

Katvic Healthcare Housing Support Service

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Unannounced

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Service provided by:
Katvic Limited

Service provider number:
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About the service

Katvic Healthcare is registered to provide a combined housing support and care at home service to adults and older people living in their own homes in Glasgow, East Renfrewshire, Renfrewshire, North and South Lanarkshire. The provider is Katvic Limited.

The service can support adults and older people with physical disabilities, learning disabilities, and mental health issues. The nature of the care delivered depends on the person's assessed needs and can include support with medication, personal care, nutrition, and support needed to promote people's independence at home.

Over the last year, Katvic Healthcare had supported four people through reablement, which are temporary support arrangements to promote people's health and wellbeing over an agreed timeframe. At the time of this inspection, one person was receiving care and support from the service.

About the inspection

This was an unannounced inspection which took place between 11 and 13 February 2026. One inspector carried out the inspection. To prepare for the inspection we reviewed information about this service. This included previous inspection findings, registration and complaints information, information submitted by the service and intelligence gathered throughout the inspection year.

To inform our evaluation we:

- spoke with people using the service and their relatives.
- spoke with seven members of staff and management.
- observed practice and daily life.
- reviewed documents.

Key messages

- We received positive feedback from people and relatives about their service.
- People received consistent care and support from a stable workforce.
- Staff had appropriate training and support to develop their practice.
- Management were pro-active and communicated well with people, relatives, and staff.
- Care plans were detailed and person-centred, promoting good practice.
- We shared good practice examples to further develop the service's quality assurance systems and improvement planning.

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 well is our care and support planned?	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

We evaluated this key question as good because there were several major strengths, which taken together, clearly outweighed areas for improvement.

Katvic Healthcare provided a reliable and person-centred service that improved people's health and wellbeing. This was confirmed in positive feedback that we received from people experiencing care and their relatives. A person told us "The quality of care is excellent. The carers provide care with dignity, respect, and kindness".

People were supported by a consistent team of permanent carers. A review of rotas evidenced that people were visited by the same workers at agreed times that were convenient to them. This ensured that staff knew people's needs and wishes thoroughly, and had developed genuine rapport and trust. A family member confirmed "the team is extremely reliable and dependable. This consistency has made a real difference to our family, as we benefit from seeing familiar faces who understand our routines and preferences".

The service supported people to experience positive outcomes and achievements. People were supported to live at home, maintain their independence and skills, strengthen their mobility, and promote healthy nutrition. This was achieved by having a skilled and consistent team who worked in a person-centred way with people and their families. A person told us "What stands out is the special bond the carers have built with my [loved one]. They take the time to prepare nutritious meals and drinks that suit our needs and preferences".

These positive experiences and achievements were underpinned by a stable workforce, robust training programme for staff, and a pro-active management team that completed quality assurance. Regular monitoring of key areas - such as accidents, incidents, medication, and care planning - ensured the service was performing well and people received a high standard of care.

There was a comprehensive selection of policies and procedures, covering important areas such as medication, adult support and protection, and care planning, which promoted good practice. This ensured people were supported safely.

However, we noted that some policies had not been reviewed and updated for some time. The medication policy was lengthy and not fully user friendly. We asked the service to review and update their policies more frequently, which will ensure that practice reflects the most current guidance (See Area for Improvement 1). This will further promote people's health and wellbeing.

We heard from people and relatives that the service had made a positive impact on their physical health and emotional wellbeing. However, management did not routinely ask for and record feedback from people. Similarly, the service had successfully cared for people through reablement, a temporary care arrangement to promote their health over an agreed period of time. Feedback from people about their experiences was not captured. We asked the service to introduce more formal methods to obtain feedback from people and relatives. This will help highlight what the service is doing well, identify any areas that could be better, and generally make the service more inclusive.

Areas for improvement

1. To promote people's health and wellbeing, the provider should review and update its policies and procedures more frequently, ensuring they are meaningful and user friendly.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which states that: 'I benefit from a culture of continuous improvement, with the organisation having robust and transparent quality assurance processes' (HSCS 4.19).

How well is our care and support planned?

4 - Good

We evaluated this key question as good because there were several major strengths, which taken together, clearly outweighed areas for improvement.

People supported by the service had a personal plan, commonly referred to as a care plan. Plans highlighted people's health and social needs well. We could see that staff had a clear description of care tasks to be completed on each shift, which promoted a level of consistency for people. We could track that people's needs were being met fully.

We were pleased to see that the service had made plans more person-centred. Readers could now gain real insight into people's life histories, likes and dislikes, and what was important to them. There was specific detail about how to support people in a way that was meaningful to them. For example, highlighting specifically how people wanted to complete their personal care, prepare their meals and drinks, and unique communication styles. This promoted good understanding of people's needs and consistent practice.

Plans highlighted potential risks of harm in people's lives and considered ways to reduce them to promote their safety. Plans were also reviewed to ensure they were accurate, giving staff relevant information to support people well.

We asked the service to improve their review process by having more wide-ranging questions and recording feedback from people and relatives during review meetings. This will make the review process more robust and inclusive.

We shared ways to make plans more outcome focused. People would benefit from recording their goals, and what they want to achieve from their support, when initially developing their plan. Progress in meeting these goals, or outcomes, should then be assessed during review meetings. An outcome focused approach will better evidence existing good practice, and make support more purposeful for all. This is important for every person and is particularly useful when the service is supporting people through reablement, which is a short-term outcome focused arrangement.

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 people's health and wellbeing, the service should ensure that care plans are person-centred and outcome-focused. Plans should contain detailed information about people's wishes and needs, and what they would like to achieve from their support. Where possible, people and their representatives should be involved in care planning to reflect their views. Plans should refer to appropriate legislation and guidance where appropriate.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which states that: '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' (HSCS 1.15).

This area for improvement was made on 14 October 2024.

Action taken since then

The service had improved personal planning by making them more person-centred. There was evidence that people and their relatives were involved in the development of their plans.

However, further work was needed to make plans more outcome focused. Review meetings, and the minutes produced, should be more comprehensive and record feedback from people and families.

Therefore, this area for improvement was not fully met, and will be repeated.

Previous area for improvement 2

To promote people's health and wellbeing, the service should continue to develop its quality assurance and monitoring systems. This should include holding regular governance meetings which review issues such as accidents and incidents, medication, punctuality of visits, and other important areas. Meetings should have written minutes and produce action plans.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which states that: 'I benefit from a culture of continuous improvement, with the organisation having robust and transparent quality assurance processes' (HSCS 4.19).

This area for improvement was made on 14 October 2024.

Action taken since then

The service had quality assurance systems in place which allowed it to monitor key areas of the service. However, the service had not implemented governance meetings or reports which evidenced how quality assurance data was being analysed and used.

Therefore, this area for improvement was not fully met, and will be repeated.

Previous area for improvement 3

To promote people's health and wellbeing, the service should ensure that staff have regular support and supervision meetings. These meetings should review staff performance, reflect on practice, and promote training, development and wellbeing.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which states 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 area for improvement was made on 14 October 2024.

Action taken since then

Whilst staff told us they felt supported by the service, there was limited evidence of regular, quality supervision meetings. The service needed to improve its recording of staff supervision meetings.

Therefore, this area for improvement was not fully met, and will be repeated.

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 well is our care and support planned?	4 - Good
5.2 Carers, friends and family members are encouraged to be involved	4 - Good

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