

## First Choice Healthcare Services Support Service

Unit 15 Epoch House Falkirk Road Grangemouth FK3 8WW

Telephone: 01324227760

Type of inspection:

Announced (short notice)

Completed on:

5 June 2025

Service provided by:

First Choice Healthcare Services Ltd

Service provider number:

SP2023000416

Service no:

CS2023000436



## Inspection report

### About the service

First Choice Healthcare Service Ltd, provides support to adults and older people in their home and in the community, throughout Falkirk, Stirlingshire and Clackmannanshire.

The service registered with the Care Inspectorate on 22 December 2023.

The organisation's mission statement:

"seeks to provided care to a wide variety of people aiming to enhance the quality of life of clients, to satisfy and promote the expectations of the clients to ensure the quality of personal care and support which clients receive whilst working in partnership with clients to meet their individual needs."

At time of inspection the service was supporting 42 people.

## About the inspection

This was an announced short notice inspection which took place on 3 and 4 June 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:

- obtained feedback and spoke with 11 people using the service and two of their families
- obtained feedback and spoke with staff and management
- · observed practice and daily life
- · reviewed documents
- spoke with visiting professionals.

## Key messages

- Staff were caring, kind and respectful with people
- Most people were supported by a consistent staff team
- The manager was committed to ensuring people were well cared for
- Staff appeared to be clear within their role
- People could be assured that medication administration was given following best practice
- The service had worked hard to develop a quality assurance system.

### 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?	5 - Very Good
How good is our leadership?	4 - Good
How good is our staff team?	5 - Very 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?

5 - Very Good

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

First Choice Healthcare services 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.

During our inspection staff were caring, kind and respectful with people. We saw very good personalised care and support being provided. One person told us "the care is brilliant" ,whilst another told us "the carers are good and lovely, they know what I like and need."

Most people were supported by a consistent staff team which supported meaningful relationships being established. One person told us "I am my very own team of girls who I see all the time", whilst another told "I mostly seeing the same carers, at times it can be different but they let me know." 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.

Medication management was very good, an electronic system for administration of medication was in place. There was a clear medication policy and procedures in place and staff practice we observed was safe in the managing and recording medication being administered.

## 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.

### Quality Indicator: 2.2 Quality assurance and improvement is led well

The manager was committed to ensuring people were well cared for. Staff felt that they were approachable, supportive and caring. One visiting professional told us "the manager appears very professional and has varied experience which means she can identify issues and contact social work should they need an assessment."

Staff felt communication was good and we saw regular communication and staff meetings being carried out. This ensures staff have the necessary information and support to provide care based on relevant evidence, and guidance. Staff described receiving regular feedback and formal supervision, with an open door policy to the manager that allowed them to access guidance and support as needed. This helped to ensure that people's needs were met well, whilst also supporting staff development. Staff told us that they felt valued, included and listened to by the manager.

There was good quality assurance systems in place to evaluate the quality of the service provided. An area for improvement had been made at the last inspection where the manager had worked hard to implement and develop the systems. Please see under Outstanding Areas for Improvement.

We saw a system in place to manage accidents and incidents, which assured the safety of people and that risks were being identified and actions taken. However we found some accidents and incidents that met the regulatory notifications were not always completed. The manager gave assurance and quickly actioned the highlighted incidents. There was a clear complaints process and people were confident on how to raise a concern. Management had a clear oversight of the service and shared any learning, which meant the service was responsive to driving improvements.

The service had a service development plan in place incorporating all aspects of the service, which identified any areas for improvement and actions to be taken.

### How good is our staff team?

5 - Very Good

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: 3.3 Staffing arrangements are right and staff work well together

Staff we observed appeared to be clear within their role and what was expected of them during visits. All of the staff we spoke with told us they enjoyed their job, working with people and demonstrated good values. Staff delivered support with kindness. They interacted well with people, building trusting relationships and people told us that staff supporting them were compassionate and respectful. Staff were flexible and worked well together to benefit people using the service. One staff member told us "The rota is flexible and communication with management is exceptional."

Staff completed training that was relevant to their roles. This included training that was specific to understanding the needs of people being supported and cared for. All staff spoke positively about the induction process they had completed. The manager was described as supportive and approachable. Training records were kept which evidenced that training was up-to-date. People experienced care and support from well trained staff who were knowledgeable about their care needs. One person told "the staff appear well trained and knowledgeable."

Staff carried out their duties in a way that demonstrated an understanding of the training they had received. Conversations with staff also evidenced their knowledge in supporting and caring for people. Most staff spoke positively of their work and told us they were proud to work in the service. This demonstrated a commitment to both the service and the people they were supporting and caring for. Arrangements for the one-to-one supervision of staff were in place.

The manager worked hard to support staff's wellbeing, and promote a sense of team work, this was done through regular team meetings and team building events, which made team working positive.

Many people were supported by a small, consistent staff team, who knew them well. Planning of support visits were effectively co-ordinated.

### 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.

### Quality Indicator: 5.1 Assessment and personal planning reflects people's outcomes and wishes

All people had a care plan in place, with a good level of detail to guide staff around how best to care and support each person. Risk assessments were also in place which also informed the care plan.

We saw a process in place for reviewing care plans regularly and from the sampled plans we found them to be reflective of people's changing needs.

Personal plans and carer visit records were stored electronically, which enabled ease of access for all staff and access was available to people and their families.

People and their representatives were involved in care planning, advocacy was sought where it was deemed appropriate. We saw six monthly reviews had taken place.

# 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

The service should ensure that should someone require to have their fluid intake monitored and recorded that appropriate targets are set, and reasons recorded as to why the chart is in place and ensure this is recorded also within the electronic recording system.

This is to ensure that care and support is consistent with health and social care standards which states that: "1.15 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."

This area for improvement was made on 19 June 2024.

### Action taken since then

People could be assured that people who require their fluid intake to be monitored, had appropriate and accurate recording within the electronic recording system. Care plans were in place and management had oversight, which meant the service was responsive to people's changing care needs.

Therefore this area for improvement has been Met.

### Previous area for improvement 2

To support people to keep well and safe, the provider should ensure that all medication being administered, is recorded following best practice.

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

"Any treatment or intervention that I experience is safe and effective." (HSCS 1.24)

This area for improvement was made on 19 June 2024.

### Action taken since then

People could be assured that medication administration was given following best practice. Staff had appropriate training and the service had systems in place to ensure safe and effective administration and recording of medication. This supported people to keep well and safe.

Therefore this area for improvement has been Met.

### Previous area for improvement 3

To ensure the service remains responsive to people's care and support, the quality assurance process must be robust and demonstrate written evidence of a quality assurance system being used to include, medication management, falls, skin integrity and hydration.

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." (HSCS 4.19)

This area for improvement was made on 19 June 2024.

### Action taken since then

The service had worked hard to develop a quality assurance system. We saw written evidence of audits focusing on medication management, falls, skin integrity and hydration. The management team had a good oversight and demonstrated being responsive to people's care and support.

Therefore this area for improvement has been 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?	5 - Very Good
1.3 People's health and wellbeing benefits from their care and support	5 - Very 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?	5 - Very Good
3.3 Staffing arrangements are right and staff work well together	5 - Very 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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