to people about their day, offered choices, and explained what they were doing before support. Staff also encouraged people to do what they could for themselves, offering support only when needed. This meant people experienced meaningful care that respected their choices and supported their independence.

The service organised support through small, consistent teams, which meant people saw the same staff regularly. This helped staff develop a strong understanding of people's routines, care needs and personalities, and supported people to build trusting relationships with familiar staff. For many people, the need for care came at a difficult time, and these strong, consistent relationships helped people feel more comfortable and reassured.

Staff supported people's health and safety through safe care practices and close working with health professionals. We observed good infection prevention and control practice, including regular hand washing and use of personal protective equipment when required. Staff demonstrated skilled moving and handling practice and supported people with medication in line with guidance. The service had robust medication processes in place, supported by electronic systems that helped identify and manage risks. Staff received regular training and support in medication management, which strengthened safe practice.

The service worked well with health professionals, including physiotherapists and occupational therapists, and staff raised health concerns promptly. Visiting professionals spoke very positively about how the service communicated with them. The service had also strengthened their processes where people were being discharged from hospital which helped ensure people received the right care when they returned home. Together, these approaches helped keep people safe and supported a joined up approach to care.

People experienced very good support to eat and drink during our visits. Staff offered choices and supported people at a relaxed pace. Personal plans clearly detailed any risks associated with eating and drinking and guided staff practice. This support helped people enjoy mealtimes safely and comfortably.

Overall, we saw staff providing kind, safe and consistent support, which appeared to make a difference to people's day to day lives.

How good is our leadership?

5 - Very Good

We evaluated this key question as very good because we found significant strengths in how the service drove improvement in care. These strengths had a positive impact on people's outcomes.

We observed a positive learning culture within the service where leaders welcomed feedback and improvement. Leaders were particularly receptive and open to feedback throughout the inspection. The service worked proactively to gather views from people and their families and used this information to improve care. Leaders used a range of methods to collect feedback, including surveys, quality assurance calls, reviews and comment cards. People told us they felt listened to and supported when they raised concerns. One person said, "If I ever asked for changes, they responded really well. It's been perfect since", while another told us, "The office staff really listen."

Leaders shared information through newsletters and clearly explained the actions they had taken in response to people's feedback. We saw evidence of leaders taking prompt action to address issues raised in reviews, such as arranging specialist training or adjusting visit times to better meet people's needs. Everyone we spoke with told us they knew how to raise concerns, and easy read complaints information was available in people's homes. The service took complaints seriously and acted on the issues raised. This reassured people that their views were heard.

The service had a strong focus on quality assurance and improvement planning. Leaders completed a range of audits, including care plan audits, missed visit monitoring and staff practice observation checks. We saw evidence of issues identified through audits being acted upon in a timely way. Incident management was a particular strength. Senior carers oversaw incidents closely, and staff responded promptly and shared concerns with relevant professionals, which helped keep people safe.

The management team had made significant progress in developing and delivering the service improvement plan. The plan was updated regularly, informed by people's feedback and quality assurance activity, and involved a range of senior staff. We saw evidence of actions being completed, such as the move to electronic daily care notes. This demonstrated a strong commitment to continuous improvement and to getting care right for people.

How good is our staff team?

5 - Very Good

We evaluated this key question as very good because we found significant strengths in staffing arrangements, staff development and team working. These strengths had a clear and positive impact on people's outcomes.

People and families consistently described staff as kind, caring and knowledgeable. Someone told us, "They are angels," while another described staff as "very professional and always smiling" and told us, "They really care, you can tell it's genuine." We observed staff in all roles providing kind, compassionate and person centred care. Staff had enough time to deliver support in a calm and unhurried way, which helped care feel personal and responsive. Staff knew people well and were very familiar with their personal plans, including any risks to safety. This supported safe and consistent care.

The service placed a strong emphasis on learning and developing staff. A high number of staff were completing or had completed their SVQ qualifications, and training completion rates across all areas of training were high. New staff received a structured, in person induction, which helped them understand their roles and people's needs from the outset. This strong learning culture meant people received support from staff who were confident, skilled and well prepared.

