

SSP Care and Support Services Housing Support Service

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Type of inspection:
Announced (short notice)

Completed on:
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Service provided by:
SSP Recruitment Solutions Limited

Service provider number:
SP2017012991

Service no:
CS2019377707

About the service

SSP Care and Support Services is registered by the Care Inspectorate to provide a Housing Support/Care at Home service.

It provides a range of care at home services, from domestic help to assistance with personal tasks.

Their mission statement states "SSP strives to provide excellent quality care and support services in clients' homes, care homes and or other health and social care settings. In our service provision, we promote clients' independence, choice, dignity and privacy. The Health and Social Care Standards are at the heart of our work. How clients feel about our service provision is important to us. The service is adaptable and sensitive to the needs of individuals and will encourage people to make the most of their lives, offering person centred care and support. We will work collaboratively with other agencies to improve the range and quality of services for people with care and support needs.

We aim to provide good management by supporting our staff, working closely with our clients, relevant individuals and organisations, ensuring a reliable and responsive service.

We are committed to investing in, and regularly reviewing, the training and development needs of all staff, and will evaluate the quality and effectiveness of service delivery to assess achievement and room for improvement."

At time of inspection the service was supporting 13 people.

About the inspection

This was an short notice announced inspection which took place on 7 January, 8 January and 9 January 2025. The inspection was carried out by one inspector from the Care Inspectorate. 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 since the last inspection.

In making our evaluations of the service we:

- spoke with and obtained feedback from 12 people using the service and six of their families
- spoke with staff and management
- observed practice and daily life
- reviewed documents.

Key messages

- Caring and respectful relationships between people and staff were observed
- Staff completed training that was relevant to their roles
- Many people were supported by a small, consistent staff team,
- Risk assessments and care plans were required to improve to ensure they accurately reflected people's care and support
- Improvement had been made in the management of people's medication.

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?	5 - Very Good
How well is our care and support planned?	3 - Adequate

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 made an evaluation of good for this key question, as several important strengths, taken together, clearly outweighed areas for improvement. The strengths identified had a positive impact on people.

Quality Indicator: 1.3 People's health and wellbeing benefits from their care and support.

During our inspection we saw caring and respectful relationships between people and staff. One person told us "the carers are amazing, empowering and support me to live independently since my stroke", where a relative told us "they are fantastic, we couldn't manage without them."

People were supported by a small consistent staff team which supported meaningful relationships being established. One person told us "I have the same 3 girls and they are all lovely, they know exactly what I like and what needs done, I couldn't cope without them", whilst a relative told us "we have our set of carers and it's good to see the same faces, they really know us both well."

Everyone who received the service and their relatives told us that communication from carers and the manager were good. One person told us "they all communicate well and I love how happy and joyful they all are when they come into my home." Staff knew what was expected of them to meet people's care needs and people felt staff were well trained and knowledgeable. The manager had good links with local health and social care professionals and liaised with them promptly when any concerns were identified.

People had access to copy of their personal plan and some people told us this was important to them. The service was in the process of transitioning and implementing a new care planning system which plans to work better for people. We plan to address this later under key question 5 "How well is our care and support planned?"

People should be confident that medication policy and practices are well managed to ensure their health and wellbeing benefits. There was a clear medication policy and procedure in place and staff practice we observed was safe in the managing and recording of medication being administered.

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.

Quality Indicator 3.3 Staffing arrangements are right and staff work well together

Staff we observed appeared to be clear within their role and what was expected of them during visits. All of the staff we spoke with told us they loved their job, working with people and demonstrated good values. Staff delivered support with kindness. They interacted well with people, building trusting relationships and people told us that staff supporting them were compassionate and respectful. Staff were flexible and worked well together to benefit people using the service.

Staff completed training that was relevant to their roles. This included training that was specific to understanding the needs of people being supported and cared for. All staff spoke highly about the induction process they had completed. The manager was described as very supportive and going above and beyond.

Training records were kept which evidenced that training was up-to-date. People experienced care and support from well trained staff who were knowledgeable about their care needs.

Staff carried out their duties in a way that demonstrated an understanding of the training they had received. Conversations with staff also evidenced their knowledge in supporting and caring for people. Most staff spoke positively of their work and told us they were proud to work in the service. This demonstrated a commitment to both the service and the people they were supporting and caring for. Arrangements for the one-to-one supervision of staff were in place.

