Local Lanarkshire Care
Housing Support Service

5 Saline Street
Airdrie
ML6 9BE

Telephone: 01236 808 888

Type of inspection:
Unannounced

Completed on:
17 October 2025

Service provided by:
Local Lanarkshire Care Ltd

Service provider number:
SP2017012922

Service no:
CS2017356375

About the service

Local Lanarkshire Care provides Care at Home and Housing Support services to people living in North Lanarkshire.

The head office is in Airdrie and at the time of inspection the service was supporting 77 people.

The service provides flexible packages of care and support to meet people's needs. The range of services includes: personal care and support, support with domestic tasks, and shopping.

About the inspection

This was an unannounced inspection which took place on 13-16 October 2025 between 09:00 and 16:30. The inspection was carried out by two inspectors and an inspection volunteer from the Care Inspectorate. Our inspection volunteers are members of the public who have relevant lived experience of care either themselves or as a family carer. They speak to and spend time with people and families during inspections to ensure their views and experiences are reflected accurately in the inspection.

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 throughout the inspection year. To inform our evaluation we:

- spoke/spent time with eight people using the service and five of their relatives
- received completed pre-inspection questionnaires (24 from people and relatives, 15 from staff and 12 from visiting professionals)
- spoke with 10 staff and management
- observed practice and daily life
- reviewed documents
- spoke with four visiting professionals.

Key messages

People felt they were supported well by knowledgeable and experienced staff.

Relatives spoke positively about the care provided by the service.

Personal plans were detailed and reflected people's needs and wishes.

Further improvements were needed to strengthen documentation within medication and financial support systems to ensure that service policy and procedure was being adhered to.

Staff felt supported and well trained within their roles.

Staff recruitment needed to improve.

The management team knew what worked well within the service however, needed to tighten up on all action plans generated across the service to ensure they were being reflected within the service improvement plan.

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 staff team?	5 - Very Good
How well is our care and support planned?	5 - Very 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.

Most people appeared to be well supported by staff who they were familiar with and knew well. One person told us, "My staff are nice, I like them. I've been getting a service now for a good wee while" whilst another person told us, "my service is really good". Feedback from relatives was also positive. Most people felt communication with the service was good, and knew who they should contact when they needed advise or support. A few people were unsure how to make a complaint however, said they had not needed to. This was shared with the management team who advised they would reiterate their complaint policy to people and their families on how to make a complaint.

Care plans were detailed, especially where risks were identified and staff had a clear understanding of who to contact when decisions needed to made about people's care. Staff recognised changes in people's health and responded quickly which ensured timely access to healthcare. People were supported to make informed choices about their health and lifestyle with evidence of this within their care plan records.

People were supported to have as much control as possible over their medication. The service had a robust medication management system in place that followed good practice guidance. Some areas for improvement were identified, such as, making 'as required' medication protocols clearer and ensuring records were completed at the time of administration. These issues were not affecting the quality of care people received.

The service promoted inclusion and communication through regular newsletters which were issued quarterly for people using the service and biannually for carers. These newsletters featured personal stories and service updates with some people keen to contribute their own experiences. Survey responses had improved since the last inspection and an action plan was in place to address feedback. We encouraged the service to share what they did as a result of the feedback from what people told them as this would evidence how people's views are being listened to and acted upon.

Records of significant events, such as, accidents and incidents were well maintained. Appropriate actions and notifications were completed in alignment with service policy. People could feel confident that the service was taking the right steps to protect them from harm.

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.

Staffing arrangements were well organised with rotas showing that most people were supported by a consistent staff team. The management team made efforts to match staff attributes with the needs and preferences of the people they supported. To build on this, we suggested including people's staffing preferences within their care plans.

Staff received regular supervision which focused on their learning and development within their role. To strengthen these sessions we recommended including reflections on staff wellbeing.

Staff told us they felt happy and supported in their roles and their feedback indicated that induction and training were of a high standard. Training across the service was up to date and included both online and face-to-face sessions, as well as person-specific training topics such as percutaneous endoscopic gastrostomy (PEG) feeding and epilepsy support.

Team meetings were detailed and focused on individual support. We suggested introducing formal action plans and reviewing previous actions at the start of each meeting to ensure that these were followed up.

Training was monitored to ensure it met service needs. Quality assurance audits were being carried out, with most actions being followed up at either team meetings or staff one-to-one meetings. However, generated action plans were not always linked to the service's improvement plan which would ensure that this plan was indeed reflective of where the service focus was in relation to continuous improvement.

Recruitment processes were being followed, but improvements were needed to ensure the service recruitment records aligned with current Home Office guidance. We advised strengthening quality assurance in this area to ensure safer recruitment practices are fully compliant with legislation (see area for improvement 1).

Areas for improvement

1. To ensure compliance with relevant Home Office legislation, the service should implement a robust process for obtaining and retaining copies of appropriate documentation that verifies all staff have the legal right to work in the UK. This will support legal obligations and promote good governance in workforce management.

