



Inspection Report on

Q Care Powys

**Coniston House
Temple Street
Llandrindod Wells
LD1 5HG**

Date Inspection Completed

17/03/2023

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About Q Care Powys

Type of care provided	Domiciliary Support Service
Registered Provider	Q Care Limited
Registered places	0
Language of the service	English
Previous Care Inspectorate Wales inspection	This is the first inspection of the service since registration under The Regulation and Inspection Social Care (Wales) Act 2016.
Does this service provide the Welsh Language active offer?	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 Q Care Powys. They have good relationships with care staff who are kind and considerate. People are involved in making decisions about how they want their support needs met. Care staff work hard to make sure people's personal preferences are met.

Personal plans and risk assessments are in place for care staff to follow. Training opportunities are available to give them the skills and knowledge needed to support people in the right way. Care staff feel supported by the management team and wider organisation.

Quality assurance processes are in place so any issues identified can be addressed quickly and improvements made to benefit people using and working at the service. The responsible individual (RI) carries out their responsibilities and a full review of service provision is carried out every six months.

Well-being

People have choice over how they want their care and support delivered. Their individual circumstances, needs and preferences are considered. People told us this includes what is important to them. Information is available about what the service offers. This includes a Statement of Purpose and guide to the service which are both available in Welsh if people want them. People we spoke with were happy with the service and told us they had no reason to raise any concerns. However, if they did, they knew how to and felt they would get a good response.

People's physical and emotional care needs are considered by care staff who are kind and respectful. Personal plans are detailed for care staff to follow. People spoke highly of the care staff supporting them. We saw good, respectful relationships between people. People know in advance who is coming to support them at each visit. Support from health professionals is sought in a timely way when needed.

Processes are in place to keep people as safe as possible. Risk assessments give care staff information on how identified risks should be managed. Care staff have safeguarding training and regular support from the management team. Audits of safeguarding issues and concerns take place so lessons can be learnt to improve practice. Processes are in place to make sure people have an induction into their role and are assessed as competent before providing care and support to people. This includes medication management.

Care and Support

People are happy with the support given to them by Q Care Powys. They told us care staff have never failed to turn up for a call and if they are running late for any reason, they contact people to let them know. They mostly have the same team of care workers which helps them to build good relationships. Comments received from people and their representatives include “*staff are respectful*”, “*Q Care are great*”, and “*staff are more like friends to me*”.

People are involved in assessing their care needs, developing, and agreeing personal plans and reviewing these to make sure their personal outcomes are being met. Documentation seen was detailed for care staff to follow. Observation of staff practice takes place whilst they are providing people with care and support. The views of people are sought at the time to make sure they are happy with how the care worker supports them. Reviews of personal plans take place regularly so people can give their views on the service. The reviewing officer and other office staff regularly visit people and talk with them to make sure the service is meeting their needs. This was confirmed by people we spoke with.

People are supported to remain as healthy as they can be. Personal plans and risk assessments are detailed for staff to follow. They told us updates are communicated to them quickly. If they report any concerns about people’s care needs to the office, these are acted on quickly. Care staff have medication training and their competency to administer medication is regularly assessed. Regular audits make sure any issues are picked up and addressed quickly.

Measures are in place to safeguard individuals receiving care and support. Staff know who to contact if they are concerned about a person’s wellbeing. They have safeguarding training and policies are in place to help guide their practice. Risk assessments are in place where a risk has been identified.

Environment

The service is run from an office which is accessible to care staff and people using the service. There are rooms which can be used for training, team meetings and private one to one meetings. All records are held securely with access to relevant personnel only.

Leadership and Management

The service is run in line with the Statement of Purpose which tells people what they can expect if they are supported by Q Care. The guide also gives people information including how they can raise any concerns they may have about the service. Both documents are available in Welsh and English. People told us they are confident any issues raised with the agency will be addressed quickly.

People are supported by care staff who are recruited in line with the regulations. Care staff receive an induction, training and their competency to carry out their role is assessed before they can start providing people with care and support. This helps to keep people as safe as possible. Staff spoken with including office-based staff all feel supported in their role. Comments include *"I really enjoy my job"*, *"I continue to learn daily"* and *"I feel very well supported"*. Care staff told us they have regular supervision and observation of their practice. They said training opportunities are good and they can ask if they want additional training to make sure they have the skills needed to meet people's care and support needs. However, we saw some gaps in the training records particularly around food hygiene and infection control. The manager assured us this is being addressed with training being built into the care staff rota giving them time to attend the training.

The manager demonstrates a commitment to ensuring people receive good care and support and care staff feel well supported and happy in their role. They have good oversight of the services they manage. The manager told us they feel very well supported by the management team and receive regular supervision from the RI.

Quality assurance systems are in place to make sure people have good quality care. This includes spot checks of care staff practice as well as audits of records including care files, recruitment, training, concerns and safeguarding to ensure improvements can be made in a timely way. The manager completes monthly reviews of the service which are shared with the responsible individual to ensure oversight of the service.

The RI visits the office regularly to provide staff with support. They have oversight of all aspects of the service including safeguarding and any concerns. They told us they have regular contact with people using the service and staff. They plan to put a system in place to evidence this engagement as part of their RI responsibilities. We saw reviews of the quality of the service are undertaken regularly. We were told the latest report, due to be published will evidence the views of stakeholders are sought as part of this process.

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

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

Date Published 21/04/2023