

## SPS Social Care Support Service

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Glasgow  
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**Type of inspection:**  
Unannounced

**Completed on:**  
9 January 2020

**Service provided by:**  
SPS Social Care Ltd.

**Service provider number:**  
SP2012011985

**Service no:**  
CS2012313812

## About the service

SPS Social Care Support Service is registered to provide a support service to adults living in their own homes and in the community. The provider is SPS Social Care Ltd.

The service supports people with personal care, domestic chores, cooking, shopping, attending health appointments and being socially active within their local communities. Support provided to people can range from a few hours a week to 24 hours per day.

The service has offices based in Glasgow and Edinburgh, at the time of inspection there were 2 people receiving a service in Edinburgh. The service has a Managing Director, Service Manager, Manager, two office co-ordinators and two teams of support staff.

The service aims and objectives include:

- To value and empower individuals to reach their potential
- To ensure equity of opportunity for all, whilst acknowledging diversity of need.

The service registered with the Care Inspectorate on 24 December 2013.

## What people told us

People experiencing the service said they were happy with the supports received and valued the staff supporting them. We met with one person receiving a service and had a telephone interview with family of the other person in receipt of a service. Comments from people included:

"I appreciate the company of my carers and enjoy their participation in my activities such as gardening, laundry, food preparation, scrabble, trips out and journeys to and from my mothers."

"I would like to thank SPS Agency for their professionalism, the care is beyond the call of duty"

"The care has made an enormous difference, I was in despair before and can now relax, knowing my relative is safe"

## Self assessment

We discussed with the service the Care Inspectorate's new self evaluation framework which was published on 16 September 2019 (see [https://www.careinspectorate.com/images/Self\\_evaluation\\_for\\_improvement\\_-\\_your\\_guide.pdf](https://www.careinspectorate.com/images/Self_evaluation_for_improvement_-_your_guide.pdf))

## From this inspection we graded this service as:

Quality of care and support	3 - Adequate
Quality of staffing	not assessed
Quality of management and leadership	2 - Weak

## What the service does well

People should experience high quality care and support that is responsive to their needs, likes and dislikes.

We found the care and support people received to be adequate, primarily due to stability of the staff group and their in-depth knowledge of those they were supporting. This meant that people were able to develop good relationships with their support workers. We saw that people had warm and engaging relationships with their support workers. People benefited from a consistent staff group and told us they were texted in advance, who would be providing their support. They described staff as reliable and flexible in meeting their needs, a good example of this was one individual who was supported to attend a day centre due to staff adapting their shift pattern.

It was good to see people being encouraged to lead full and active lives for example, people were accompanied on holidays abroad, to maintain contact with family members, to pursue their music interests by attending concerts and music groups, maintaining their own tenancy, gardening growing their own vegetables and cooking with them which people told us they really valued. Activities ensured peoples physical, social and mental well-being needs were addressed.

Staff were able to demonstrate a sound knowledge of the people they were supporting and the techniques and skills required to keep people safe. There was a core training programme for all staff which was up to date which ensured staff were assessed as competent.

People who use services should be confident they will have a well-developed personal plan that sets out how their needs and wishes will be met.

We found that people's personal plans contained information on individuals' wishes with their likes and dislikes; however these had not been updated due to the manager's absence. Due to the consistent staff group, people told us, staff knew them well and adapted their daily support to reflect how they were feeling that day.

To support good leadership and management, people who use services should be confident that the service they use has adopted a culture of continuous improvement, underpinned by effective quality assurance processes. We could see that some quality assurance processes such as support worker observation tools, staff supervision, personal plan reviews had been completed up to the manager's point of absence; annual satisfaction questionnaires were issued to service users to gain their views on the service and the supports they received.

## What the service could do better

It was noted the organisation's mandatory training for staff was provided. Staff told us that further training related to the health conditions of the people they were caring for would be beneficial, for example Dementia with management of Stress and Distress as well as Acquired Brain Injury. This would ensure that any care and support people receive is right for them and reflects good practice guidelines.

**(See Recommendation 1)**

Personal plans although in place were noted to be out of date and did not reflect current needs therefore failed to identify current wishes and outcomes for people. We had previously suggested the service look at introducing one-page profiles to augment personal plans and have again directed them to [www.helensandersonassociates.co.uk](http://www.helensandersonassociates.co.uk) for best practice guidance in this area. In order for people's plans to be effective for both the people using the service and staff providing the support, they need to be dynamic documents and regularly reviewed, evaluated and updated as a person's need change or at least every six months. **(See Requirement 1)**

