

## Constance Care South Lanarkshire Housing Support Service

Suite 2A, International House  
Stanley Boulevard  
Hamilton International Technology Park  
High Blantyre  
G72 0BN

Telephone: 01698 823 052

**Type of inspection:**  
Unannounced

**Completed on:**  
24 April 2025

**Service provided by:**  
Constance Care Limited

**Service provider number:**  
SP2003002276

**Service no:**  
CS2018369578

## About the service

Constance Care South Lanarkshire is registered as a support service, care at home and housing support service to people in their own homes. The offices are based in Blantyre and the service provides support throughout the Lanarkshire area. The office team is led by the registered manager, three care coordinators and two field care supervisors.

The level of support provided varies and is based on an assessment of need. It is Constance Care's stated objectives to provide support to people in order to enable them to remain in their homes, to attain maximum independence and to support carers in caring for their relatives.

At the time of our inspection, the service was supporting 218 people with 77 members of staff.

## About the inspection

This was a full inspection which took place on 14 April - 24 April 2025. 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 25 people using the service and 12 of their family.
- spoke with 27 staff and management
- observed care provision by shadowing support workers in Rutherglen, East Kilbride, Hamilton and Uddingston. This was over four days between 08:00 and 20:00.
- reviewed documents.

## Key messages

- People using the service and their families were happy with the service.
- People benefitted from good levels of consistency of care.
- Staff demonstrated high levels of motivation to provide compassionate care to individual's receiving support.
- Time to travel between locations needs to be better planned to protect the allocated time for care provision and also for staff wellbeing.

## 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?	5 - Very 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

In this part of the inspection report we considered one quality indicator. We evaluated this key question as good, where several strengths impacted positively on outcomes for people and clearly outweighed areas for improvement.

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

Constance Care South Lanarkshire provide support to people in their own homes with a range of personal care needs. These visits can be minimal with a medication prompt through to more complex care needs that demand more time with the assistance of two staff members.

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:

- 'the carers are fabulous... they are so caring'
- 'everyone is very kind'
- 'they know their job well'
- 'couldn't be without them.'

The care and support provided is consistent and stable enabling trusting relationships to be established. This also allows staff to notice any changes and be responsive to any changes in the person's health and wellbeing. We observed that staff were recognising and reporting concerns to the management team. All of the people receiving the support and their families spoke about the positive trusting relationships that had been established with the care staff.

People should experience care that is responsive to their needs and staff have time to support, care and speak with them. We found that carers did not always have adequate travel time between visits. This meant that care time agreed with people was often reduced to accommodate the travel required. People using the service and their families expressed concern for staff wellbeing, recognising that the staff were rushing due to time constraints. The provider should ensure staff have appropriate travel time built into the scheduling. (See Area for Improvement 1).

### Areas for improvement

1. To ensure that staff have time to support, care and speak with individuals receiving care, the provider should develop a visiting schedule that considers the length of time needed for each visit based on the persons' needs with realistic travel time between visits.

This is to ensure that care and support is consistent with the Health and Social Care standards which state: "my care and support is provided in a planned and safe way, including if there is an emergency or unexpected event" (HSCS 4.14).

**How good is our leadership?****5 - Very Good**

In this part of the inspection report we considered one quality indicator. We found significant strengths in aspects of the care provided and how these supported positive outcomes for people, therefore we evaluated this key question as very good.

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

The governance and quality of assurance of the service is supported by the dedicated departments of the larger organisation. The service has introduced the self-evaluation of the core assurances outlined in the Care Inspectorate Quality Framework for support services. There are also clear and robust processes in place for managing complaints, accidents and incidents. The service actively seeks feedback from people using the service, their families and also staff members.

There are high levels of confidence in the management team from people receiving the service, their families and care staff. The management team were able to demonstrate a commitment to improving the service and delivering a high-quality care service.

**How good is our staff team?****4 - Good**

In this part of the inspection report we considered one quality indicator. 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**

The management team recognised the importance of complying with best practice for safer recruitment, induction, registration of staff, training and supporting staff to engage in a culture of professional development. From the point of recruitment, staff are provided with regular opportunities to talk with the management team. This included one-to-one meetings with the manager, spot checks to assess competencies and team meetings providing opportunities to reflect and discuss practices and dilemmas and identify learning needs.

The care and support provided is consistent and stable, enabling trusting relationships to be established. All of the people receiving the support and their families spoke about the high levels of consistency and the quality of care that they received.

The staff team demonstrated a strong value base and commitment to maintain, and where possible, improve the health and wellbeing of people receiving the service. They spoke about the management team as approachable and responsive to issues that they raised.

People should have confidence that staff will apply their knowledge and best practices in order to avoid the spread of infection. Staff demonstrated good knowledge and practices, however we found that a number of staff were using vinyl gloves as opposed to nitrile gloves when providing support with personal care needs. (See Area for Improvement 1).

## Areas for improvement

1. To ensure that people receiving the service, and staff, are kept safe from the spread of infection staff should use PPE in line with the National Infection Prevention and Control Manual (NIPCM).

This is to ensure that care and support is consistent with the Health and Social Care standards which state: '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).

## How well is our care and support planned?

4 - Good

In this part of the inspection report we considered one quality indicator. 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

Personal plans made clear the service knew people well, their likes/dislikes and preferences. It was evident that the service regularly reviewed and updated personal plans. The plans contained good information. These could be improved with more personalised information, particularly where there is a specific health or care need that demands this personalised information, for instance epilepsy. The level of support with medication needs could also be clearer in the personal plan.

Personal plans and carer visit records were stored electronically, which enabled ease of access for all staff. During the inspection it became apparent that there are some obstacles for people to access these. Assurances were provided by management that families do have access to these platforms and they will take action to ensure that people are informed of how to do this. (See Area for Improvement 1).

## Areas for improvement

1. To ensure that people are fully involved in all decisions about care and support, the service should ensure that people and their families are informed about how to access the digital personal plans and other records.

This is to ensure that care and support is consistent with the Health and Social Care standards which state: 'I am fully involved in developing and reviewing my personal plan, which is always available to me.' (HSCS 2:17).

## 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?	5 - Very Good
2.2 Quality assurance and improvement is led well	5 - Very 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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