

CERA - Forth Valley Housing Support Service

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Type of inspection:
Unannounced

Completed on:
4 May 2026

Service provided by:
CERA Care Operations (Scotland)
Limited

Service provider number:
SP2009010680

Service no:
CS2019374567

About the service

Cera Forth Valley operates as a combined Housing Support and Care at Home service based in Alloa. The service delivers support to adults with a range of assessed needs who are living in their own homes across Stirling, Clackmannanshire, and Falkirk. At the time of inspection, approximately 240 individuals were receiving support. The level of assistance provided varied, ranging from a few hours per week to several visits each day.

The service is led by a registered manager and several care co-ordinators, who provide leadership across each service delivery area.

The provider of the service is Cera Care Operations (Scotland) Ltd.

About the inspection

This was an unannounced inspection which took place on 28,29 April and 1 May 2026. The inspection was carried out by two inspectors from the Care Inspectorate. To prepare for the inspection we reviewed information about the service. This included registration information and information submitted to us by the service.

In making our evaluations of the service we:

- Shadowed care staff visiting 11 people in their homes.
- Met with the manager and coordinators in the Alloa offices.
- Met with 5 care staff.
- Received questionnaire feedback from 56 people/relatives and 32 staff.
- Sampled support plans, health recordings and a variety of other documents.
- Looked at quality assurance systems and training records.
- Looked at staffing levels and visit planning.

Key messages

- Care staff we spoke with had good values, which were integrated into how care and support was delivered.
- People had good health outcomes supported by joint working between CERA staff and external professionals.
- Care and support was reviewed well, and people's needs and preferences were reflected in their support plans.
- Some aspects of care co-ordination were good. However, there is an area for improvement around ensuring staff travel time is included in scheduling of care.

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 staff team?	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 as several strengths impacted positively on outcomes for people and clearly outweighed areas for improvement.

During our inspection people shared that they were happy with the care they received. People expressed that it was important that they received consistency in the care staff visiting them. This meant people could feel safe and trust in those providing their care and support.

We observed staff interacting with people in a compassionate and person-led manner. Where staff knew people well, they were able to connect with people about what mattered to them. Staff knew key aspects of people's personality. This meant staff could tailor care delivery to each person's individual needs and preferences.

We observed warm and meaningful connection between people and carers. Staff used humour appropriately and had motivational conversations with people. This brightened people's mood state. Such an approach meant that people's potential for isolation and loneliness was reduced as conversations offered meaningful connection.

Some of the feedback from people included:

"I don't know what I would do without my care staff, they are a lifeline to me"

"My care staff know me so well, they treat me like family, they are so kind"

"They don't have an easy job, but they always have a smile and make me feel so much better, without them I would be lost, when they arrive my day is better".

Medication was planned and supported in line with best practice. Staff training was up to date. Reporting of any medication issues was acted on promptly and good quality assurance processes were in place to support safe practice. Staff were clear on people's care plan and what level of support was required. People were supported to maintain as much independence as possible with their medication and other aspects of daily living. This meant people were supported to feel included in decisions regarding their own health and wellbeing.

Support for people's health outcomes was good; we saw evidence of liaison with a range of external professionals. This was combined with good internal communication concerning health related risk issues. This meant that people's health and wellbeing was integrated into care delivery and any highlighted risks were addressed.

Care planning supported staff practice by highlighting the importance of monitoring skin integrity, frailty, mobility, nutrition, hydration and infection identification. This ensured that staff were attentive to changes in people's health and wellbeing.

Care plans sampled were of a good standard. They were clearly written and demonstrated respectful consideration of each individual's needs, preferences, and personal outcomes. Each plan contained a

thoughtfully developed personal history, outlining the person's life experiences and personality in a meaningful way. This contributed positively to the delivery of person led care.

During our inspection, we provided feedback regarding the importance of maintaining clarity within care plans. We highlighted the need to ensure that task focused content did not detract from the emphasis on each person's unique needs and outcomes. The service acknowledged this feedback and agreed to review and refine these aspects. Progress in this area will be evaluated at the next inspection.

How good is our staff team?

4 - Good

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

During our inspection, the service shared that there were ongoing difficulties with recruitment/retention of staff and that this had an impact on resourcing and scheduling of care provision. Progress on addressing some aspects of scheduling visits (such as overlapping visits and consistency of staff) had been made. From sampling scheduling and feedback received from staff, we identified that there were ongoing issues with staff travel time being integrated into scheduling plans. This had the potential to adversely affect outcomes for people and staff wellbeing. Therefore, we made an area for improvement for scheduling, (see area for improvement 1).

We sampled recruitment documentation and found that checks and assurances were being carried out well. We advised the service to ensure registered staff were all current employees. The service had a system for reviewing this information and agreed to follow up on any discrepancies identified. We will review this information at our next inspection.

We met with several staff who were motivated and positive about their role, their team and the support offered from leaders within the service. The service was working hard to improve the recruitment and retention of staff. Overall, despite resourcing pressures, staff and leaders worked well together and had shared values which shaped care delivery.

Staff training was being delivered well, with a clear induction process for new staff and refresher training was delivered on key areas of practice. This meant staff were supported to gain and maintain the skills required to deliver safe and effective care and support.

In discussion with the service, we reviewed recent complaints. We were assured that internal investigations were being well managed and outcomes were focused on people's safety. Leaders had a clear plan in place to address issues and ensure care standards were maintained. This meant that the service was being well led, staff were offered support during investigations and action plans following investigation were proportionate.

Areas for improvement

1. People should feel confident that the provider is planning adequate time for care delivery.

This should include, but not be limited to, ensuring that care scheduling is well planned with sufficient travel time for staff between visits.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that: 'People have time to support and care for me and to speak with me' (HSCS 3.16); and 'If I am supported and cared for by a team or more than one organisation, this is well coordinated so that I experience consistency and continuity' (HSCS 4.17).

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?	4 - Good
1.3 People's health and wellbeing benefits from their care and support	4 - Good

How good is our staff team?	4 - Good
3.3 Staffing arrangements are right and staff work well together	4 - Good

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