

Double Crown Healthcare Ltd (Home Care at Home) Support Service

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Type of inspection:
Unannounced

Completed on:
11 March 2026

Service provided by:
Double Crown Healthcare Ltd

Service provider number:
SP2023000114

Service no:
CS2023000179

About the service

Double Crown Healthcare Ltd is registered to provide both housing support and care at home to adults living in Renfrewshire and North Ayrshire. The service operates from an office base in Beith. Staff support adults with a range of needs, including people living with dementia, adults with physical disabilities, adults with learning disabilities, and adults with palliative care needs living in their own home.

The service was supporting 28 people at the time of inspection.

About the inspection

This was an unannounced inspection which took place on 9, 10 and 11 March 2026 between the hours of 10:00 and 18:00. The inspection was carried out by two inspectors 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 six people using the service and six of their family.
- Spoke with 12 staff and management.
- Observed practice and daily life.
- Reviewed documents.
- Spoke with visiting professionals.

Key messages

People experienced respectful, responsive care from staff who knew them well and understood their health needs.

Leaders were accessible and responsive, but improvements to quality assurance audits were required to drive service improvement.

Staffing levels and schedules were appropriate and people experienced good continuity of care.

Staff were knowledgeable and flexible to benefit people.

Personal plans generally reflected people's needs, preferences and outcomes. Some improvements were required to ensure consistency.

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 good is our leadership?	4 - Good
How good is our staff team?	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. We found important strengths in how the service supported people's health and wellbeing. Some improvements are required to maximise wellbeing and ensure that people consistently have positive experiences.

Staff knew people well and had the skills to identify changes in health and escalate these appropriately. Family members told us that they felt confident that their loved ones' health needs were well managed. We observed staff members interacting confidently with people and they were able to describe people's health needs. Staff could tell us what action they would take, if they identified changes that might indicate a deterioration in a person's health. This helped to ensure that people had access to the right healthcare at the right time.

Appropriate health assessments were in place to guide staff practice. Where the service had a particular role in relation to health, this was recorded clearly in people's personal plans. We saw examples of people being supported with aspects of bowel management, food and fluid intake, and altered texture diets. Information about this was clearly recorded in people's personal plans and aligned with current best practice guidance. Where monitoring charts are being used, it is important that there is regular quality assurance and oversight by leaders. We asked the provider to improve quality assurance processes, to ensure these charts were being used effectively by staff to monitor people's health needs. Medication processes were managed well and all staff had completed medication training and had in-person competency assessments. This assured us that medication practice was safe.

People were involved in making decisions about their health and wellbeing and had the right support to access healthcare when required. People told us they felt safe with the staff and that they were encouraged to make choices about their care and support. Family members told us that staff members helped their loved ones to remain active and healthy. One family member said 'they get [my loved one] doing her exercises and make it fun'. A person using the service told us 'I hate cooking but the staff help me and it makes it more enjoyable'. This assured us that people were encouraged to keep well and participate in healthy activities, to help maintain their wellbeing. We saw that people had been supported to attend medical appointments and that appropriate information about this had been recorded and shared with family members or professionals, where required.

How good is our leadership?

4 - Good

We evaluated this key question as good. We found a number of important strengths in leadership that contributed to positive outcomes for people. We asked the service to make some improvements to ensure quality assurance processes are effective.

Leaders continually evaluated people's needs, to ensure they had the right care and support in place. We received very positive feedback from people about the responsiveness and flexibility of the service. The manager of the service had a clear knowledge and understanding of people's needs and was described by people, family members and staff as accessible and effective. This helped to ensure staff could access good quality information about people's care and support needs. We encouraged the provider to continue to work on developing of staff roles in the leadership team. This is to ensure that responsibilities are shared and there are clear lines of accountability as the service grows. The service regularly asked for informal feedback from people, and people told us that they understood the standards they should expect from the service.

We encouraged the provider to develop a more formal and systematic approach to obtaining feedback from people and families. This can help the provider to understand where improvements are required which contributes to service development.

Quality assurance systems were being developed by the service to help drive continuous improvement. Accidents and incidents were carefully recorded and followed up by the manager, and a range of trackers were in place to monitor aspects of the service. This included staff training, staff supervision and a daily call log which enabled the service to track responses to queries or complaints. We encouraged the provider to develop a 'lessons learned' approach when analysing accidents, incidents, or complaints. This can help to identify areas for improvement or particular themes, such as staff training needs, or repeat incidents that may require input from external professionals. We gave advice about reporting of notifiable accidents and incidents and asked the provider to ensure that current Care Inspectorate guidance is followed. This is important to provide ongoing assurance that the service is responding effectively when incidents arise.

