

HK-Care Consulting Limited Support Service

H K Care Consulting Ltd
64 Stirling Street
Airdrie
ML6 0AS

Telephone: +44 7507905778

Type of inspection:
Unannounced

Completed on:
5 March 2026

Service provided by:
HK-Care Consulting Limited

Service provider number:
SP2019013307

Service no:
CS2019374899

About the service

HK-Care Consulting Limited (Scotland) registered with the Care Inspectorate on 8 June 2020.

The service provides care at home to adults and older people, living in their own homes and in the wider community.

The service were currently supporting approximately 150 people across North and South Lanarkshire, but mainly in the North.

About the inspection

This was an unannounced inspection which took place on 3 - 5 March 26 between 09:30 and 17:00. The inspection was carried out by two inspectors from the Care Inspectorate. This inspection was to follow up on the four requirements and two areas for improvement made at the previous inspection on 30 October 2025.

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:

- obtained feedback from 15 people using the service and/or their family. This was via telephone calls
- obtained feedback from 15 staff and management
- reviewed documents
- obtained feedback from one health and social care professional.

Key messages

- The provider and senior team had been working towards meeting the four requirements, however, more time was needed to complete these. We have extended the timescales to 19 June 2026.
- The provider had increased their presence at the service and made positive changes to the senior team to support improvement.
- People they supported and/or their families were overall happy with the care and support. However, some had aspects they felt could be improved. Everyone spoke positively about the kind and caring staff team.
- Training opportunities had improved for staff, but time was needed for this to be embedded into practise and for competency checks to be carried out.
- Work was currently underway to bring personal plans, relevant risk assessments and six monthly reviews up to date.
- Scheduling arrangements had improved to ensure that staff had reasonable notice of their shifts to support their wellbeing.

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

Requirements

Requirement 1

By 28 February 2026, the provider must ensure that people can be confident that standards of good practice are adhered to and drives change and improvement where necessary. To do this the provider must, as a minimum, ensure that:

- a) Governance and oversight systems are in place which identify risks and contain correct and up to date information.
- b) Staff and management have the skills, capacity and systems in place to identify risks, plan appropriate actions to address these and drive improvement

This is to comply with Regulation 4(1)(a) and (b) (Welfare of users) of the Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/210).

This is to ensure that 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).

This requirement had not been met and we have agreed an extension until 19 June 2026.

This requirement was made on 30 October 2025.

Action taken on previous requirement

The provider had increased their presence at the service and made positive changes to the senior team to support improvement. This had included the introduction of some new senior team members, who were in the process of being inducted and trained into their new roles.

Governance and oversight systems had started to be re-introduced, however, more time was needed for these to be fully developed and in place.

Whilst there was evidence of changes that had been made that were leading to improvements, the provider needed more time to fully meet and embed this requirement.

Not met

Requirement 2

By 28 February 2026, the provider must ensure people are kept safe by ensuring that all accidents and incidents are properly managed. To do this the provider must, as a minimum, ensure that:

- a) A system is implemented to ensure that all unplanned events are recorded, investigated, analysed for trends and notified to other bodies, where they are legally obliged to do so.
- b) They adhere to the Care Inspectorate notification guidance for reportable events.

This is to comply with Regulation 4(1)(a) and (b) (Welfare of users) of the Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/210).

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that: 'My care and support is provided in a planned and safe way, including if there is an emergency or unexpected event.' (HSCS 4.14).

This requirement had not been met and we have agreed an extension until 19 June 2026.

This requirement was made on 30 October 2025.

Action taken on previous requirement

The provider had carried out some development sessions with staff around accident and incident reporting. The service were using both an electronic system to initially record these, along with a paper system for investigation and sign off by management. We sampled these and found inconsistencies in the quality of both the initial reporting and the management follow up.

Regular analysis for trends and lessons learned has not yet started. We were not assured that the notification guidance was embedded and understood at all levels.

Whilst there was evidence of changes that had been made that were leading to improvements, the provider needed more time to fully meet and embed this requirement.

