

## SRS Care Solutions (Scotland) Ltd Support Service

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Unannounced

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**Service provided by:**  
SRS Care Solutions (Scotland) Ltd

**Service provider number:**  
SP2024000276

**Service no:**  
CS2024000348

## About the service

SRS Care Solutions Scotland Ltd (referred to hereafter as SRS) provides support to older people, adults with a learning disability/physical disability and adults with autism spectrum disorder in their own homes in the community.

The service operates from a main base in Hawick with a satellite office in West Lothian.

At the time of inspection SRS were supporting 311 people, across the Scottish Borders and West Lothian.

## About the inspection

This was an unannounced inspection of the service which took place between 23 June and 3 July 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 registration information, information submitted by the service and intelligence gathered since registration. In making our evaluations of the service we:

- spoke with 23 people using the service and their families/friends. We also gave the opportunity for family/friends, health professionals and staff to complete an electronic questionnaire of which we received 75 responses.
- we talked with members of staff and the management teams
- observed staff practice and daily life
- reviewed a range of documents.

## Key messages

- Warm, respectful, and person-centred care is consistently delivered, with staff forming trusting relationships that empower individuals to achieve meaningful outcomes.
- Continuity of care is ensured through a familiar and consistent staff team, which reassures people and their families.
- Leadership is proactive and responsive, fostering a culture of learning, accountability, and continuous improvement.
- Competency checks should be regularly undertaken to strengthen consistency across all staff teams to support ongoing development and safe practice.
- Managers should continue to strengthen their approach to personal planning, ensuring all plans capture detailed information about people's preferences, routines, and what matters most to them.

## 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?	5 - Very Good
How good is our leadership?	5 - Very Good
How good is our staff team?	4 - Good
How well is our care and support planned?	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?

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.

People consistently experienced compassionate care and meaningful support as a result of the warm, encouraging relationships between staff and those they supported. These positive connections not only promoted a respectful and cheerful atmosphere but also empowered individuals to achieve their personal goals and outcomes. People we spoke with praised staff for their consistently upbeat and respectful manner, with one person sharing, 'Carers are cheerful, supportive and I really appreciate their help'.

People benefitted from being supported by a small, consistent team of staff members whom they knew well. This continuity fostered a sense of reassurance for both individuals and their families, enabling the development of strong, trusting relationships. One person highlighted the importance of this by saying, 'I like that I know who is coming in'.

Relatives were able to use an online application which offered real time updates in relation to care, support and wellbeing. Relatives told us they found this information extremely valuable. 'I have access to the online app which keeps me up to date with mum's care provision. I think this is a great system; it gives me comfort and reassurance that her day has gone well'.

Support records we reviewed contained information that guided staff in their roles. Daily notes were not only descriptive but connected to individuals identified outcomes, reinforcing a consistent, goal-oriented approach to care. Importantly, people had access to their own support plans, promoting transparency and upholding their rights around the information held about them. This empowered individuals to stay informed and actively engaged in decisions about their support.

Staff demonstrated a clear understanding of their responsibilities in facilitating access to healthcare for the people they support. They were attentive to changes in individuals' health and acted swiftly to share relevant information with the appropriate professionals. This proactive approach ensured timely interventions and reflected a strong commitment to safeguarding people's well-being.

People received appropriate support with their medication when needed, ensuring that prescriptions were followed safely and effectively. The provider had robust systems in place, including accurate and accessible records, to evidence best practice in medication management. Staff involved in this area were suitably trained, and their competency was regularly assessed helping to promote confidence in the safety and quality of the care being delivered.

## How good is our leadership?

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.

The management team demonstrated a strong commitment to delivering high-quality care and support, while also prioritising the well-being and working conditions of staff. This dual focus helped cultivate a positive and motivated workforce. Overall, staff members expressed feeling well supported by their

managers, highlighting the impact of effective leadership on their job satisfaction and ongoing dedication to their roles in providing compassionate, person-centred care.

The manager demonstrated an ongoing commitment to quality assurance through regular checks and monthly audits. These systems were effective in identifying areas for reflection and growth, enabling informed service development.

The management approach was notably proactive and responsive, with suggestions raised during inspection promptly acknowledged and addressed. Senior staff actively sought real-time feedback, highlighting a shared eagerness to drive improvement.

The service development plan outlined a clear and purposeful direction for ongoing improvement. Regular staff meetings served as valuable forums for discussion and feedback, with quality firmly on the agenda. This consistent focus confirmed an embedded culture of continuous improvement, where every team member played an active role in driving service quality.

