

East Ayrshire Health & Social Care Partnership Care at Home and Housing Support Service (South Locality) Housing Support Service

Department of Education and Social Care Services
Rothesay House
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Type of inspection:
Unannounced

Completed on:
2 September 2025

Service provided by:
East Ayrshire Council

Service provider number:
SP2003000142

Service no:
CS2011282270

About the service

East Ayrshire Health & Social Care Partnership Care at Home and Housing Support Service (South Locality) is registered to provide a combined care at home and housing support service to people living in their own homes.

Support is offered to individuals within their own homes and five sheltered housing complexes, throughout the south locality of East Ayrshire; in towns, villages and rural communities.

At the time of inspection the registered manager was supported by four area leads, eight care coordinators and a team of community care officers.

There were 566 people being supported at the time of inspection.

East Ayrshire Health & Social Care Partnership Care at Home and Housing Support Service (South Locality) has its main office in Rothesay House, Cumnock.

About the inspection

This was an unannounced follow-up inspection, which took place on 1 September 2025 between 10:00 and 17:00 hours. The inspection was carried out by one inspector from the Care Inspectorate.

The inspection focused on two requirements made during the previous inspection which took place between 13-22 May 2025. We evaluated how the service had addressed these requirements to improve outcomes for people and the well-being of staff.

During this follow-up inspection, we felt the service had made sufficient progress by building on key strengths. However, part 1b of requirement one requires an extension until 31 October 2025. Further commitment is required to develop this approach to support continuous improvement.

Key messages

Progress had been made on improving matters we raised in relation to planning, assessing and evaluating staffing. Also, quality assurance procedures had been reinstated.

We found that the service had not yet commenced working on the self-evaluation tool.

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

Requirements

Requirement 1

By 31 August 2025, the provider must ensure that quality assurance, including self-evaluation and improvement plans, drive change and improvement where necessary.

To do this the provider must, at a minimum:

- a) reinstate quality assurance measures as a matter of urgency.
- b) prioritise completion of the self-evaluation tool to gauge and track improvements required. 'How are we doing?', 'How do we know?' and 'What are we going to do now?' This should be based upon the quality indicators within the improvement framework. This should also be undertaken as a fully consultative exercise from which to build improvement priorities.

This is to comply with Regulation 4 (1) (a) and (b) (Welfare of users) 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 benefit from a culture of continuous improvement, with the organisation having robust and transparent quality assurance processes' (HSCS4.19).

This requirement was made on 22 May 2025.

Action taken on previous requirement

a) The manager had reinstated quality assurance measures to ensure that they could evidence a culture of continuous improvement. The processes in place showed progress had been made in measuring outcomes and experiences for people who receive support.

The manager had devised a plan for undertaking regular quality assurance visits. This ensured that each coordinator had protected time out of the office to meet this part of the requirement, within timescales. A future plan is being drafted for area lead staff to fully undertake their quality assurance role.

b) The provider did not prioritise the completion of the self-evaluation tool. Therefore, this requirement will be extended and must be met by 31 October 2025.

Not met

Requirement 2

By 31 August 2025, the provider must plan, assess and evaluate the outcomes of care and support needs of people who receive support.

To do this the provider must, at a minimum:

a) Ensure scheduling takes account of the importance of people's outcomes, along with considerations of compatibility and continuity.

b) assessment, planning and evaluation of staffing is evidence-based, transparent and focussed on people's outcomes

c) the provider should improve how the decision-making process is documented.

This should include, but is not limited to, capturing what measurements and information contributed to the evaluation of staffing and the rationale for professional judgement decisions. This is in order to comply with section 7 of the Health and Care (Staffing) (Scotland) Act 2019.

This is to ensure the assessment, planning and evaluation of staffing is consistent with the Care Inspectorate guidance document 'Staffing Method Framework' for adult care homes (2024) and the Scottish Government document 'Health and Care (Staffing Scotland) Act 2019: Statutory Guidance' (2024).

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

'I experience high quality care and support because people have the necessary information and resources' (HSCS 4.27).

This requirement was made on 22 May 2025.

Action taken on previous requirement

a) Scheduling now takes account of the importance of people's needs, outcomes, and wishes; along with considerations of compatibility and continuity.

Feedback we got from people and their relatives was positive. They told us that changes to visits had settled down and continuity had improved. This reassured us that sufficient progress had been made to meet this requirement.

b) Cohesive and collaborative work between schedulers and office staff meant they had continued to share learning to navigate and utilise the new scheduling system for the benefit of people. This has ensured better assessment, planning and evaluation of care and support. This includes continuity of time and carer and has alleviated the issues felt for people and their relatives.

Staff also told us that rota changes had settled down. They were now supporting people who they knew well again and that this was working better all-round. Staff commented that the continual short notice changes were not happening therefore, this was no longer impacting negatively on their well-being. Staff told us they were proud to say they worked for East Ayrshire council again.

c) The provider had improved how the decision-making process is documented. They can now report on what measurements and information contributed to the evaluation of staffing and the rationale behind any judgement decisions.

Met - within timescales

Complaints

There have been no complaints upheld since the last inspection. Details of any older upheld complaints are published at www.careinspectorate.com.

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