

# 1st Homecare Irvine Housing Support Service

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**Type of inspection:**  
Unannounced

**Completed on:**  
6 March 2026

**Service provided by:**  
1st Homecare Ltd

**Service provider number:**  
SP2005007703

**Service no:**  
CS2015340104

## About the service

The service is based in Irvine and is registered to provide a support service to adults and older people with assessed needs, including those with complex social or health needs in their own homes and the wider community.

The service provides support for people in both North Ayrshire and East Ayrshire. The service currently provides care staff to adults in the community, supported by coordinators and service manager who operate from their offices based in Irvine.

## About the inspection

This was an unannounced inspection which took place on 4, 5 and 6 March 2026. 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.

In making our evaluations of the service we:

- Spoke with five people using the service and three of their relatives
- Spoke with nine staff and management
- Observed practice and daily life
- Reviewed documents and 19 returned questionnaires

## Key messages

- Stability of management and leadership of the service, supporting positive ethos and culture.
- Continuity and consistency of the care staff ensures high quality of care and support provided.
- Feedback from people who use the service and their relatives was very positive and appreciative, particularly towards the standard of care staff.
- Good communication between front line and office based staff, including management supporting good team dynamics and spirit.
- Care and support plans including health and risk assessments were completed with very good detail and person focused.

## 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
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 found significant strengths in aspects of the care provided and how these supported positive outcomes for children/people, therefore we evaluated this key question as very good.

The service consistently supported people in the community to experience positive outcomes in relation to their health and wellbeing. People receiving care and support consistently offered very positive feedback about the standard of the care staff. Their relatives also described high levels of satisfaction, commenting on staff kindness, professionalism and reliability. During home visits, people explained that staff were warm, friendly and respectful, which helped them feel comfortable and at ease during personal care and daily routines.

We saw that the care plans had been detailed, personalised and clearly written, which meant staff were able to follow support instructions confidently and safely. The plans included strong person centred histories and lifestyle information, giving staff meaningful insight into what mattered to each individual. This contributed to people experiencing care that felt familiar, sensitive and aligned with their preferences.

Health assessments and associated risk assessments had been completed to a good standard. These documents were reviewed regularly, and people told us they felt involved in these discussions. This involvement and participation helped ensure that changes in need were recognised early, and support remained appropriate. People and families described feeling listened to and respected, and stated they had confidence that the service management acted upon any updates they shared.

Communication with external professionals was effective. Staff and managers had maintained positive working relationships with social workers, district nurses and GPs, which helped ensure cohesive multi disciplinary care in the community. This contributed to people experiencing stable health outcomes and reduced stress for families.

The service demonstrated strong performance in reviewing care plans and gathering feedback. Questionnaires, phone surveys and courtesy calls had been used proactively, and responses indicated high levels of satisfaction with the quality of care.

Management oversight of care documentation was robust, with regular audits and updates in place. This strong governance meant the service had been able to recognise changes in health needs promptly and allocate staff with the appropriate skills and knowledge.

Continuity of care was a significant strength of the service. People consistently told us they saw familiar staff who understood their routines and preferences. This consistency contributed to emotional security, reduced anxiety, and improved overall wellbeing, particularly for people with high level needs or long term conditions, requiring high levels of care.

Families told us this continuity supported trust and reassurance during challenging periods and made them feel comfortable that experienced and knowledgeable staff were providing a consistently high standard of care to their loved ones.

**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 children/people, therefore we evaluated this key question as very good.

The continuity of the staffing arrangements contributed to positive outcomes for people. The staff team have been consistent, reliable and committed. People being supported in the community benefitted from strong and trusting relationships with the care staff who supported them. People repeatedly told us that staff were friendly, respectful, punctual and reliable which helped them feel safe and valued.

Recruitment followed safer recruitment procedures, and staff files demonstrated clear evidence of appropriate checks, including references, PVG membership and SSSC registration oversight. Managers used tracking spreadsheets to monitor compliance, ensuring that registration conditions and renewal dates were met. This level of governance promoted confidence that staff were suitable and safe to deliver care to vulnerable people in the community.

Induction, supervision and training processes had been well organised and effectively monitored. Staff confirmed they received regular supervision and spot checks, and training compliance records showed strong levels of attendance and completion.

