

## SRS Care Solutions South Lanarkshire Support Service

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**Type of inspection:**  
Unannounced

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**Service provided by:**  
SRS Care Solutions Limited

**Service provider number:**  
SP2016012703

**Service no:**  
CS2019376025

## About the service

SRS Care Solutions South Lanarkshire was registered with the Care Inspectorate in February 2020. The service is registered to provide a support service to older people, adults with a learning and/or physical disability, and adults with autism spectrum disorder in their own homes and in the community.

At the time of the inspection the service was being provided to 54 individuals, in South Lanarkshire

People receive a service in their own homes daily. This can be up to several visits per day and 365 days a year.

The aim of the service is to provide the most personalised and bespoke care solutions to our service users.

This was a focused inspection to evaluate how well people were being supported during the Covid-19 pandemic. This inspection was carried out by two inspectors from the Care Inspectorate.

## What people told us

Due to Covid-19 restrictions we were unable to carry out home visits to people's homes to ask their opinions or observe staff practice. As an alternative we contacted people using the service or their families/carers to find out their views on the care provided.

We obtained the views of four people who received a service and five people who were relatives or representatives of people receiving a service.

People told us they were happy with the quality of the care received and the staff who were supporting them. People told us staff treated them with respect and people confirmed that they knew who to speak to if they had any problems.

Those using the service advised that they got the care and support that they needed and felt that care was not rushed.

People were aware of their personal plans and had a copy in their home, along with care diaries where staff recorded their visits.

People's main concern was around staffing, particularly continuity of staff. People appreciated that the service did what they could to try and provide continuity but were aware of current staffing crisis in care settings impacted on this.

Although people told us that on occasions staff could be late all said that they got their agreed time of support and did not feel rushed by staff.

## 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 care and support during the COVID-19 pandemic?	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 assessed how well the service supported people's wellbeing and found that people were experiencing a good level of care and support. We made this decision following a review of a range of evidence including discussions with those using the service and staff.

People using the service, including relatives, who contributed to the inspection, were generally happy with the care and support received. Everyone felt that staff had enough time to carry out the support they required, and that care was never rushed.

We heard from some people that trusting relationships had been developed with the people who supported them or their family member. For several people this meant that they had consistency and familiarity from their care team.

However, others advised that there had been periods where frequent changes had been made to staff supporting them. People felt that this had impacted on the quality of care being delivered. The service recognised that this was an issue and were actively recruiting additional permanent staff to address this.

Those using the service and their relatives had agreed times for care to be delivered. However, both those using the service and staff advised that there were times that staff arrived late, and people were not always informed of this. The service was able to monitor staffs timekeeping and tried to take action to alert people if staff were going to be late. However, this was not always possible especially out with office hours.

Through effective assessment and care planning we were able to clearly see that peoples identified needs and outcomes were met. This included effective management of identified risks. This was confirmed by people we spoke with who were fully involved in the development and review of their care package.

If needed staff would contact a person's medical professional on their behalf. This helped to ensure people obtained the right medical interventions quickly.

Medication was generally well managed which helped to ensure that people received their medications as intended and ensured people's health was maintained or improved. Medication audits were undertaken; however, it would be beneficial to carry these out more frequently in order to address any potential issues more quickly.

The service was proactive in contacting Social Work where they felt that a person's package needed reviewed due to changes in need. This helped to ensure that the care and support people received remained appropriate.

## How good is our care and support during the COVID-19 pandemic?

4 - Good

### 7.2 Infection prevention and control practices are safe for people experiencing care and staff.

Our focus in this inspection area was to ensure that infection prevention and control practices were safe for both people experiencing care and staff. We found the performance of the service in relation to this quality indicator was good.

At the time of the inspection, there were no Covid-19 cases within the service, and no one was self-isolating.

Staff worked in geographical areas to limit risk of transmission between people's homes. Staff were being tested weekly and this provided reassurance about safe practice during the pandemic.

When we interviewed staff, we found that they had a good knowledge of Covid-19 and up to date guidance on infection prevention and control. Staff were clear of how to safely put on, take off and dispose of PPE. All staff had received training, including refresher training in relation to infection prevention and control, this included specific information on Covid-19. They informed us that they felt confident to perform their tasks in a safe manner following this training.

The management team were currently rolling out observational checks on staff to ensure that they were using PPE properly when on duty. This would allow management to take any necessary actions to address staff practice. This would help to ensure that staff practices were reflective of current guidance and help to limit the spread of infection and keep people safe.

Those using the service told us that staff always attended their home with the correct PPE and disposed of this appropriately. This helped to ensure that people were safe.

Staff told us that they had access to supplies of PPE which were stored at the office base.

### 7.3 Leadership and staffing arrangements are responsive to the changing needs of people experiencing care.

Our focus in this area was to ensure leadership and staffing arrangements were responsive to the changing needs of people experiencing care during the Covid-19 pandemic. We found the performance of the service in relation to this quality indicator was good.

We found that people were supported by an organisation and service that are well led and managed. The management team had a good oversight of the service delivery, staff training, care planning and reviews.

People should have confidence in staff because they are trained, competent and skilled, are able to reflect on their practice and follow their professional and organisational codes. Staff we spoke to during inspection told us they had access to a good training package balanced between online and face-to-face sessions. They also informed us that management were available, approachable, and supportive when contacted for assistance or advice.

The service had a staffing contingency plan if staff were absent because of illness, self-isolation or exclusion following a positive COVID-19 test. Appropriate arrangements were in place to ensure that where agency staff were being used checks were in place to reduce the risk of cross infection.

Staff were aware of and participated in local Covid-19 testing arrangements, and the service maintained a log of weekly test results. This helped to ensure the safety of those using the service.

## 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

For people experiencing care to have confidence in the reliability of the service, the provider should ensure: visits are provided at the agreed times all changes to visits times are communicated to the person and their relative/carer where appropriate.

**This area for improvement was made on 23 September 2021.**

#### Action taken since then

The majority of people spoken with advised that they were informed of changes to staff visits this included staff being late. There were still some occasions where people were not informed of staff being late, but this appeared to mainly related to times when care coordinators were not on shift.

The service continued to review how any changes to visiting time could be communicated with those using the service in a timeously manner and will keep this under review.

#### Previous area for improvement 2

To ensure people experiencing care can have confidence that staff will support them to take their medication in line with their prescription, the provider should ensure: staff follow an agreed care plan on the administration of medication staff maintain an accurate record of all medication administered all missed medication is clearly recorded with an accompanying explanation all staff have been trained in medication administration and are familiar with the service policy/procedure medication administration records are regularly audited to identify and take action in response to issues.

**This area for improvement was made on 23 September 2021.**

#### Action taken since then

From the evidence presented we could see that people were being supported to take their medication where prescribed. Where there were issues, these were appropriately recorded and actions taken as needed to address these.

staff training on medication management continued to be provided and updated as necessary.

This area for improvement is met.

## 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).

## Detailed evaluations

How well do we support people's wellbeing?	4 - Good
1.1 People experience compassion, dignity and respect	4 - Good
1.2 People get the most out of life	4 - Good
1.3 People's health and wellbeing benefits from their care and support	4 - Good

How good is our care and support during the COVID-19 pandemic?	4 - Good
7.2 Infection prevention and control practices are safe for people experiencing care and staff	4 - Good
7.3 Leadership and staffing arrangements are responsive to the changing needs of people experiencing care	4 - Good



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