



Inspection Report on

South Wales Branch My Care My Home

**Room R4 Alder Suite
Mamhilad Park Estate
Pontypool
NP4 0HZ**

Date Inspection Completed

29/06/2023

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About South Wales Branch My Care My Home

Type of care provided	Domiciliary Support Service
Registered Provider	My Care My Home Limited
Registered places	0
Language of the service	English
Previous Care Inspectorate Wales inspection	1 March 2022
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 receive a good quality and reliable service. The service works hard to ensure individuals are provided with continuity of care. People know care workers well and have developed effective relationships with them. Care workers are kind, compassionate and are appropriately supported. Since the last inspection, a comprehensive process for review has been put in place and has been sustained. Improvements in the support provided to care workers including the frequency of supervision, competency checks and team meetings have been made. There is appropriate oversight of the service and management arrangements are effective and strong.

Well-being

People have a voice, are listened to and their preferences are sought and respected. Personal plans written together with people receiving a service and their representatives are in place. This helps to support people to have increased control over their daily lives. A personalised approach is taken, and people's preferences are acknowledged and understood. What matters to individuals and how they wish their support to be provided is documented. The provision of care and support is provided in keeping with people's preferences. People's goals are identified and recorded in their personal plans. Formal reviews take place at the required regulatory frequencies and people are routinely consulted during reviews. Changes identified result in personal plans being updated promptly. Care and support documentation is up-to-date and reflects the outcomes and aspirations of people receiving the service.

People have developed good relationships with care workers. One representative told us *"We are more than happy with the service"*. Another stated *"the staff are angels, they are incredible"*.

People are supported to be as healthy as possible. People have contact with other health and social care professionals when required. Care staff know individuals well and promptly identify any changes in the person. There are electronic systems in place to ensure if care workers have any concerns, these can be reported quickly and efficiently to management. Referrals to other professionals takes place where appropriate.

The service understands the importance of ensuring people are appropriately protected. There is an effective and up-to-date adult safeguarding policy available at the service. Care workers receive training in adult safeguarding and are confident in their responsibility to identify and report any concerns. Where adult safeguarding concerns are identified, the service promptly ensures referrals to the relevant local authority safeguarding team are made.

Care and Support

People receive reliable, good quality support which assists them to achieve their personal goals and outcomes. People are consulted about the support they receive and personal plans available are comprehensive and detailed, include the individual's perspective, contain appropriate information on their social history, and detail people's preferences about how they want their support provided. The service now predominately operates using an electronic system. However, paper files remain available at the office and written documentation is kept appropriately updated. Since the last inspection improvements in the frequency of reviews have been put in place and reviews are routinely completed on a three-monthly basis which meets regulation. People are consulted during the review and their feedback is valued and listened to. Identification of risk is in place and identified risks are recorded on risk assessments. The area for improvement identified at the last inspection has been fully met.

People are complimentary about the support provided by care workers and have confidence the service strives to provide appropriate levels of care worker continuity. Effective systems are in place to ensure people receive the support they require. There is an electronic system to record the times care workers call and there are effective systems in place to alert office staff if a call does not take place in a timely manner. There is also an out of hours system in place which monitors calls outside of office hours. Care workers provide support to ensure people take their medication as prescribed. |There is an electronic system which records when staff have provided support with medication. The manager has regular oversight of this system and completes regular audits which identifies what is working well and where improvements are required.

Leadership and Management

Effective arrangements for the oversight of the service are in place. A recent quality visit report completed by the Responsible Individual (RI) was provided. Information contained within the quality visit is comprehensive and appropriately identifies what is working well, alongside identification of areas for further development. Audits of care files take place as part of quality checks and care files are consistent and contain the relevant information required. Files are well organised, and information is easily accessible.

The service has an up-to-date statement of purpose (SOP) which details the range and nature of the support available to people. The SOP is provided to people on commencement of the service and people sign to confirm they have received it. Information contained within the SOP is reflective of the service provided.

People receive support from care workers who are safely recruited, trained, and supervised. We looked at care workers personnel files which are comprehensive. Safe recruitment practices take place. Care workers provide detailed employment histories, proof of identity and employment references. Disclosure and barring service checks (DBS) are in place, prior to the commencement of employment and these are updated at the required frequency. Care workers have access to an induction programme, which is in keeping with guidance provided by Social Care Wales (SCW), the social care regulator. There is commitment to ensuring all care workers undertake the qualifications required to enable them to register with SCW. This is a requirement in order to formally recognise care staff as part of the social care workforce. Care workers receive regular supervision and have time with their line manager to support their ongoing development and improvement. Assessment of care worker competence takes place frequently and supports the service provider to have confidence staff are suitably competent to carry out their role. Care workers receive appropriate training and refresher training is also available when required. There are appropriate systems in place to ensure training is undertaken at the required intervals, and training is routinely discussed during staff supervision. Team meetings now take place at regular intervals. Staff are supported and encouraged to attend and to share their views which helps to promote the ongoing development and improvement of the service.

Care workers are positive about their employment. Most rated their employment as “*excellent*” or “*good*”. The service has spent time strengthening the support available to care workers which has resulted in improved staff morale. Staff demonstrate commitment to providing a high-quality service to the people they support.

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
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N/A	No non-compliance of this type was identified at this inspection	N/A
16	Reviews are not being carried out at frequencies which meet the minimum regulatory requirements of three monthly.	Achieved
36	There is insufficient evidence to support staff are receiving regular supervision at the required regulatory frequencies of three monthly. Additionally, for new staff within their six month probationary period there was no evidence three supervisions sessions are provided as detailed in the statement of purpose.	Achieved
80	Important documentation is not made available, or updated at the required intervals to ensure care workers have access to the most up-to-date information. Identification of risks are not always recorded in risk assessments. The quality of care review needs to accurately reflect where improvements are required and how these will be achieved. There needs to be detailed analysis of audits completed to help to identify the reasons why the issues have arisen and what has been put in place to resolve the issues.	Achieved

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