The service induction procedures were supportive and this prepared staff to confidently work with people in the community. This ensured that people received care from staff who were knowledgeable, competent and well supported in their roles.

Staff spoke positively of the support they received from the manager and office-based team. They explained that communication was open, approachable and solution focused, which helped them feel valued and motivated.

Management recognised staff contributions through regular positive feedback and small gestures of appreciation. This helped build a culture of respect and cohesion within the team.

People receiving care repeatedly highlighted the high quality of the staff. Relatives and friends also valued the continuity and reliability of the care staff and said these qualities helped build meaningful relationships and increased trust. This stability in staffing meant people experienced calm, consistent and predictable routines, which had a positive impact on their wellbeing and sense of security.

The service had maintained good communication practices, including team meetings and daily office contact. Staff felt confident that any concerns or changes in needs were taken seriously and acted upon quickly. This further strengthened the quality of care experienced by people receiving the service.

## How well is our care and support planned?

5 - Very Good

We found significant strengths in aspects of the care provided and how these supported positive outcomes for children/people, therefore we evaluated this key question as very good.

Assessment and care planning practices supported people to achieve very good outcomes. Care plans sampled during the inspection contained very good detail about individual needs, routines, strengths and preferences. They were written in a clear and accessible format, which meant staff could easily understand and implement the required support. The plans also included person centred details which again helped staff to get to know the person and their past histories, likes and dislikes which fostered meaningful engagement during interactions.

The service demonstrated strong performance in maintaining up to date assessments. Care plans were reviewed at required, and the manager used a service user compliance spreadsheet to track review dates, plan updates, signing, and courtesy call outcomes. This ensured assessments remained current and reflected each person's changing needs or circumstances.

People and their families were involved in the assessment and planning of care. Families described feeling included, informed and respected during reviews, and they appreciated that their views influenced changes to care. This involvement improved confidence in the service and helped ensure that care remained tailored and effective.

Documentation sampled was consistently well completed and demonstrated staff attentiveness. Progress notes were thorough and clearly written, reflecting staff understanding of people's needs and their ability to communicate effectively with colleagues.

Internal auditing processes were in place and working well. The service used a variety of core assurance audits to monitor performance and standards. Which then were translated into action plans for continual improvement. These systems provided clear oversight and helped ensure that care planning practices remained safe, compliant and person centred.

The allocation of staff based on skills and compatibility was another strength of the service provided. Management demonstrated very good understanding of the needs of the client group, which supported effective decision making around matching staff to people's needs and preferences. This contributed to more personalised and consistent care experiences.

Overall, the service demonstrated high levels of organisational oversight and involvement in assessment and care planning. These practices ensured that people received care that was coordinated, personalised and reflective of their needs and wishes.

## 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

The provider should ensure that the processes for assessing and evaluating staffing take an encompassing view. This should include but is not limited to, quality assurance data, feedback from people and staff and ongoing assessment of peoples needs.

This is to ensure that care and support is consistent with the Health and Social Care standards (HSCS) which states 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 area for improvement was made on 6 August 2024.**

#### Action taken since then

We reviewed the services quality assurance procedures and found them to be well embedded and working well within the service. The management had a very good oversight and understanding of the needs of the people being supported and this helped them to manage the staff support being provided to people in the community.

The service supported and encouraged various methods of feedback and engagement with people being supported and the staff to ensure that everyone was involved in the evaluation of the quality of the care and support being provided.

This area of improvement has therefore been met.

#### Previous area for improvement 2

To support an effective review process the provider should review peoples outcomes to ensure they are relevant and specific. The reviews should take place in person where possible to facilitate good communication and understanding.

This is to ensure that care and support is consistent with the health and Social Care Standards which states that: 'I am fully involved in developing and reviewing my personal plan, which is always available to me' (HSCS 2.17)

**This area for improvement was made on 6 August 2024.**

#### Action taken since then

We reviewed and sampled several care and support plans and saw that reviews were taking place as required and people being supported and their relatives were fully involved and participated in the process of contributing to the development and input of the care and support plans. This made people feel valued and their views and opinions mattered.

This area of improvement has been met.

## 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 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
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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