Not met

Requirement 3

By 28 February 2026, to promote the safety and welfare of people, the provider must ensure that staff receive essential training and development opportunities to enable them to be competent in their roles. To do this the provider must, as a minimum:

- a) Undertake a training needs analysis to identify what training is required for each role. This should include but is not limited to training to enhance communication needs, food hygiene and preparation and moving and handling.
- b) Maintain an accurate record of all staff training, including refresher training.
- c) Monitor and evaluate the effectiveness of training and development opportunities and ongoing competency of staff.

This is 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: 'I have confidence in people because they are trained, competent and skilled, are able to reflect on their practice and follow their practice and follow their professional and organisational codes' (HSCS 3.14)

This requirement had not been met and we have agreed an extension until 19 June 2026.

This requirement was made on 30 October 2025.

Action taken on previous requirement

The provider had improved training opportunities for staff. They had sourced an external training company who had been carrying out regular training sessions. All staff had now completed training on manual handling and medication management. They were now focusing on other topics, including infection prevention and control, dementia awareness and nutrition. Elearning refresher training had also taken place for staff.

Time was now needed for training to be embedded into practice and for competency checks to be carried out.

Whilst there was evidence of changes that had been made that were leading to improvements, the provider needed more time to fully meet and embed this requirement.

Not met

Requirement 4

By 28 February 2026, the provider must ensure each service user has a personal plan in place which sets out how the service user's health, welfare and safety needs are to be met. To do this the provider must, at a minimum, ensure that:

- a) Staff have the knowledge and skills to use their electronic system.
- b) Make the personal plan available to the service user and/or any representative.
- c) Carry out a review at least once in every six month period or when there is a significant change in a service user's health, welfare or safety needs.

This is to comply with Regulation 5(1) and (2) (Personal Plans) of the Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/210).

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state 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 requirement had not been met and we have agreed an extension until 19 June 2026.

This requirement was made on 30 October 2025.

Action taken on previous requirement

Work was currently underway to bring personal plans, relevant risk assessments and six monthly reviews up to date. Given the number of people they support, this was a significant piece of work. Time was needed to meet people they supported and/or their families to ensure that they reflect their current care and support needs and to carry out meaningful reviews.

Whilst there was evidence of changes that had been made that were leading to improvements, the provider needed more time to fully meet and embed this requirement.

Not met

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 staff have regular opportunity to reflect on their skills, knowledge and learning, the provider should provide effective and regular supervision that enables workers to develop and improve practice through reflection and feedback.

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 practice and follow their professional and organisational codes.' (HSCS 3.14).

This area for improvement was made on 30 October 2025.

Action taken since then

Staff we spoke with told us that there was now better communication with senior staff and that they felt well supported. The provider spoke through their plans to re-introduce regular supervision for staff. Whilst this has started for some staff, more time was needed to bring this fully up to date for all staff.

This area for improvement has not been met.

Previous area for improvement 2

To ensure that people are supported by staff that are well rested, the provider should review the current scheduling arrangements to ensure that staff have reasonable notice of their shifts to support their wellbeing.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that: 'My care and support is consistent and stable because people work together well' (HSCS 3.19) and is consistent with the Scottish Social Services Council (SSSC) Codes of Practice (Revised 1 May 2024) which state that employers: 'Have policies and procedures in place that promote the health, safety, wellbeing and equality of workers and respect inclusion and diversity.' (Code 4.11).

This area for improvement was made on 30 October 2025.

Action taken since then

Scheduling arrangements had improved to ensure that staff had reasonable notice of their shifts to support their wellbeing. Staff we spoke with all described the improvements and the benefits this made to their wellbeing and work-life balance.

This area for improvement was met.

Complaints

There have been no complaints upheld since the last inspection. Details of any older upheld complaints are published at www.careinspectorate.com.

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Care Inspectorate
Compass House
11 Riverside Drive
Dundee
DD1 4NY

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