Continuity of care was a clear strength of the service. The service provided continuity through small, consistent teams of familiar staff. The service also gave people plenty of notice about who would support

them through set rotas. At the time of inspection, the service did not use agency staff and instead relied on senior staff providing cover when required. People told us the service was flexible and adjusted visit times when needs or preferences changed, where possible. These arrangements helped ensure people received stable and reliable care from staff who knew them well.

We observed a very positive team working culture within the service. 49 staff responded to our survey, and all spoke positively about teamwork, training and support. Staff attended team meetings regularly and used them to share good practice, celebrate successes and reflect on how they applied the Health and Social Care Standards in practice. Office staff created a welcoming and supportive environment, and visiting professionals commented positively on how office staff communicated with them. When staff feel valued and well supported, people receive more consistent and higher quality care, and this was evident in people's experiences and feedback during the inspection.

How well is our care and support planned?

5 - Very Good

We evaluated this key question as very good because we found several significant strengths in assessment and planning that supported positive outcomes for people.

The personal plans we sampled contained rich, detailed information about people's routines, preferences and outcomes. Staff recorded medical information clearly and explained how people's health conditions affected them in day to day life. Risk assessments were thorough and focused on supporting independence rather than limiting choice. Where appropriate, power of attorney and advance care planning information was in place, which helped uphold people's rights, preferences and wishes during changes in health.

The service had improved personal planning and communication through the use of digital daily notes. This helped ensure staff were quickly informed about any changes in people's needs or routines. Importantly, staff we spoke with knew people's personal plans well and used them to guide their practice. This helped ensure care remained consistent and tailored to what mattered to people.

Staff encouraged people to be involved in developing and reviewing their personal plans. Most people told us they were aware of their personal plan, and there were up to date copies in the homes we visited. People and families spoke positively about being involved in personal planning, which helped ensure plans reflected people's wishes. Staff updated plans when people's needs changed, rather than waiting for formal reviews. The reviews we sampled focused on what was working well and what needed to change and included clear action points. This helped ensure reviews were purposeful and led to meaningful changes in people's care.

Reviews should be completed every six months to ensure people's personal plans, and therefore their care, reflect their current needs. We found that around a fifth of reviews were slightly overdue. The service was already working to address this, and it is important they continue to prioritise timely reviews to ensure people receive the right care and to meet legislative requirements.

Overall, personal planning was person centred and well-coordinated. Staff worked closely with people and families, which helped ensure people received care that reflected their needs and outcomes.

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 ensure that people benefit from a culture of continuous improvement, the provider should ensure robust quality assurance systems are utilised to drive improvement.

Actions identified from audits and feedback from people experiencing care and other stakeholders should be clearly linked to the service improvement plan.

This is to ensure care and support is consistent with the Health and Social Care Standards (HSCS) which state that:

'I benefit from a culture of continuous improvement, with the organisation having robust and transparent quality assurance processes' (HSCS 4.19) and 'I use a service and organisation that are well led and managed.' (HSCS 4.23).

This area for improvement was made on 7 March 2024.

Action taken since then

The service had strengthened its quality assurance systems. A comprehensive service improvement plan was in place, informed by audits, complaints, learning from incidents, and feedback from people using the service.

This area for improvement has been met.

Previous area for improvement 2

To ensure that people's changing needs are met, the provider should ensure that care plans and risks assessments are accurate and up to date.

Care plans should give staff clear instruction on how to meet people's needs safely and how to escalate concerns.

This is to ensure care and support is consistent with the Health and Social Care Standards (HSCS) which state that:

'My personal plan is right for me because it sets out how my needs are to be met, as well as my wishes and choices' (HSCS 1.15).

This area for improvement was made on 7 March 2024.

Action taken since then

The service had improved the accuracy of person plans and risk assessments. Staff updated plans when people's needs changed, and the personal plans of the people we visited reflected their current needs. Staff spoke clearly about how they would respond if needs changed and how they would escalate concerns. The

service recently introduced digital care notes, which helped staff and managers update plans more promptly and improved oversight.