Overall we found the quality of leadership and management to be weak due to the absence of the manager and lack of governance in the service for example staff supervision, observations of practice had not taken place, personal plans were out of date. The provider had failed to notify the Care Inspectorate of the absence of a manager and had no knowledge of the requirement to notify the Care Inspectorate of any incidents. Annual satisfaction questionnaires had not been reviewed. The quality assurance processes, including self-evaluation, improvement plans and personal plans had not been updated within the last 12 months this had the potential for harm to service users due to lack of relevant information being available to direct staff in providing safe care. **(See Requirement 2)**

## Requirements

### Number of requirements: 2

1. By 31st March 2020 the provider must demonstrate that service users have in place robust personal plans which support them to have good outcomes in relation to physical and mental health. In order to demonstrate this:

- assessment and risk assessments tools must be accurately completed to identify current needs of service users and development of necessary care plans
- care plans are regularly evaluated and reviewed at least six monthly or sooner if needs change to ensure personal plans are "live" dynamic documents to guide staff practice

This is to ensure that care and support is consistent with the Health and Social Care Standards which state "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" (HSCS 1.15).

This is in order to comply with the Social Care and Social Work Improvement Scotland ( Requirements for Care Services) Regulations 2011-Regulations 5 (2)(a)(b)(c)(d), Personal Plans.

2. By 31st March 2020 the provider must ensure that the quality assurance systems and processes for the service are carried out effectively to show good governance that contributes to high quality care. In order to demonstrate this:

- an interim manager must be appointed to oversee the service
- routine and regular monitoring of the quality of care and support, staffing and management and leadership must include analysis that identifies themes, trends and root cause and action taken on follow-up to effect change or improvement that is needed
- develop an improvement plan for the service that shows actions taken by the provider in response to

quality audits and what people using the service, relatives, and external professionals have identified as areas for improvement. The improvement plan must be made available to key people using the service

This is to ensure care and support is consistent with the Health and Social Care Standards, which state that "I use a service that is well led and managed" (HSCS4.23). It is also necessary to comply with the Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011-Regulation 3 "A provider of a care service shall provide the service in a manner which promotes quality and safety and respects the independence of service users, and affords them choice in the way which the service is provided to them"

## Recommendations

**Number of recommendations: 1**

1. The provider should ensure that staff have the necessary skills, knowledge and competency to carry out their roles and responsibilities. In order to achieve this:

Staff should receive relevant person specific training in the conditions that people are living with, which should include but not limited to Acquired Brain Injury and Stress and Distress in Dementia.

This is to ensure that people receive care and support that is consistent with the Health and Social Care Standards which states "I experience high quality care and support based on relevant guidance and best practice" (HSCS) 4.11

## 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).

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

## Previous requirements

There are no outstanding requirements.

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

### Previous recommendations

#### Recommendation 1

The service should develop quality assurance processes by carrying out observed practice around care delivery. This would help ensure that staff are working competently and delivering effective support.

National Care Standards Care at Home, Standard 4: Management and Staffing.

**This recommendation was made on 17 October 2017.**

#### Action taken on previous recommendation

We found evidence that observations of practice have occurred to ensure that staff are working competently and delivering effective support. This recommendation has been implemented.

#### Recommendation 2

The service should ensure that staff are fully trained in areas where they provide support. This training should include learning around acquired brain injury and mental health.

National Care Standards Care at Home, Standard 4: Management and Staffing.

**This recommendation was made on 17 October 2017.**

#### Action taken on previous recommendation

We found evidence that staff received training commensurate to their role and, particularly, in the areas of acquired brain injury and mental health. This recommendation has been implemented.

#### Recommendation 3

Staff appraisal and team meetings must be delivered in accordance with the provider's policy and procedures and relevant best practice guidance in order to ensure staff are supported to discuss and develop their roles and deliver effective care as part of a team.

Scottish Social Services Council - Codes of Practice for Social Service Workers and Employers, 2016.

National Care Standards Housing Support Services, Standard 3: Management and Staffing Arrangements.

**This recommendation was made on 17 October 2017.**

#### Action taken on previous recommendation

We found evidence that team meetings, group supervisions, individual supervisions and appraisals had occurred and with regular frequency. This recommendation has been implemented.

## Inspection and grading history

Date	Type	Gradings	
1 Oct 2018	Unannounced	Care and support Environment Staffing Management and leadership	5 - Very good Not assessed 5 - Very good 5 - Very good
14 Sep 2017	Announced (short notice)	Care and support Environment Staffing Management and leadership	4 - Good Not assessed 4 - Good 3 - Adequate
20 Jul 2016	Unannounced	Care and support Environment Staffing Management and leadership	4 - Good Not assessed 4 - Good 3 - Adequate
14 Dec 2015	Unannounced	Care and support Environment Staffing Management and leadership	4 - Good Not assessed 4 - Good 4 - Good
3 Mar 2015	Unannounced	Care and support Environment Staffing Management and leadership	4 - Good Not assessed 4 - Good 4 - Good

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