The service worked hard to support staff's wellbeing, and promote a sense of team work, this was done through regular team meetings and team building events. Which made team working positive.

Many people were supported by a small, consistent staff team, who knew them well. Planning of support visits were effectively co-ordinated.

How well is our care and support planned?

3 - Adequate

We evaluated this key question overall as adequate. An evaluation of adequate applies where there are some strengths, but these just outweigh positive experiences and outcomes for people may be reduced significantly because key areas of performance needed to improve

Quality Indicator: 5.1 Assessment and personal planning reflects people's outcomes and wishes

People should expect consistent care and support. Whilst there were personal plans in some people's homes they were not of a consistent quality and some plans did not make proper provision for people's care and support needs or detail clearly how these or outcomes would be met. Whilst staff knew people well, this made it difficult for staff to deliver care and support effectively. Documentation and records must be accurate and sufficiently detailed, and those we viewed did not always reflect the care provided or provide pertinent information. This was partly because some personal plans were not updated when people's needs or circumstances changed. Personal plans should be reviewed on a regular planned basis and updated when there are any changes to a person's care or support needs. People could not be fully confident that staff were providing current and accurate support using the personal plans in place. (See Requirement 1).

While people experiencing care, together with their relatives, were consulted and involved in the development and review of the personal plan initially, this practice had not always continued. The service recognised that personal plans needed to improve for people and were in the process of transition to a new online system which would include provision for future planning. This would mean people are helped to live well right to the end of their life by having their preferences and future wishes clearly detailed in their personal plan.

There were risk assessments within the personal plans we sampled however, some risk assessments would benefit from being more personalised and reflective of people's current care needs. The new system should address this. This would further assist the service to identify and address individual risks for each person and ensure staff were directed in delivering care safely.

Reviews had been completed for most people. There was oversight of this which helped staff plan these meetings with people. However, review minutes and actions were not reflected or updated in the personal plans ensuring people are supported with their current needs and wishes.

Requirements

1. By 7 April 2025, the provider must improve the quality of recording within care plans to ensure that people receive care and support that is right for them.

To do this, the provider must, at a minimum ensure:

- a) each person has a detailed support plan which reflects a person centred and outcome focused approach directing staff on how to meet people's care and support needs.
- b) support plans contain accurate and up-to-date individualised risk assessments, which direct staff on current or potential risks and risk management strategies to minimise risks identified.
- c) future needs are anticipated, documented and reviewed.
- d) support plans are regularly reviewed and updated with involvement from people, relatives and advocates (if required).

This is to comply with Regulation 5(2)(b) (Personal plans) of The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/210)

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

'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)

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, the service should ensure that each service user has completed risk assessments that accurately reflects their care needs. These should then be reviewed at least every six months to ensure that they are accurate.

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

'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 area for improvement was made on 6 February 2024.

Action taken since then

Whilst we saw improvements on the reviews of people's care needs, the actions from the reviews were not always reflected in people's care plans.

Please see information under key question 5.

This area for improvement is now covered by a requirement.

Previous area for improvement 2

To support people to keep well and safe, the provider should ensure that all medication being administered, is recorded following best practice.

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

'Any treatment or intervention that I experience is safe and effective.' (HSCS 1.24)

This area for improvement was made on 6 February 2024.

Action taken since then

People could be assured that medication would be administered in a way that is right for them and in line with prescribing instructions. The service had a clear system in place and staff were suitably trained.

Therefore this area for improvement has been Met.

Previous area for improvement 3

To ensure the service remains responsive to people's care and support. The quality assurance process must be robust and demonstrate written evidence of a quality assurance system being used.

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

"I benefit from a culture of continuous improvement, with the organisation having robust and transparent quality assurance processes." (HSCS 4.19)

This area for improvement was made on 6 February 2024.

Action taken since then

Whilst we saw improvements in the quality assurance process, it wasn't robust and some further development would be needed following the transition over to the new electronic recording system.

Therefore this area for improvement has been repeated.

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?	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?	3 - Adequate
5.1 Assessment and personal planning reflects people's outcomes and wishes	3 - Adequate

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