

# First Choice Healthcare Services Support Service

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**Type of inspection:**  
Announced (short notice)

**Completed on:**  
19 June 2024

**Service provided by:**  
First Choice Healthcare Services Ltd

**Service provider number:**  
SP2023000416

**Service no:**  
CS2023000436

## About the service

First Choice Healthcare Service Ltd, provides support to adults and older people in their home and in the community, throughout Falkirk, Stirlingshire and Clackmannanshire.

The service registered with the Care Inspectorate on 22 December 2023.

The organisation's mission statement:

"seeks to provided care to a wide variety of people aiming to enhance the quality of life of clients, to satisfy and promote the expectations of the clients to ensure the quality of personal care and support which clients receive whilst working in partnership with clients to meet their individual needs."

At time of inspection the service was supporting eight people.

## About the inspection

This was an announced short notice inspection which took place on 11 June 2024, 14:00 to 17:00, 12 June 2024, 11:00 until 18:30 and 13 June 2024, 11:00 until 17:00. 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 four people using the service and three of their families
- spoke with staff and management
- observed practice and daily life
- reviewed documents.

## Key messages

- Good evidence of effective partnership working
- Improvement was needed in the recording of support documents, fluid monitoring
- Improvement was needed in recording of medication
- Improvement was needed for quality assurance process
- People could be assured that they had a care plan in place.

## 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?	3 - Adequate
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 made an evaluation of good for this key question, as several important strengths, taken together, clearly outweighed areas for improvement. The strengths identified had a positive impact on people.

### Quality Indicator: 1.3 People's health and wellbeing benefits from their care and support.

During our inspection we saw caring and respectful relationships between people and staff. Person told us "the staff are lovely", where a relative told us "the staff all appear nice, respectful and friendly."

People were supported and cared for by consistent staff, which resulted in meaningful relationships being established. One person told us "I like it's the same faces" and a relative told us "I like it's the same carers coming in to support mum, it makes me feel assured." Everyone who received the service and their relatives told us that communication from carers is good. Staff knew what was expected of them to meet people's care needs and people felt staff were well trained and knowledgeable. Staff had good links with local health and social care professionals and liaised with them promptly when any concerns were identified.

Where possible people were involved in making decisions about their care and support when that affected them. Support plans were in place for each person to guide staff, reviews were planned and accurately reflected the care and support that each person should have. However, improvements were needed for people who required their fluid intake recorded and appropriate targets are recorded to determine if enough fluid had been taken. (See Area for Improvement 1).

We saw systems in place to manage people's medication, however improvement was needed in the recording of medication being administered. (See Area for Improvement 2).

### Areas for improvement

1. The service should ensure that should someone require to have their fluid intake monitored and recorded that appropriate targets are set, and reasons recorded as to why the chart is in place and ensure this is recorded also within the electronic recording system.

This is to ensure that care and support is consistent with health and social care standards which states that: "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."

2. To support people to keep well and safe, the provider should ensure that all medication being administered, is recorded following best practice.

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

"Any treatment or intervention that I experience is safe and effective." (HSCS 1.24)

**How good is our leadership?****3 - Adequate**

We made an evaluation of adequate for this key question, where strengths only just outweighed weaknesses.

**Quality Indicator: 2.2 Quality assurance and improvement is led well**

The manager was motivated to ensure continuous improvement in the service. Staff felt that the manager was approachable, supportive and provided guidance when required. There was some systems in place to monitor aspects of service delivery however, due to the service only being operational for four weeks at the time of inspection, there was little evidence of audits being carried out and the quality assurance process didn't capture all aspects of people's care to ensure the service was responsive and driving improvement. Therefore improvement was needed to ensure the quality assurance system covered all aspects of care. (See Area for Improvement 1).

There was a clear complaints process and people were confident on how to raise a concern. A clear process was identified for accidents and incidents with managers oversight.

Staff described receiving regular feedback, formal supervision hadn't taken place, however there was an open door policy to the manager that allowed them to access guidance and support as needed. This helped to ensure that people's needs were met well, whilst also supporting staff development. Staff told us that they felt valued, included and listened to by the manager.

The service had a service development plan, however it was still in its infancy as was the service.

**Areas for improvement**

1. To ensure the service remains responsive to people's care and support. The quality assurance process must be robust and demonstrate written evidence of a quality assurance system being used to include, medication management, falls, skin integrity and Hydration.

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, where several strengths impacted positively on outcomes for people and clearly outweighed areas for improvement.

**Quality Indicator 3.3 Staffing arrangements are right and staff work well together**

People could be assured that the service were working hard to recruit and retain new staff, to ensure the service grows and the continuity remains.

The service used a digital rota system and staff had access to this at all times. Visits were scheduled as agreed by the manager and the people using the service. Visit schedules appeared to work well.

Communication and team working was positive as the manager was working with the care staff due to the infancy of the service, which meant staff worked well together with the guidance and direction of the manager. Arrangements for assessing ongoing competency of staff were in place and regularly carried out.

## How well is our care and support planned?

4 - Good

We evaluated this key question as good, where several strengths impacted positively on outcomes for people and clearly outweighed areas for improvement.

### Quality Indicator: 5.1 Assessment and personal planning reflects people's outcomes and wishes

People could be assured that they had a care plan in place that included relevant risk assessments. There was a good level of detail within the care and support plan to guide staff around how best to care and support each person. People told us their wishes and views were being respected and they were involved in care planning. However, six monthly reviews hadn't taken place, due to infancy of the service. However the service had a plan to carry these out and we felt assured this would be taken forward.

## 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?	4 - Good
1.3 People's health and wellbeing benefits from their care and support	4 - Good
How good is our leadership?	3 - Adequate
2.2 Quality assurance and improvement is led well	3 - Adequate
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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