The manager was actively working in partnership with the electronic system provider to develop online service questionnaires, aimed at capturing meaningful feedback directly from people using the service at any time. This initiative demonstrated a forward-thinking approach to engagement and listening. Once implemented, we recommended that the analysed findings from these questionnaires be integrated into the continuous improvement plan ensuring that feedback not only informs practice but also drives ongoing service development in a structured and responsive way.

### How good is our staff team?

### 4 - Good

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

The service followed safe recruitment practices, providing reassurance that appropriate procedures were in place to protect the well-being of people supported. A structured induction programme ensured that new staff were well-prepared for their roles, equipping them with the knowledge and confidence needed to deliver quality care. Notably, the inclusion of shadowing opportunities allowed new employees to be gradually introduced to individuals they would support promoting familiarity and a person-centred approach from the outset.

Staffing arrangements were effective, with visit times planned to provide flexibility and consistency. People reported no concerns with punctuality and described visits as unhurried, supportive, and personable. Missed visits were rare, and any incidents prompted reflective learning to prevent recurrence.

Staff showed a good understanding of the Health and Social Care Standards, grounding their work in the principles of person-centred care, respect, and compassion. Feedback from people receiving support and their families clearly reflected these values in action, highlighting how individuals were treated in ways that were personal, meaningful, and right for them.

The provider demonstrated a strong commitment to workforce development, ensuring staff received a comprehensive mix of online and in-person training aligned with the diverse needs of the individuals they support.

As part of a proactive approach, the organisation was in the process of developing and implementing their own in-house accredited eLearning platform. The system has been designed not only to improve accessibility and consistency of training but also to enhance managerial oversight. It will enable real-time monitoring of staff compliance with mandatory training requirements and support timely interventions where gaps have been identified. We will follow up on the implementation of this system at the next inspection.

Whilst staff competency checks had been taking place, these were not consistently completed across all staff teams. The manager acknowledged this during inspection and was taking steps to address short falls. The quality assurance system supported ensuring that opportunities to evaluate staff competencies and identify learning needs are planned and scheduled. This reflected a commitment to strengthening workforce support and enhancing consistency in care delivery.

## How well is our care and support planned?

4 - Good

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

Support plans sampled often included thoughtful details about people's personalities, interests, and what mattered most to them offering valuable insight into the individual behind the care. However, the level of information about people's preferences for support varied, with some plans lacking the same depth or consistency. After discussing this with the manager, there was clear recognition that further work is required to ensure all plans reflect a consistently high standard. Strengthening this aspect will help reinforce a truly person-centred approach. **(See area for improvement one)**.

Reviews of people's needs were conducted regularly, ensuring timely and responsive support. These were held at least every six months, or sooner if there was a change in an individual's health needs. Review minutes clearly documented the discussions held and actions agreed upon, providing a strong record of collaborative decision-making. The reviews were evaluative in nature, with a clear focus on whether the support being provided was helping individuals achieve their desired outcomes.

Personal plans included future care planning where people had expressed a wish to have these discussions, plans clearly documented individuals' wishes around resuscitation, with DNACPR (Do Not Attempt Cardiopulmonary Resuscitation) decisions recorded where these aligned with the person's preferences. Additionally, relevant contact details for health professionals and family members were included, ensuring that the right people could be contacted promptly when issues arose. This careful planning reflected a respectful, proactive approach that prioritised individual choice and ensured swift, coordinated responses in changing circumstances.

## Areas for improvement

1. To reassure people that their support plan contains the most current and relevant information, the service should continue to strengthen its approach to personal planning—ensuring that individuals' preferences for support are clearly captured and regularly updated.

To achieve this, the service should ensure:

- **Support plans are reviewed regularly** to reflect any changes in people's needs, choices, or circumstances

- **People are actively involved** in discussions about their support and how they prefer it to be delivered
- **Staff record preferences in clear, meaningful detail** — for example, how people like to be supported with daily routines, communication, meals, or social engagement
- **Audit and quality assurance processes** include checks on the consistency and personalisation of support planning across all teams
- **Training and guidance** are provided to staff on how to capture and document person-centred preferences effectively

This is to ensure care and support is consistent with the Health and Social Care Standards (HSCS) 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).

“My needs, as agreed in my personal plan, are fully met, and my wishes and choices are respected”. (HSCS 1.23)

## 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?	5 - Very Good
1.3 People's health and wellbeing benefits from their care and support	5 - Very Good
How good is our leadership?	5 - Very Good
2.2 Quality assurance and improvement is led well	5 - Very Good
How good is our staff team?	4 - Good
3.3 Staffing arrangements are right and staff work well together	4 - Good
How well is our care and support planned?	4 - Good
5.1 Assessment and personal planning reflects people's outcomes and wishes	4 - Good



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