

1st Class Care Solutions Limited Support Service

Unit 3 Eliburn Office Park Appleton Parkway Livingston EH54 6TN

Telephone: 01506 412 698

Type of inspection:

Unannounced

Completed on:

17 April 2025

Service provided by:

1st Class Care Solutions Limited

Service provider number:

SP2013012158

Service no: CS2013320342



Inspection report

About the service

1st Class Care Solutions Limited is a support service providing care at home services to people living in their own homes. The service registered with the Care Inspectorate in March 2014 and is a privately owned company.

The service operates in West Lothian, Falkirk, Clackmannanshire, and Stirling by four teams of care assistants. There is oversight and management from a team of care coordinators, quality assurance team, office staff, registered manager, and the directors of the company.

At the time of the inspection, there were around 190 people receiving care from the service.

About the inspection

This was an unannounced inspection which took place on 15, 16, and 17 April 2025. 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 and received feedback from 82 people who were receiving a service
- spoke with and received feedback from 12 relatives and representatives
- spoke with and received feedback from 23 staff
- shadowed seven care workers visiting people in their homes across four service areas
- reviewed service documents and electronic recording systems
- received feedback from visiting professionals.

Key messages

- Overall, people using the service and their representatives were happy with the service.
- People received dignified care and support from staff who were attentive and respectful.
- · People felt confident that they were listened to.
- People benefitted from having a small regular staff team.
- The service should improve care planning to promote positive outcomes for people.

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

People were being treated with dignity and respect. We observed kind and compassionate care being provided by a team of loyal and committed staff. Overall, people, and their relatives, told us that they were happy with the staff team and the support they received. Some of the feedback that we received included:

- "They don't just provide care, they brighten up our day."
- "The care I receive from the carers employed by 1st Class Care is very good, they are well trained in all matters. They are very helpful. They support and respect me at all times."
- "I am very happy that we have 1st Class Care, as they're kind and caring."
- "I am very satisfied with the service I am receiving. The carers are always kind and supportive. Their effective communication has made my experience positive and, overall, I am happy with the service provided."
- "I am happy with the support I am receiving."
- "Overall experience is good and things are getting improved each day. Happy with the carers coming in."
- "I am happy with the carers who are regularly coming."

People were supported to maintain their independence. We accompanied staff on care visits and observed staff taking time to encourage people to be involved and make choices about their care and support. Staff knew people well and had a good understanding of people's health conditions. One person told us, "The caregivers who come to my house always promote my independence. Overall, I am pleased with the services". The service was helping people to maximise their independence and control.

We observed the service and staff adapting support to accommodate changes in people's health and wellbeing. We heard that one person has different visit times to enable them to join weekly religious services. Another person told us that, "My caregivers helped me tremendously during a difficult time. Overall, I am grateful and content". However, we observed that there were some areas where this flexibility was not possible and a small group of people were not receiving their care when they needed it. We encouraged the service to strive for this in all areas and have reported on this under 'How good is our staff team?'.

Staff were trained and understood their role in supporting people with their healthcare needs. People told us about their confidence in the staff, with one person saying that "their expertise shows". We observed that staff were recognising and reporting concerns to the management team. The service was keeping next of kin informed, making referrals, and seeking guidance from health and social care professionals when they observed changes in people. People could be confident that the service was prioritising their health and wellbeing.

We made an area for improvement, in March 2025, around ensuring adequate information for staff to ensure safe medication administration. We saw that staff were trained and observations of medication practices were being carried out. During this inspection, we noted that the service had started reviewing personal plans and there was improved information about what support people needed. However, this needed to be rolled out across the service with training for staff to ensure they fully understand their role in supporting safe medication administration. We have extended the area for improvement and will follow this up at the next inspection.

How good is our leadership?

4 - Good

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

Day-to-day management was good. The service was completing self evaluation with an improvement plan to develop the service. The management team understood what was working and what improvements were needed within the service. People could be confident that there was good oversight and management.

There were good systems in place to monitor quality. Comprehensive audits and observations were being carried out. While the manager had an overview of quality assurance, the audit activity was shared across the office team which meant that everyone was working with the same objective. At previous inspections, we have discussed developing quality assurance and using this for service improvement. We observed continued progress and could see that this is now embedded within the service. At this inspection, we encouraged the service to analyse quality assurance outcomes to identify trends and utilise quality assurance to guide the direction of the service. This will mean quality assurance is influencing good practice standards and help shape improvement across the service.