This area for improvement has been met.

Previous area for improvement 3

All medication should be given to a client as detailed in the personal plan and recorded in an accurate and accountable manner.

This is to ensure care and support is consistent with Health and Social Care Standard 1.19: My care and support meets my needs and is right for me.

This area for improvement was made on 28 April 2025.

Action taken since then

Staff gave medication in line with people's personal plans and followed clear instructions about the level of support required. Medication records we sampled were completed accurately and showed that staff recorded information consistently. Staff understood their responsibilities for medication and were able to explain what action they would take if a dose was missed, refused or if concerns arose. Management oversight, including medication audits and competency checks, were in place and helped ensure medication practice remained safe and accountable.

This area for improvement has been met.

Previous area for improvement 4

There should be a bowel management care plan in place if a person is prone to constipation requiring the use of a laxative.

This is to ensure care and support is consistent with Health and Social Care Standard 1.15: My personal plan (sometimes referred to as a care plan) is right for me because it sets out how my needs will be met, as well as my wishes and choices.

This area for improvement was made on 28 April 2025.

Action taken since then

Where people had bowel-related health needs, personal plans were detailed, clearly identified risks and included appropriate guidance for staff. We identified one person who may benefit from the use of a bowel monitoring chart. The service responded promptly to this feedback.

The service also demonstrated a commitment to improving staff knowledge in this area and had personal plan templates available to support people who may require additional monitoring of bowel health

This area for improvement has been met.

Previous area for improvement 5

An agreed package of support should be fulfilled by the service and staff. If the agreed package of support does not meet the needs of the client, staff should advise the management team.

This is to ensure care and support is consistent with Health and Social Care Standard 1.19: My care and support meets my needs and is right for me.

This area for improvement was made on 28 April 2025.

Action taken since then

People we visited received the level and type of care set out in their personal plans. Staff understood the agreed support for each person and explained how they would report concerns if the current package no longer met a person's needs. When changes were needed, staff informed the management team so that the persons support could be reviewed.

The service used an electronic system to record the length of each visit. The system alerted senior staff when visits were longer or shorter than expected. Senior staff used this information to request increases or reductions in support from the local authority where required, and we saw evidence of these requests. The service also shared weekly reports with the local authority showing planned support hours compared with hours delivered. This supported clear oversight and transparency.

This area for improvement has been met.

Previous area for improvement 6

Each person receiving care and support should have a personal plan that fully and accurately reflects their care and support needs.

This is to ensure care and support is consistent with Health and Social Care Standard 1.15: My personal plan (sometimes referred to as a care plan) is right for me because it sets out how my needs will be met, as well as my wishes and choices.

This area for improvement was made on 28 April 2025.

Action taken since then

People receiving care had personal plans that reflected their individual support needs. The personal plans we sampled set out how staff should support people and included relevant risks and preferences. Staff understood the personal plans and explained how they used them to guide care and respond to changes in need. Where updates were required, the service made these promptly.

This area for improvement has been met.

Previous area for improvement 7

The service should ensure that complaints received are dealt with in line with the providers complaints policy and procedure.

This is to ensure care and support is consistent with Health and Social Care Standard 4.19: I benefit from a culture of continuous improvement, with the organisation having robust and transparent quality assurance processes.

This area for improvement was made on 28 April 2025.

Action taken since then

The complaints we sampled were handled in line with the service's complaints policy. In these examples the service investigated concerns, responded appropriately and identified actions to improve practice.

This area for improvement has been met.

Complaints

Please see Care Inspectorate website (www.careinspectorate.com) for details of complaints about the service which have been upheld.

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 leadership?	5 - Very Good
2.2 Quality assurance and improvement is led well	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
How well is our care and support planned?	5 - Very Good
5.1 Assessment and personal planning reflects people's outcomes and wishes	5 - Very Good

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Care Inspectorate
Compass House
11 Riverside Drive
Dundee
DD1 4NY

enquiries@careinspectorate.com

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