

Care Me Ltd Support Service

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Type of inspection:
Announced (short notice)

Completed on:
24 February 2025

Service provided by:
Care Me Ltd

Service provider number:
SP2023000108

Service no:
CS2023000165

About the service

Care Me Ltd is a privately owned care at home support service located in Edinburgh. Providing care and support to older people living in their own homes within West Lothian. At the time of inspection the service was providing care and support for one person.

The provider Care Me Ltd has been registered with the Care Inspectorate to provide this service since 6 June 2023.

About the inspection

This was an announced (short-notice) follow up inspection which took place between 5 and 24 February 2025. The inspection was carried out by an 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 3 staff and management
- Reviewed documents

Key messages

- Personal plans had been developed and implemented
- Policies and procedures had been improved to reflect the service being delivered
- Staff rotas had been developed to ensure staff had appropriate time away from work
- Staff described being happy with the support and training they had received

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?	3 - Adequate
How good is our leadership?	3 - Adequate
How good is our staff team?	3 - Adequate
How well is our care and support planned?	3 - Adequate

Further details on the particular areas inspected are provided at the end of this report.

How well do we support people's wellbeing?

3 - Adequate

We evaluated this key question as adequate, where strengths only just outweighed weaknesses

See report section titled "What the service has done to meet any requirements made at or since the last inspection" for details of how the provider met requirements.

How good is our leadership?

3 - Adequate

We evaluated this key question as adequate, where strengths only just outweighed weaknesses

See report section titled "What the service has done to meet any requirements made at or since the last inspection" for details of how the provider met requirements.

How good is our staff team?

3 - Adequate

We evaluated this key question as adequate, where strengths only just outweighed weaknesses

See report section titled "What the service has done to meet any requirements made at or since the last inspection" for details of how the provider met requirements.

How well is our care and support planned?

3 - Adequate

We evaluated this key question as adequate, where strengths only just outweighed weaknesses

See report section titled "What the service has done to meet any requirements made at or since the last inspection" for details of how the provider met requirements.

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

Requirements

Requirement 1

By 31st July 2024, the provider must ensure that people have a detailed personal plan, to ensure that people's health, welfare and safety needs are met,

To do this, the provider must, at a minimum:

- a) consult with people on developing their personal plan
- b) ensure this includes how people's needs, choices and wishes are to be met
- c) ensure this is accessible for people in language they understand
- d) ensure staff have access to the personal plan
- e) ensure information is updated when people's care needs and wishes change
- f) implement a system to regularly audit personal plans

This is to comply with Regulation 5(1) and (2)(a)(b) 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) and, "I am fully involved in developing and reviewing my personal plan, which is always available to me" (HSCS 2.17).

This requirement was made on 10 April 2024.

Action taken on previous requirement

The service had consulted with people on developing their personal plans. Detailed information on the person's background, health and wellbeing, personal preferences and wishes had been recorded in an easily accessible document. This document was held in the person's home for them to refer to, as well as staff having access to this.

Information had been updated as and when people's care needs or care packages had changed.

This can be translated into people's first language if required.

An audit process had been developed but not used at the time of inspection.

Met - outwith timescales

Requirement 2

By 31 July 2024, the provider must ensure that staff receive essential training and development opportunities to enable staff to be safe and competent in their roles. To ensure the health, welfare and safety of people using the service.

To do this the provider must as a minimum:

- a) undertake a training needs analysis to identify the training and development required for each role
- b) ensure staff complete all relevant training for their role
- c) maintain an accurate record of all staff training, including refresher training and induction
- d) ensure staff are fully inducted into their role
- e) provide shadowing opportunities for staff within their induction period
- f) implement quality assurance systems to 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 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 requirement was made on 10 April 2024.

Action taken on previous requirement

A list of required training had been developed to support staff within their roles. This training had been implemented face to face and using online resources. Post training quizzes had been used to check staff learning and personal development needs.

A spreadsheet had been developed and populated that showed that all staff had completed the relevant training for their role.

A staff induction process had been developed and used with existing staff to ensure that they were aware of their responsibilities and the structure and policies of the service. Staff had been supported and mentored one to one while supporting people in their own homes, which supported staff to develop their skills. The managers had developed processes to ensure that staff would have shadowing opportunities as part of their induction process.

Quality assurance processes had been developed and implemented to support staff to develop their skills and ensure they had the required competencies to complete their role and support people safety. This included handwashing and moving and handling competency assessments.

Met - outwith timescales

Requirement 3

By 31st July 2024, the provider must ensure that medication policies, procedures, and practices, support the health, welfare and safety of people using the service.

To do this the provider, must at a minimum:

- a) ensure the medication administration systems and supporting policy , procedure and recording documents are safe, up-to-date and accurate and follows best practice.
- b) ensure that each person has been appropriately assessed by a competent person to determine the support they require with their medication and the level of support is clearly recorded in care plans and associated risk assessments.
- c) ensure staff receive medication training and ongoing refresher training in line with their roles and responsibilities and that is a system in place to assess staff competency on a regular basis.
- d) ensure there is a competent person to follow up any concerns related to medication.

