



# Inspection Report on

**Vale Senior Care Ltd.**

**Upper Office  
5 Corporation Buildings  
Back Row  
Denbigh  
LL16 3TE**

## **Date Inspection Completed**

23/01/2024

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## About Vale Senior Care Ltd.

Type of care provided	Domiciliary Support Service
Registered Provider	Vale Senior Care Limited
Language of the service	English
Previous Care Inspectorate Wales inspection	25 January 2022
Does this service promote Welsh language and culture?	This service does not provide an 'Active Offer' of the Welsh language and does not demonstrate a significant effort to promoting the use of the Welsh language and culture.

### Summary

Vale Senior Care delivers person centred care which is valued by people and their relatives. Care staff know people well and treat them with dignity and respect. The manager and responsible individual (RI) has a 'hands on' approach, maintaining regular contact with people and staff. They arrange additional events which people can attend, giving them an opportunity to socialise with each other.

Care staff are happy in their roles and told us they feel well supported. However, the formal records of supervisions and appraisals do not fully meet regulation. Supervision should take place every three months and all staff should receive an annual appraisal.

Some documentation is inconsistent and incomplete. People cannot be confident any changes in their care needs are accurately recorded. At the last inspection there were three areas for improvement, two of these have been resolved. Shortfalls have been identified in staff supervision and appraisals at this inspection. This is an area for improvement.

## Well-being

People can make decisions about their day-to day lives and are consulted about the care they receive. People told us care staff visit at times which suit them and assist them to do the things they want to do. We saw care staff plan the mornings schedule collaboratively with people.

The manager and RI organise social events for people to attend, assisting them to engage in their local community. Everyone we spoke to; people, staff, relatives, and professionals told us how much they value these events, and that the manager goes “*above and beyond*”. We were told a ‘Christmas fry up’ was held. People who attended enjoyed a cooked breakfast and the opportunity to socialise with each other. Further events are planned throughout the year. One person told us the manager has taken them for lunch, and out for short walks to improve their mobility, which supports their well-being.

People feel safe receiving a service. Care staff are trained in safeguarding, and they know how to report concerns. People told us they are confident speaking to staff, including the manager and RI, and feel sure any concerns would be taken seriously.

Care staff deliver the care and support people need. One person told us how they valued the emotional support they receive from staff and said they “*would be lost without them.*” Whilst the people we spoke to are happy with the service, we found documentation was not consistently reviewed. Personal plans are not always reviewed every three months in line with regulations. This means they may not always contain the most up to date information. Care and office staff do not receive supervision regularly, in line with regulation.

The service does not currently provide a Welsh active offer. The statement of purpose and written guide are not available in the Welsh language. There are two members of staff who are able to speak fluent Welsh.

## Care and Support

People receive support from care staff who know them well. People and professionals told us care staff have focused time to spend on their visits to ensure all their care and support needs are met. People can request the same care staff, and this is provided. Care staff make person centred records of their visits which describe how the person is feeling each day and the support provided. People told us they feel well supported. One person told us “*Anything I ask they help with it if they can*”. One relative told us they had experienced many care services over the years and this one was, “*without doubt, the best*”.

Care staff work in partnership with people to ensure they are supported to maintain their independence as far as possible. We saw care staff support people to plan the time they spend with them and what they want to achieve. The interactions we observed were relaxed and friendly. We saw the service supports a range of ages, and care and support is tailored to individual needs. Care staff are responsive to people’s emotional needs. One person told us they enjoy chatting to the care staff and “*look forward to them coming.*”

There have been some improvements to the arrangements to medicines management since the last inspection. Care staff are trained in medication administration to ensure they know how to deliver this safely. The manager returns any unused medication to the pharmacy as required. We found some medication records are incomplete and inconsistent. This remains an area for improvement, and we expect the provider to take action.

Care staff receive training in infection control to ensure they can keep people safe from risk of infection. Care staff have a cleaning rota to follow for people who require this support. The service provider ensures there is a good supply of personal protective equipment (PPE), and care staff visit the office to stock up on this as required.

## Leadership and Management

To provide oversight of the service, the RI completes visits every three months and ensures they speak to people and staff for their views. They review personal plans, and check any equipment used is in full working order. We saw records of these visits and any actions required. Care staff feel supported by the manager and RI for the service. They were described as “*determined*” and staff told us they go “*above and beyond*”. The provider has robust policies in place which are reviewed regularly to ensure up to date guidance is being followed. People receive a contract which details the fees for the service. This area for improvement has been met.

The provider makes investment in the service, considering ways to support their staff so the service runs smoothly. There is an electric bike available for staff to use. The manager and RI have also created a welcoming outdoor balcony area in the office where staff can take a break between visits.

The provider completes appropriate recruitment checks for all members of staff. Care staff receive regular training, including specialist training to ensure they can meet people’s individual needs. This area for improvement has been met. Many care staff are registered with Social Care Wales. Care staff have not received supervision consistently every three months in line with regulations. Some staff had not received an annual appraisal every year. While no immediate action is required, this is an area for improvement and we expect the provider to take action.

The manager ensures care staff have adequate time to complete their visits. One relative told us care staff always stay the full amount of time and are focused on the individual throughout their visit. Care staff have travel time between their visits, included on their rotas.

### Summary of Non-Compliance

Status	What each means
<b>New</b>	This non-compliance was identified at this inspection.
<b>Reviewed</b>	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.
<b>Not Achieved</b>	Compliance was tested at this inspection and was not achieved.
<b>Achieved</b>	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

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
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66	Not all staff are registered with Social Care Wales, or have regular supervisions and appraisals. Not all personal plans are reviewed in line with statutory guidance. Ensure that all staff are registered with Social Care Wales and have supervision every three months and an appraisal annually. Ensure personal plans are reviewed every 3 months.	New
58	The service provider must ensure the recording and auditing of medicines is in line with current national guidelines.	Not Achieved
36	The service provider must ensure all staff are up-to-date with their training and must provide specialist training as is appropriate to the work they perform.	Achieved
20	The service provider must ensure that every service agreement includes information in relation to top up and late payment fees, details of the care and support to be provided and any other services.	Achieved



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