People were listened to. The service was actively seeking feedback from people, and their family members, through a range of methods including questionnaires, reviews, quality observations, and everyday contact. Relatives told us, "The office staff at 1st Class Care respond promptly to my concerns"; "Any problems that we might encounter are quickly resolved by their management"; and "The staff at 1st Class Care listens to my concerns and addresses them properly". The service was responsive and were making changes based on feedback shared. People receiving care, and family members, could be confident that the service would take action to improve the service.

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.

Since the last inspection, we observed travel time in place across all of the runs. The service had reorganised their visit schedules to make runs manageable and promote consistency of staff. However, there was one area where the schedule was not planned well and there was insufficient travel time. We saw that this was having an impact on the care needs and satisfaction with the service for a small number of people. We shared this with the manager and they acknowledged the difficulties with the service in the area. They agreed to take action to address these concerns. We were reassured in their commitment to address this to prioritise the needs and wishes of people receiving care.

The service was prioritising consistency of care. The majority of people told us that they received their care from the same staff most of the time. Some people had experienced change when the schedules were

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reorganised but noted this had settled at the time of the inspection. When staff were absent, other members of the wider staff team stepped in to assist. The service was not using unknown staff, such as agency. This meant that staff got to know people well.

Staff worked well together. Where people were receiving support from two carers, they worked in a complementary way ensuring that the care was provided seamlessly. We heard staff informing people who were scheduled to provide care at the next visit and when they would be returning. There was a sense of teamwork.

Staff were well trained. We heard that they felt confident providing support and the training provided helped inform their practice. We found that training levels were high. This service was ensuring that staff had the right skills and knowledge to meet people's needs.

The team were well supported. There were a range of supervision and support opportunities, including one-to-one meetings and competency observations. Staff told us that the management team were approachable and they felt supported. We sampled records and noted that staff were encouraged to reflect on their practice and personal development. This was helping individual workers develop in their role.

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.

Everyone had a personal plan and risk assessments in place. While some of the plans reflected people's care needs and preferences well, there were others that contained limited personal information. We observed limited links between personal plans, risk assessments, and the expressed outcomes that people would like from their care and support. This meant that staff did not always have the correct information about how to support people.

Most people's care and supported had been reviewed. However, some plans had not been reviewed at least every six months or when their circumstances and needs had changed. This meant that the plans did not fully reflect the current health needs of some people. Reviews were focussed on checking that support was right but they were not always updated following reviews. Although many of the staff knew people well, there was a risk that where someone's needs had changed that their care would not be provided correctly. We have made an area for improvement (see area for improvement 1).

We previously reported that work was needed to improve risk assessments. We observed some progress with this, however there continued to be a lack of guidance around minimising and managing risks. We discussed this with the management team and have included this within the area for improvement.

Areas for improvement

1. To improve the quality of information for staff, the provider should ensure that personal plans and risk assessments are individualised and reviewed at least six-monthly or when people's circumstances change.

This should include, and not be limited to, reflecting people's backgrounds, interests, preferences, and wishes. Risk assessments should contain details of how to support, minimise, and manage areas of risk.

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).

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

In order to ensure positive outcomes for people, the provider should ensure people are effectively supported to take their medication safely. This should include, but should not be limited to, ensuring care plans reflect individual support needs and is regularly reviewed to reflect any changing needs.

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).

This area for improvement was made on 4 March 2025.

Action taken since then

We saw that the service had started reviewing personal plans and there was improved information about what support people needed with medication. This needed to be rolled out across the service with training for staff to ensure they fully understand their role in supporting safe medication administration.

We will check on progress at the next inspection.

This area for improvement has not been met and has been extended.

Complaints

Please see Care Inspectorate website (www.careinspectorate.com) for details of complaints about the service which have been upheld.

Detailed evaluations

How well do we support people's wellbeing?	4 - Good
1.2 People get the most out of life	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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Care Inspectorate Compass House 11 Riverside Drive Dundee DD1 4NY

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