

Inspection Report on

Care Cymru Cardiff

Care Cymru Longcross Court Newport Road Cardiff CF24 0AD

Date Inspection Completed

16/02/2024

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About Care Cymru Cardiff

Type of care provided	Domiciliary Support Service
Registered Provider	Care Cymru Services Ltd
Registered places	0
Language of the service	English
Previous Care Inspectorate Wales inspection	1 February 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

Since the last inspection, a suitable new manager has been appointed. People using the service and care staff describe the manager as being, helpful, supportive, and approachable. The responsible individual (RI) is actively involved and maintains good oversight of the service. There are effective assurance systems in place to evaluate the quality of the service and keep well-informed.

People we spoke with are happy with the service they receive from Care Cymru. They feel that the service is meeting their personal outcomes and are confident to contact the office with any concerns. People describe the care staff as *"kind, caring and always respectful"*. They receive regular care staff that know them well, and they value the continuity of care.

People are encouraged to contribute to the development of their personal plan to share their views and preferences. People benefit from care staff that are well trained and supported in their role.

Well-being

People are listened to. Information about the service is available which supports people to make choices about the care they receive. This helps to understand the range of support available at the service and assists with decision making. People or their representatives are involved in their personal plans to ensure their views are known on how they would like to receive support. The service provider seeks the views of people to check the quality of the service and uses this feedback to improve.

People are safe and protected. Risks to people's health and safety are assessed and managed. They receive care and support from care staff who have been safely recruited, kept well informed, and receive consistent support. People are protected from harm by care staff who know how to raise concerns. People and their representatives know how to raise a complaint and have confidence in this being dealt with by the service. Accident/incidents, safeguarding and complaints are appropriately reported and investigated by the service for lessons to be learnt. Care staff are given sufficient supplies of personal protective equipment (PPE) to minimise the risk of infection. Policies and procedures promote safe practice and are kept up to date.

People are treated with dignity and respect and receive kind and caring support from care staff they know well. People are complimentary about the service they receive which is reliable and flexible. Care staff receive comprehensive training and people told us that they understand their needs and wants.

People can be assured that there is effective leadership and oversight of the service. The RI regularly meets with the management team and visits the office to check if people are happy with the service. There are good quality assurance audits in place to closely monitor the performance of the service. However, increased oversight is needed to ensure care staff consistently record in the care notes to reflect the support people receive. People told us that they receive regular calls but times can vary on occasions, the manager confirmed that sufficient travel time will be allocated for care staff between calls.

Care and Support

People can access written information regarding the service provided. There is a statement of purpose available which informs people what they can expect from the service, which is being updated. A service user guide is available, which is written in a way that is accessible to people who use the service. This includes relevant information regarding how people can raise a concern if they need to, and how they are responded to. People told us they are confident that any concerns would be acted upon.

The service values the importance of seeking people's views. We found people and their representatives are involved in their personal plan and review processes to ensure their needs and preferences are known and respected. All care information is kept up to date and care staff are informed of any changes. Care staff have good access to people's care documentation, so they are aware of the level of support required. People we spoke with told us that the quality of care is good and they feel safe using the service.

There are arrangements in place to ensure people receive the right medication. The medication policy is detailed which is important for staff to follow. All care staff receive medication training and their competency is regularly assessed. The services electronic medication administration recording chart (Emar) alerts care workers if medication needs to be administered. We looked at a selection of these and found people receive their medication as prescribed, but we noted instances when care staff are not accurately recording. The manager gave assurances this will be actioned. Regular audits are taking place to identify any patterns or trends, but any actions needed should be clearly recorded and followed through.

Care staff are knowledgeable about the people in their care and empathic in their approach. People told us that they receive the same care staff and have developed *"Strong relationships with them"*. A person told us *"I love the care staff and look forward to seeing them*". When there are new staff, they are introduced, which they felt was important to make the person feel comfortable.

Leadership and Management

Since the last inspection, there is a newly appointed manager and office staff. The manager receives good support from the responsible individual (RI). People's views are valued and they are actively consulted with to look at what is going well and any changes needed. The care staff described the manager as, *"Fantastic, one of the best and nothing is too much trouble" and "The manager always welcomes us to visit the office and offers us support."*

There is effective leadership and oversight at the service. The RI is actively involved and regularly visits the service to check people are happy with the quality of care and looks for ways to improve. The management team know people well and demonstrates commitment to providing a good quality service. The RI produces reports which evaluates the quality and safety of the service, whilst identifying improvements and celebrating their successes. Policies and procedures promote safe practice and are kept up to date.

People are supported by a staff team who are safely recruited and feel valued and supported in their role. There are robust recruitment checks in place which are followed to ensure care staff are suitably checked prior to the commencement of their employment. Although care staff receive contracts for their role, they should be given the option of zero-hour contract or an alternative contractual arrangement which is regularly reviewed with the staff. Care staff receive comprehensive training through face to face, and a written assessment. The provider has created a well-equipped training area. The care staff described the training as *"Helpful to understand their role and people's needs."*. Care staff are mentored until they feel confident and competent to work on their own. Staff receive regular supervision, spot checks and an annual appraisal of their work. These methods of monitoring and supporting staff performance are overseen by the RI, and care staff are encouraged to engage in reflective practice and discuss their personal development. The care staff told us, *"We can tell the manager anything personal or work related and they are always available to help"*. The manager gave assurance that they will ensure care staff are referred to Social Care Wales the workforce regulator when eligible and in a timely way.

People are protected from abuse and neglect. All staff are required to complete safeguarding training which helps them to identify different types of abuse and the actions to take. The safeguarding policy requires revision in accordance with current guidance, the manager gave assurance that this would be addressed. People using the service and care staff told us they can contact the office anytime, including the out of hours which they find responsive to resolve any problems.

Monitoring systems and care records need to be strengthened to ensure people can be confident their care and support will be delivered as planned. We note an electronic call monitoring system is used for the timing of care calls; however, travel time needs to be sufficient to enable care staff to travel between calls. There needs to be increased auditing of the duration of people's calls and care staff to consistently record the reasons for leaving calls earlier than expected. People told us that when calls are late, they are not always informed. We noted some inconsistencies and gaps in daily care records whilst care staff are getting to know the new electronic care system. The RI gave assurance these matters will be addressed.

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. Th 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

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