

UVIP Care at Home Support Service

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Type of inspection:
Announced (short notice)

Completed on:
19 February 2025

Service provided by:
FEHM Logistics Limited t/a UVIP
Recruitment

Service provider number:
SP2019013378

Service no:
CS2023000356

About the service

UVIP Care at Home is registered to provide a service to adults including older people in their own homes and in the community.

Their office base is in Aberdeen, they support people in Aberdeen City and Aberdeenshire. At the time of the inspection they were supporting two people.

About the inspection

This was a short notice announced inspection which took place on 19 February 2025. The inspection was carried out by one inspector from the Care Inspectorate.

This was the service's first inspection. To prepare for this inspection we reviewed information about this service. This included, registration and complaints information, information submitted by the service and intelligence gathered throughout the inspection year.

In making our evaluations of the service we:

- made contact with both people and their families who were receiving a service from UVIP
- spoke with management
- reviewed documents.

Key messages

- This is a small service with a small core group of staff.
- Work was needed to establish meaningful quality assurance processes, formal staff support and development.
- Individual care/support plans and risk assessments need to be sufficiently detailed to provide staff with effective guidance on how to support and keep people safe.
- The quality assurance system was not always linked to people's experiences or outcomes.
- Staff need to be fully aware of their roles and expectations when undertaking a visit.

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. While the strengths had a positive impact, key areas of the service require to improve.

We received very mixed feedback from people about the service and carers. A family we contacted described the care as 'brilliant', they also appreciated having a small core group of staff visit. Unfortunately, another family felt the support had been inconsistent, and were often unsure of who and when the carers would appear. People felt they were not always treated with dignity and respect. The manager was aware of these concerns and due to staff availability and staff shortages had been unable to provide a stable package of care. As a result the care and support provided was not responsive to people's changing needs and wishes.

People's personal plans and risk assessments were in place to support safe practice. Some plans contained important information about people's likes and dislikes but gave limited details of the care and support required. For example in relation to the safe administration of medication and ensuring people remain safe in their own homes and community. As a result, there was a risk of inconsistent care and support. People and their families were involved in planning their care. The manager had begun to review the personal plans and implement risk assessments. This would ensure staff were fully aware of their roles and expectations when undertaking a visit. (See 'How well is our care and support planned?' and **Requirement 1**)

Requirements

1. By 21 April 2025, the provider must ensure positive outcomes for service users by effectively demonstrating that individual care/support plans are sufficiently detailed and provide staff with effective guidance on how to support service users.

To do this the provider must:

- a) Ensure that documentation and records are accurate, sufficiently detailed and organised and reflective of the care/support planned or provided.
- b) Ensure that all risk assessments, to safeguard people, are accurate and updated regularly.
- c) Ensure that where appropriate, guidance on individual medication administration is in place and in line with their assessed needs and wishes.
- d) Ensure that personal plans include people's individual aspirations and outline the support that will be provided to help them to achieve this.
- e) Be able to show evidence of regular monitoring and evaluation of records, to demonstrate that staff have a clear understanding about their role and responsibilities and can demonstrate this through their practice.

This is to comply with Regulation 4(1)(a) (welfare of service users) and Regulation 5 (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:

'I am empowered and enabled to be as independent and as in control of my life as I want and can be' (HSCS 2.2); and

'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 3.07).

How good is our leadership?

3 - Adequate

We evaluated this key question as adequate. While the strengths had a positive impact, key areas of the service require to improve.

We acknowledged that UVIP Care at Home is a new provider with a small staff group and client base. The quality assurance system was mostly informal. This meant that they had limited oversight of all the key functions of service delivery. As a result, improvements were not always linked to peoples' experiences or outcomes. **(See Area for improvement 1)**

There was some confusion over the service's and staff's responsibilities in delivering a service to people in their own homes. This had resulted in poor communication and oversight specifically in relation to safeguarding people. **(See Requirement 1)**

Requirements

1. By 21 April 2025, to promote the safety and wellbeing of people the provider must at a minimum:

- a) ensure appropriate risk assessments and support plans are developed to safeguard people's wellbeing.
- b) ensure all accidents and incidents are appropriately recorded and actioned.
- c) ensure all staff are fully aware of their roles and responsibilities regarding safeguarding people and Adult Support and Protection.
- d) ensure the Care Inspectorate is notified of any and all adverse incidents , accidents and adult support and protection referrals.

This is to comply with Regulation 4(1)(a) (welfare of service users) and Regulation 5 (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:

'I make informed choices and decisions about the risks I take in my daily life and am encouraged to take positive risks which enhance the quality of my life' (HSCS 2.24); and

'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 3.07).

Areas for improvement

1. To improve and support better outcomes for people, the provider must develop an improvement plan, using self-evaluation, that links directly to and improves the outcomes and experiences for people.

This is to ensure 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?

3 - Adequate

We evaluated this key question as adequate. While the strengths had a positive impact, key areas of the service require to improve.

There was a detailed extensive training and induction program. There was a mix of eLearning and face to face training taking place. However, there had been limited monitoring of staff practice to ensure that the training was being put into practice. The manager needs to ensure that staff are effectively monitored to confirm that all staff have the correct skills, knowledge and understanding.

There were informal communication processes in place. Staff were given informal opportunities to discuss their work, practice and how best to improve outcomes for people. The manager should formalised the one to one or supervision opportunities for staff to discuss concerns or individual development in a formal process. This would encourage and empower staff to actively participate in developing a culture of improvement in UVIP. **(See Area for improvement 1)**

Areas for improvement

1. To support staff, the provider should ensure regular staff individual one-to-one meetings take place, that focus on staff development and support.

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 skills, are able to reflect on their practice and follow their professional and organisational codes' (HSCS 3.14).

How well is our care and support planned?

3 - Adequate

We evaluated this key question as adequate. While the strengths had a positive impact, key areas of the service require to improve.

Where personal plans were in place, people were involved in the assessment and planning of the care and support they were receiving. This meant that people's personal plans reflected their choices and preferences. However, people's plans did not always contain relevant information or guidance, which had an impact on the care and support provided. This meant that opportunities to maximise people's safety, health and wellbeing were missed. As a result, people were not experiencing care and support consistent with their current needs and wishes. **(See Requirement 1)**

Requirements

1. By 21 April 2025, to ensure people receive support in line with their agreed needs, wishes and preferences, the provider must ensure people have a personal plan in place, that reflects people's current needs and wishes. These plans must be sufficiently detailed and provide staff with effective guidance on how to support service users.

This is to comply with Regulation 4(1)(a) (welfare of service users) and Regulation 5 (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).

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

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