



Inspection Report on

Cara Caring Services Limited

**28-32
Commercial Street
Cwmbran
NP44 1AE**

Date Inspection Completed

25/10/2023

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About Cara Caring Services Limited

Type of care provided	Domiciliary Support Service
Registered Provider	Cara Caring Services Limited
Language of the service	English
Previous Care Inspectorate Wales inspection	[30 March 2023]
Does this service promote Welsh language and culture?	This service is working towards providing an 'Active Offer' of the Welsh language and demonstrates a significant effort to promoting the use of the Welsh language and culture.

Summary

People are happy with the care and support they receive from the service; they speak highly of the care staff and the consistency of their support. We found that people experience positive wellbeing outcomes as a result of the care and support provided. The service is working towards the active offer. People's language preferences are considered prior to commencement of service, and information relating to the service has been translated into the Welsh Language.

Care staff told us they are well supported by the leadership and management in the service. We saw that the manager and Responsible Individual (RI) have implemented a range of different documents and processes since our last inspection in order to increase the oversight and governance of the service. As a result, we found improved systems to support the delivery of care and support.

At our last inspection we issued Priority Action Notices in areas where the service was not achieving the required regulatory requirements. At this inspection we have found that the service has made significant improvements in these areas, and all Priority Action Notices have been achieved.

Well-being

People are happy with the care and support they receive; they speak very highly of care staff and the service. People are supported to do the things that matter to them. The service ensures that people choose how their care and support is delivered. People are consulted to develop packages of care that are personalised, reflecting people's preferences and wellbeing goals. People are treated with dignity and respect by their care staff. People have access to the information they need to make informed decisions about their care and support. The service has clear policies and procedures to support this. People are involved in providing feedback about their experiences of care and support and contribute to the review and development of their personal plans. We found the service ensures that people's feedback is considered, and that changes are made to the delivery of their care and support as a result of this. People are able to raise their concerns in a safe and supportive environment.

The service works well with other agencies to ensure that care staff are enabled to support people to achieve their wellbeing goals. We saw compliments and praise given to the service for their support in increasing a person's mobility. The service works with a local church and foodbanks developing links with their local community. Recently, the service has joined a scheme called 'Bridging the gap' to support carers to access respite support for their loved ones.

Travel time is now planned to support care staff to safely deliver people's care and support. The management are working to ensure that call runs are organised geographically to reduce the impact of travel time and traffic. There are some instances where care staff are late, but people tell us that they always phone to let them know. People are mostly satisfied with their call times, but sometimes calls are later than they would like. The management is working to ensure that new speed restrictions are not having a negative impact on people's care and support delivery, and most care calls are delivered to the full duration.

Care and Support

People benefit from the care and support they receive and are supported to be as independent as possible. Since the last inspection there are improved processes in place to support the quality and consistency of care and support delivery. We found that there have been changes in the documentation and planning processes to support the development of personal plans. People's information is captured prior to the commencement of service and this information supports the development of person centred plans.

People's personal plans include thorough social histories which enable care staff to understand the people's preferences, wants, and needs. Personal plans contain clear guidance to support care staff to deliver care and support in a consistent way. People told us they *"can't ask for better"* when describing the care and support they receive.

Risks and specialist needs are considered in the planning process. We found that people's risk assessments contained clear measures to reduce and manage risks, and that these are reflected in people's personal plans. People's preferences for how they want to be supported are included in detailed routines for each of their calls. The service support people to set and work towards their personal wellbeing outcomes, we saw that people were supported to increase their mobility as a result of consistent approaches by care staff. People's plans and outcomes are monitored and reviewed frequently to capture progress. We found good recording of daily notes which comment on people's health and wellbeing as well as the tasks completed by care staff. Where people are supported with their medication, we found adequate recording and safe handling processes being followed by care staff.

Professionals in health and social care are complimentary about the quality of the service, we found evidence of multi-agency collaboration. Care staff speak fondly about the people they support, and value their roles. People are happy about the consistency of support they receive and the relationships they have formed with their care staff. One person told us *"The care I have received has been excellent throughout the time I have been with the company."* Since the last inspection, travel time is now planned at the service. People are mostly kept informed about their calls, and notified of delays, although some people told us that sometimes they have to call the office when there is a longer delay. Most people are happy with their call times, and the service is continuing to work on their planning to reduce the impact of traffic and travel on people's call times and support hours.

Leadership and Management

There are clear governance arrangements in place to support the smooth running of the service. The RI and manager work closely together to develop and implement processes to support the oversight of the service. The RI completes all regulatory activities as part of their role; quality of care reports are thorough and demonstrate feedback gathered from people and care staff, as well as an overview of patterns and trends. Since the last inspection, the service has increased its number of supervisory and administrative positions, which has had a positive impact on auditing and reviewing processes. There are clear processes in place to support the continuous development of the service. Information about the service is being translated into Welsh language to support people to access support through the medium of Welsh if this is their preference.

There are enough staff to support people effectively, and the service has updated its processes for recruiting care staff. We found that personnel records are in line with regulatory requirements, and care staff are suitably recruited, trained, and supported to carry out their duties. Care staff receive regular opportunities for learning and development. The service works with local charities and the health board to source training opportunities for care staff, as well as the use of an online training data base which enables staff to enhance their skills and knowledge in different areas. The service benefits from an in house trainer who supports care staff to complete their training and induction in line with Social Care Wales (SCW) the workforce regulator. Most care staff speak positively about their induction period; however, some care staff and people told us they felt a longer induction period would benefit some care staff who are new to the sector. The service are working to further develop the skills of the trainer to enhance the learning and development experience.

Care staff receive support and supervision sessions with the supervisors and manager frequently. We saw that the documentation has been updated to encourage care staff to reflect on their practice. Care staff told us the management are *“very supportive.”* Care staff have the opportunity to attend team meetings within the wider team, however some care staff told us they are not always able to attend, we are assured by the management that they will address this to ensure further opportunities for support and feedback are made available to care staff.

Summary of Non-Compliance

Status	What each means
New	This non-compliance was identified at this inspection.
Reviewed	Compliance was reviewed at this inspection and was not achieved. The target date for compliance is in the future and will be tested at next inspection.
Not Achieved	Compliance was tested at this inspection and was not achieved.
Achieved	Compliance was tested at this inspection and was achieved.

We respond to non-compliance with regulations where poor outcomes for people, and / or risk to people's well-being are identified by issuing Priority Action Notice (s).

The provider must take immediate steps to address this and make improvements. Where providers fail to take priority action by the target date we may escalate the matter to an Improvement and Enforcement Panel.

Priority Action Notice(s)

Regulation	Summary	Status
N/A	No non-compliance of this type was identified at this inspection	N/A
21	The service provider has not ensured that care and support is provided in a way which protects, promotes and maintains the safety and well-being of individuals.	Achieved
6	Service providers have not made clear arrangements for the oversight and governance of the service in order to establish, develop and embed a culture which ensures that the best possible outcomes are achieved for individuals using the service and to meet the requirements of the Regulations.	Achieved
41	The service does not currently allocate travel time as part of the scheduled visits	Achieved

Where we find non-compliance with regulations but no immediate or significant risk for people using the service is identified we highlight these as Areas for Improvement.

We expect the provider to take action to rectify this and we will follow this up at the next inspection. Where the provider has failed to make the necessary improvements we will escalate the matter by issuing a Priority Action Notice.

Area(s) for Improvement		
Regulation	Summary	Status
N/A	No non-compliance of this type was identified at this inspection	N/A

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