

## Spinal Homecare Services Support Service

157 Stricklandgate  
Kendal  
LA9 4RF

Telephone: 01539 730 777

Type of inspection: Unannounced  
Inspection completed on: 29 March 2018

**Service provided by:**  
Spinal Homecare Services Ltd

**Service provider number:**  
SP2005007368

**Care service number:**  
CS2005092129

## About the service

The service has been registered since 2006.

The service which operates on a national basis provides care at home to service users, from 16 years of age, who may have diverse needs due to spinal injury and/or other physical disabilities. The agency office base is located in Kendal, Cumbria.

At the time of inspection Spinal Homecare Services Ltd was providing 24 Hour live-in care and support to four service users in Scotland. The service provides care packages to the service users by providing personal assistants who generally work for two weeks followed by a week off when a replacement carer is provided.

The service provider's Statement of Purpose which is available in different formats and languages, incorporates a comprehensive aims and objectives statement and embraces commitments "to provide quality services for service users through caring, competent and well-trained staff and "to involve service users in planning and review of services that are provided for them, to ensure their needs are met".

The provider stated that the rights of the service user are considered to be paramount in the operation of the service. The service aims to provide a person centred, flexible and responsive support service to people who live as independently as they can in their own homes.

## What people told us

We spoke with two service users who spoke positively of the support they received. They told us;

"I receive 24 hour live in care. My regular carer is very good at her job, I have been very lucky that she was the first person provided by the company. Several of the "infill" carers have little or no practicable experience which unnerves me. The company seem to have a large turnover of staff which makes it difficult to receive dependable/trusted carers when my full time carer is off. I hope this will improve in the future".

"It can be difficult with the other carers because they don't have the same level of expertise, especially when they are relatively new. I am extremely lucky - if I could get another regular carer that would be ideal".

"I am happy with the service and my carers".

## Self assessment

We are not requesting self-assessments from providers for this inspection year. Issues relating to quality assurance, acting on feedback from people using the service and the quality of the service's improvement plan are considered throughout the inspection.

From 1 April 2018 the new "Health and Social Care Standards" will replace the existing Care Standards. These Standards seek to provide better outcomes for people who experience care and services should now be familiarising themselves with these. We would encourage services to prepare for the implementation of the standards by working with staff and people experiencing care to raise awareness and explore what they mean in their specific setting, and consider how they impact on their work.

## From this inspection we graded this service as:

Quality of care and support	4 - Good
Quality of staffing	not assessed
Quality of management and leadership	4 - Good

## What the service does well

Service users and care staff (referred to as personal assistants) spoke positively of the "live in" nature of the service which enabled flexibility, promoted choice and supported good relationships. One personal assistant told us "clients are able to direct care to meet their preferences. It is person centred with one to one non-rushed care being offered to suit individual need".

It was evident that the culture and ethos of the service positively recognised each person as an expert in their own experiences, needs and wishes. People told us they had real confidence in their regular personal assistants and were complimentary of the care and support they received. They told us;

"They are really good".

".....(name) is fabulous! She has a good balance between understanding and being cared for".

"My regular PA is brilliant!"

Personal assistants spoke positively of the induction training they received and told us this was informative and enjoyable. Staff felt this gave them the relevant skills and knowledge to care for people with a spinal injury.

Following induction, personal assistants would always undertake an extensive handover/shadowing period with an experienced member of staff which ensured they knew the service user's care needs, likes, dislikes and daily routines. This also enabled them to feel confident and competent prior to supporting the person independently.

As part of quality assurance systems, the service ask for service user's and staff views through informal contact and surveys. A "record of experience" document was completed to enable people to feedback on the quality of care they experienced from staff during their first placement.

The service continues to consider how to strengthen, improve and enhance overall service and care delivery.

## What the service could do better

Improvements are needed to the quality of information contained within support plans. Information needs to be much more robust, person-centred and clearly demonstrate how the individual's support and healthcare needs will be met. The manager told us the service planned to introduce a new computer application (PASS) that will give a digital record of support plans.

(Requirement 1)

A more formal approach to care review meetings and reviewing the support plan needs to be developed. This will enable the service to demonstrate that the current plan of care continues to meet the person's needs, wishes and preferences.

(Requirement 1)

Improvements are needed within care plans to reflect exactly how bowel and bladder care should be given. This will reduce the likelihood of any unintended consequences to the person receiving care. Training in bowel and bladder care should be reviewed in line with best practice and support a competency based framework. Policies and procedures should be implemented and reviewed to take this into account.