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

'I am confident that people who support and care for me have been appropriately and safely recruited.' (HSCS 4.24).

How well is our care and support planned? 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.

People benefitted from personal plans that were regularly reviewed, evaluated and updated. These plans reflected individual preferences and involved relevant professionals and those important to the person. Review meeting minutes included people's views and their progress over the previous six months.

Staff were able to describe how they supported people when they were distressed, such as, how they provided reassurance during these times. However, this level of detail was not always reflected within the written care plans. For example, phrases like 'reassure when anxious' should be expanded to explain how reassurance should be provided to people when they are experiencing stress and distress.

Where support was crisis-based, safety plans were in place and focused on identifying warning signs, immediate risks and strategies to reduce harm. These included coping mechanisms and details of who could help.

The service gathered people's views about their care, and we suggested that future reviews include questions about staffing, particularly with the introduction of the Health and Care (Staffing) (Scotland) Act 2019 which came into force on 1 April 2024. Including staff perspectives within people's reviews could also help ensure a balanced understanding of the service provided.

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

To support people's health and wellbeing needs, care plans should contain details identifying who is entitled to make decisions on people's behalf when they are unable to do so. This would include information about adults with incapacity (AWI), welfare guardianship or power of attorney.

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

'My human rights are central to the organisations that support and care for me' (HSCS 4.1).

This area for improvement was made on 21 July 2023.

Action taken since then

Legal documentation was in place to support people who were unable to fully express their wishes and preferences. This meant that those with legal authority or who were important to the person, were involved in shaping their personal plans. Each personal plan included a copy of the legal guardian's powers, helping staff understand who should be involved in decision-making. Staff knew people well and consistently contacted the right individuals when decisions were needed.

This area for improvement will be met.

Previous area for improvement 2

To minimise the risk of potential financial abuse and effectively support people to manage their finances, the provider needs to implement cash handling procedures.

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

'If I need help managing my money and personal affairs, I am able to have as much control as possible and my interests are safeguarded' (HSCS 2.5).

This area for improvement was made on 21 July 2023.

Action taken since then

The service had cash handling procedures to ensure people were protected from financial harm. We shared some aspects of record keeping that the service could further be improved upon to ensure these procedures were being followed consistently. Staff were aware of their responsibilities and we were reassured that people were being supported appropriately with their finances.

This area for improvement has now been met.

Previous area for improvement 3

To support people's wellbeing, the provider should ensure staff access training appropriate to their role and apply their training in practise. This should include but not limited to training in value of stimulation and meaningful activity, the importance of recording and maintaining accurate records on meaningful interactions and activity including the impact stress and destress can have on these.

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

'I can choose to have an active life and participate in a range of recreational, social, creative, physical and learning activities every day, both indoors and outdoors' (HSCS 1.25).

This area for improvement was made on 27 June 2023.

Action taken since then

Staff received training that was tailored to meet the health and wellbeing needs of people they supported. A broad range of learning opportunities ensured staff were confident and competent when supporting people across all areas of their lives. Staff also recorded meaningful activities including reflections from people about what they felt they had achieved from their chosen activity. Most people were actively involved in planning their own activities which helped to ensure these were personal and meaningful to them.

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 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?	5 - Very Good
5.1 Assessment and personal planning reflects people's outcomes and wishes	5 - Very Good

To find out more

This inspection report is published by the Care Inspectorate. You can download this report and others from our website.

Care services in Scotland cannot operate unless they are registered with the Care Inspectorate. We inspect, award grades and help services to improve. We also investigate complaints about care services and can take action when things aren't good enough.

Please get in touch with us if you would like more information or have any concerns about a care service.

You can also read more about our work online at www.careinspectorate.com

Contact us

Care Inspectorate
Compass House
11 Riverside Drive
Dundee
DD1 4NY

enquiries@careinspectorate.com

0345 600 9527

Find us on Facebook

Twitter: @careinspect

Other languages and formats

This report is available in other languages and formats on request.

Tha am foillseachadh seo ri fhaighinn ann an cruthannan is cànain eile ma nithear iarrtas.

অনুরোধসাপেক্ষে এই প্রকাশনাটি অন্য ফরম্যাট এবং অন্যান্য ভাষায় পাওয়া যায়।

یہ اشاعت درخواست کرنے پر دیگر شکلوں اور دیگر زبانوں میں فراہم کی جاسکتی ہے۔

ਬੇਨਤੀ 'ਤੇ ਇਹ ਪ੍ਰਕਾਸ਼ਨ ਹੋਰ ਰੂਪਾਂ ਅਤੇ ਹੋਰਨਾਂ ਭਾਸ਼ਾਵਾਂ ਵਿਚ ਉਪਲਬਧ ਹੈ।

هذه الوثيقة متوفرة بلغات ونماذج أخرى عند الطلب

本出版品有其他格式和其他語言備索。

Na życzenie niniejsza publikacja dostępna jest także w innych formatach oraz językach.