The service was gathering a range of information and responding timeously to issues as they arose. More robust quality assurance systems were required to audit key areas of the service. This will support the provider to understand how well the service is performing (See Area for Improvement 1). A service improvement plan (SIP) was being developed for the service. We asked the provider to ensure that the SIP is informed by feedback from people and families, staff, and data from quality assurance audits. This can help the provider to identify what is working well, where improvement is needed and what the priorities for development should be.

Areas for improvement

1. To drive continuous improvement in the service, the provider should develop a robust quality assurance schedule which clearly outlines key roles and responsibilities. The schedule should include, but not be limited to, regular audits of medication practice, health monitoring, personal planning, daily recording, accidents, incidents, and complaints. Audits should include clear action plans, based on SMART principles (Specific, Measurable, Achievable, Relevant, Time-bound), to ensure appropriate action is taken and recorded where improvements are required.

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).

How good is our staff team?

4 - Good

We evaluated this key question as good. We found important strengths in staffing arrangements that contributed to positive outcomes and experiences for people.

The service assessed people's needs to ensure people had the right level of support. Schedules were in place so people knew when to expect their visits. Leaders were developing their use of an electronic scheduling system to support ongoing consistency and continuity of staffing. The service had a focus on matching staff skills to people's support needs and aimed to ensure support was provided by a small and consistent group of staff. This is important as consistency can help staff to identify changes in health or wellbeing. People told us they were generally happy with their visit times and that, if visit times did change, the service communicated this in advance.

The service aimed to offer flexibility around visits, to ensure that people were able to make changes to their routine. We encouraged the service to ensure there was a good balance between offering flexibility and delivering a consistent service to all people. This is important as frequent rota changes can have an impact on staff wellbeing and can increase the risk of missed visits.

Staff were flexible and worked well together to support the service. We observed staff interacting compassionately with people. Staff spoke respectfully about people and their colleagues when telling us about their work. The staff we spoke to recognised people's skills and abilities, and their right to live fulfilling lives. This assured us that they had the right skills and values to support people well. Staff members told us they had a range of opportunities to share their views about the service with leaders, including regular team meetings, supervision and competency assessments. This assured us that the service was seeking to learn from the experiences of staff to improve outcomes for people.

Recruitment processes were completed safely. The service had a comprehensive recruitment policy which aligned with current best practice guidance. We asked the provider to ensure that references are obtained from the two most recent employers. When this is not possible, a clear rationale and risk assessment should be recorded. This is to ensure people are protected from potential harm. New staff completed a thorough induction with a mix of face to face and online training, supplemented by 'shadowing' opportunities and competency assessments. This assured us that new staff had the right support in place to develop their skills and practice.

How well is our care and support planned?

4 - Good

We evaluated this key question as good. A number of important strengths in personal planning contributed to positive outcomes for people.

Personal plans were used effectively by the service to deliver good quality care and support. All people had a personal plan and they were of a generally good standard. We saw some very good examples of person-centred information in personal plans, which was used to guide staff to provide safe and effective support. This included clear protocols for 'as required' medication, detailed and enabling risk assessments, and protocols for managing instances of stress and distress. This assured us that the service was assessing people's needs effectively, to ensure staff could support people well.

The standard of personal plans was not consistent for all people. While we recognise that the level of detail will vary, depending on people's needs, we encouraged the provider to use their quality assurance and review processes to embed good practice across the service. For example, we found some inconsistencies in how information was recorded in 'daily task' lists and 'care plans'. It is important that staff have access to clear and consistent information to help drive consistency and keep people safe. Daily notes generally contained relevant information but we asked the provider to consider using a more evaluative approach to reflect the impact of the care provided. This can help staff to understand the impact of their approach and what works well for people.

Personal plans had been regularly reviewed as people's outcomes changed. The service used an electronic tracker to ensure reviews took place on time. People and family members told us they had been involved in reviews and we could see that personal plans had been updated, when new information was provided to the service. This assured us that personal plans were up to date and relevant to people's current support needs. The required legal paperwork was not in place in all personal plans we sampled.

We shared this with the manager who had a good understanding of consent and capacity, and the legal authority required for decision making. The service agreed to improve recording of proxy decision making powers and obtain the relevant documentation.

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 good is our leadership?	4 - Good
2.2 Quality assurance and improvement is led well	4 - Good
How good is our staff team?	4 - Good
3.3 Staffing arrangements are right and staff work well together	4 - Good
How well is our care and support planned?	4 - Good
5.1 Assessment and personal planning reflects people's outcomes and wishes	4 - Good

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