This is to comply with Regulation 4(1)(a)(b) 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 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 requirement was made on 10 April 2024.

Action taken on previous requirement

A robust medication policy and procedure and supporting documents had been developed and was ready to be implemented in supporting people with the administration of medication.

Medication training had been sourced and medication competency assessments had been developed to use as and when required.

The management consultant and registered manager of the service had the skills to ensure that any concerns related to medication were dealt with well.

Met - outwith timescales

Requirement 4

By 31st July 2024, the provider must ensure that quality assurance processes are implemented to support people's health, wellbeing and safety.

To do this, the provider must, as a minimum:

- a) develop and implement regular quality assurance audits and processes
- b) use best practice guidance and standards to inform quality assurance processes implemented
- c) analyse the results of audits to establish areas for improvement
- d) prioritise and action improvements identified
- e) ensure policies and procedures are up to date and used by staff appropriately
- e) keep records to evidence actions taken

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

This is to ensure that care and support is consistent with the Health and Social Care Standard (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 was made on 10 April 2024.

Action taken on previous requirement

A range of quality assurance processes had been developed and were being implemented by the service. A management consultant had been supporting the service and quality assuring all policies and processes within the service. A workbook had been developed that would allow for all quality assurance processes to be completed and managers would have on going oversight of the progress of the service.

Policies and procedures, including the personal plans for the service were based on the health and social care standards.

Met - outwith timescales

Requirement 5

By 31st July 2024, to ensure the health, welfare and safety of people using the service, the provider must ensure that people, their relatives, representatives and staff can feedback their experiences of the service, to enable improvement.

To do this the provider must, at a minimum:

- a) implement a process of gaining feedback from people, their relatives or representatives and staff
- b) ensure people are aware of, and can access the complaints procedure
- c) evaluate feedback and incorporate this information into an accessible improvement plan
- d) communicate with people the results of their feedback and any action taken
- e) make changes and implement improvements based on feedback

This is to comply with Regulation 4(1)(a)(b) 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 states, "I know how, and can be helped, to make a complaint or raise a concern about my care and Support" (HSCS 4.20).

This requirement was made on 10 April 2024.

Action taken on previous requirement

Surveys had been developed and implemented to allow people and their relatives to give feedback to the service about their experiences.

Information related to making a complaint had been developed and was included within the service user's handbook, which was given to people as they started to use the service. This required some small changes to include information regarding Care Inspectorate contact details.

Feedback at the time of inspection had been positive and due to the small nature of the service, it was not possible to evidence that feedback had been used to improve.

However, feedback from the previous inspection had been used as the basis of an improvement plan and action plan.

A newsletter had been developed to ensure that people were kept up to date with any changes within the service and share information.

Met - outwith timescales

Requirement 6

By 31st July 2024, to ensure that people's care and support needs are met effectively, the provider must ensure staffing arrangements are safe.

To do this, the provider must, at a minimum:

- a) ensure staff have adequate time away from work to ensure they are rested and fit for work to ensure people's health and wellbeing.
- b) provide ongoing support and regular supervision opportunities for staff, to reflect on their practice and wellbeing with record kept to detail.
- c) Provide opportunities for staff to meet and reflect on practice

This is in order to comply with section 7(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 states, "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" (3.14).

This requirement was made on 10 April 2024.

Action taken on previous requirement

A new rota had been developed that ensured that staff had the opportunity to have rest days between shifts, regardless of the amount of hours the staff member was working. Staff we spoke to were enjoying the additional rest time.

Staff supervision processes had been developed and staff had taken part in one to one meetings, where they discussed a range of topics. Going forward, we have advised the managers to consider gaining more feedback from staff on their experiences and support staff to reflect on their practice and how this aligns to the standards.

Staff meeting processes had been developed and implemented to enable all staff to share their experiences, support the development of staff skills and the way the service was delivered.

Met - outwith timescales

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 support people to be confident that staff are working well together, the provider should ensure that a staffing structure and roles are defined within the service.

This should include, but not be limited to, ensuring that the service staffing structure clearly defines roles and responsibilities for staff and supervisors, and who staff directly report to.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which states, "My care and support is consistent and stable because people work together well" (HSCS 3.19).

This area for improvement was made on 10 April 2024.

Action taken since then

A staffing structure had been developed. Each role had a defined job description and staff were aware of the different roles within the service and who should be contacted in the event of staff requiring support or guidance.

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.

Detailed evaluations

How well do we support people's wellbeing?	3 - Adequate
1.3 People's health and wellbeing benefits from their care and support	3 - Adequate
How good is our leadership?	3 - Adequate
2.2 Quality assurance and improvement is led well	3 - Adequate
How good is our staff team?	3 - Adequate
3.3 Staffing arrangements are right and staff work well together	3 - Adequate
How well is our care and support planned?	3 - Adequate
5.1 Assessment and personal planning reflects people's outcomes and wishes	3 - Adequate

To find out more

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