(Recommendation 1)

The service operates on a national basis and staff are recruited through a safe process which includes a DBS (Disclosure Barring Service) check. However, this service is registered in Scotland, therefore all staff must have a PVG (Protection of Vulnerable Groups) check. We have advised the manager that risk assessments must be put in place for all staff until such time individual PVG checks are completed.

(Requirement 2)

A more formal and consistent approach to supervision for staff needs to be developed to enable learning and development and reflective practice. Processes for monitoring staff practice on a regular basis should also be incorporated in to this.

(Recommendation 2)

The provider must ensure that policies and procedures link to Scottish legislation, be dated and demonstrate regular review. As above, we have asked the service to review their bowel/bladder management policy, recruitment policy and supervision policy.

## Requirements

**Number of requirements: 2**

1. The Provider must ensure that each service user has an accurate, up to date personal plan, which sets out how the service user's health, welfare and safety needs are to be met. The personal plan must reflect current individual health and care needs and be reviewed
  - (i) when requested to do so by the service user or their representative or
  - (ii) when there is a significant change in a service user's health, welfare or safety needs and
  - (iii) at least once in every six month period whilst the service user is in receipt of the service.

This is in order to comply with The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI2011/210) Regulation 5 (2) (b) (i) (ii) (iii) Personal Plans.

Timescale: By 30 June 2018.

In making this requirement we have taken the following National Care Standards, Care at home into account - Standard 4 Management and staffing; Standard 3 - Your personal plan.

2. The Provider must ensure that all staff have been recruited following safe recruitment legislation and good practice on recruitment of staff. They must take action to;
- Ensure that where any staff are working without an up to date PVG membership or adequate references that a comprehensive risk assessment is carried out and in place until such time these can be obtained.

This must consider;

- 1) Roles and responsibilities including lone working.
- 2) Previous employment and any gaps.
- 3) Previous PVG membership.
- 4) Systems in place to regularly supervise and monitor staff practice.

This is in order to comply with The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI2011/210) Regulation 9 (1) Fitness of Employees: A provider must not employ any person in the provision of a care service unless that person is fit to be so employed and Scottish Regulators' Strategic Code of practice - made under section 5 of the Regulatory Reform (Scotland) Act 2014.

Timescale for completion: By 11 May 2018.

In making this requirement we have also taken into account the following;

- National care standards, Care at home - Standard 4 Management and staffing.
- "Safer Recruitment Through Better Recruitment" November 2016.

## Recommendations

**Number of recommendations: 2**

1. The provider should ensure that bowel and bladder care is carried out in line with best practice and reflective of individual plans of care. To achieve this, the Provider should take action to;
  - Review training to cover all aspects of bowel/bladder care which is supported by a competency based framework that can demonstrate staff have understood and can safely practice the aspects of care.
  - Ensure supervision and competency of staff practice following induction, and on an on-going basis.
  - Ensure support plans and risk assessments for bowel/bladder care contain robust and comprehensive information.
  - Review the bowel management policy and develop standard operating procedures.
  - Develop a policy and standard operating procedures for bladder/catheter care.

National care standards, Care at home - Standard 7 Keeping well - healthcare.

2. The Provider must ensure that they provide effective supervision to staff to support them to develop and improve through reflective practice. The supervision policy should be reviewed to incorporate;

- the frequency and method of supervision.
- the key principles and expected outcomes.
- core areas of discussions.
- how practice will be supervised, monitored and evaluated.

National Care Standards, Care at home - Standard 4 Management and staffing.

## 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).

## Inspection and grading history

Date	Type	Gradings
24 Mar 2017	Announced (short notice)	Care and support Environment Staffing Management and leadership 6 - Excellent Not assessed 6 - Excellent Not assessed
29 Mar 2016	Announced (short notice)	Care and support Environment Staffing Management and leadership 6 - Excellent Not assessed 5 - Very good 5 - Very good
31 Mar 2014	Announced (short notice)	Care and support Environment Staffing Management and leadership 5 - Very good Not assessed 5 - Very good 4 - Good
3 Nov 2010	Announced	Care and support Environment Staffing Management and leadership 5 - Very good Not assessed Not assessed Not assessed
5 Mar 2010	Announced	Care and support Environment 5 - Very good Not assessed

Date	Type	Gradings	
		Staffing Management and leadership	4 - Good Not assessed
22 Jan 2009	Announced	Care and support Environment Staffing Management and leadership	4 - Good Not assessed 4 - Good 4 - 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](http://www.careinspectorate.com)

## Contact us

Care Inspectorate  
Compass House  
11 Riverside Drive  
Dundee  
DD1 4NY

[enquiries@careinspectorate.com](mailto: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 cànan eile ma nithear iartras.

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 ਵਿੱਚ 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.