



## Inspection Report on

**Phoenix Homecare and Support Ltd (Powys)**

**Phoenix Homecare and Support Ltd (Powys North)  
Unit 3, Grooms Enterprise Park  
Pool Road  
Newtown  
SY16 1DL**

## **Date Inspection Completed**

22/01/2024

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## About Phoenix Homecare and Support Ltd (Powys)

Type of care provided	Domiciliary Support Service
Registered Provider	Phoenix Homecare and Support Limited
Registered places	0
Language of the service	English
Previous Care Inspectorate Wales inspection	18 March 2021
Does this service promote Welsh language and culture?	The service provides an 'Active Offer' of the Welsh language. It anticipates, identifies and meets the Welsh language and cultural needs of people who use, or may use, the service.

### Summary

People are happy with the care and support they receive from Phoenix Homecare and Support. Care staff are safely recruited, well trained, and supported. They work effectively in collaboration with the local authority and health care professionals to meet a range of care and support needs. This enables people to continue living independently in their own homes. People have personal plans and risk assessments in place.

The service is well managed and overseen. Communication and record keeping is good, evidencing support delivered. There are good processes in place to monitor the quality and effectiveness of the service. Policies and procedures ensure people and care staff have access to important information.

The Responsible Individual (RI) is present in the service and conducts their role as required, providing support to the team. The provider is dedicated to growing the service to meet the care needs of the wider community.

## Well-being

People receive a service which is agreed with them and tailored to meet their needs and wishes. People told us they have built trusting relationships with the staff who support them and feel confident they will continue to have their needs met by Phoenix. We spoke to one person who said *“We have no complaints at all, care staff are very good, we are very comfortable with them and couldn’t fault them at all.”* People are consulted about their views and participate in the processes of care planning and review. We were told communication is good and there is always someone to speak with. One person told us *“Honestly they are brilliant, very good at keeping us up to date.”* People told us care staff are mostly on time for their care calls and feel enough time is allocated to have care delivered without rushing. The provider considers the Welsh language needs of people and has processes in place to promote the use of the Welsh language and culture.

People are supported to maintain all areas of their well-being. They are supported to access services from external professionals and the provider ensures any issues around people’s health is addressed quickly. The provider works with district nurses, occupational therapists, and social services to ensure people receive a consistent approach to their care and support needs.

The provider has systems in place to ensure people are protected from abuse and neglect. Care staff complete safeguarding training and there are policies in place to support this knowledge and promote the use of safeguarding processes. The provider is proactive in reporting any concerns and works with the local safeguarding board to keep people safe. We saw evidence of the provider taking appropriate action to keep the people they support as safe as they can be.

The provider collaborates with people they support, families, representatives, and other stakeholders, to share knowledge and promote positive working relationships.

## Care and Support

People can be assured Phoenix Homecare and Support are able to deliver care and support which meets their needs and wishes. This is because the provider conducts a detailed initial assessment to determine how the person wants to be supported, considering their individual needs and any associated risks. People's dependency and care needs are assessed on a regular basis to make sure information remains correct and people are receiving the right care. Care records are detailed, and person centred, providing information about people's life history and what is important to them now. Personal plans inform care staff how to meet the person's needs and consider their personal outcomes. We saw care records are reviewed on a regular basis, some with increased frequency as people's needs change. People told us they are consulted about their care records and involved in the review process. One person told us *"I am very satisfied with Phoenix, they do everything I ask,"* another said *"We really do like Phoenix, they go above and beyond."* People or their representative can access care records and daily notes with consent. We found daily records of care to be detailed and well written, considering the persons overall well-being in addition to tasks which need to be completed.

People are supported with their health and well-being. We saw records within care files where medical advice has been sought to meet a care need, and the provider told us they have a good relationship with the local GP and other health professionals. The electronic planning system used by the provider enables alerts to be seen in real time, so care staff can log areas which need to be addressed and hand over pertinent information to other members of the team.

The provider ensures people using the service can express their views and opinions. This is carried out through quarterly quality assurance questionnaires, reviews, and conversations with the RI as part of their regulatory visits. A quality assurance report is created and summarises the results from questionnaires and feedback given. The provider details within this report, what issues were of importance to people and how they would be taking action.

The provider has an infection prevention and control policy in place and care staff must carry out associated training. Care staff have access to personal, protective equipment (PPE) to reduce the risk of infection to other staff and people being supported. Spot checks are carried out which consider staff competence in this area.

## Leadership and Management

People receive a service which is organised and well led. The manager and the RI have effective oversight of the service which is strengthened by the electronic systems in place. There is a commitment to improving and developing the service which is shown by the audits and governance processes carried out to identify areas for development. The RI considers this within their regulatory visits, from which actions are set. The quality of care review considers the overall performance of the service within the last 6 months. The provider identifies where they are performing well and how this can be evidenced, and what areas they want to improve. We discussed how a more detailed analysis of incidents, accidents, and other occurrences within the service could be presented in the quality of care review. People have access to important information about the service and processes such as the complaints procedure as this is detailed with the statement of purpose and guide to the service. Policies and procedures are informative and support staff to carry out their role.

People are supported by care staff who are experienced and well supported. The provider has shown a commitment to supporting staff well-being through access to an employee assistance programme, help with financial requirements of providing a domiciliary service and by having processes in place which keep staff safe. Care staff told us they have worked for the company for a long time and enjoy their roles. We looked at recruitment records for staff and found all the pre-employment checks are carried out and in place before people begin working at the service. This includes disclosure and barring service checks (DBS) and reference requests. Care staff complete an in-depth induction including shadow shifts of experienced staff. Care staff are supported to register with Social Care Wales, the workforce regulator.

Care staff are required to carry out training both online and face-to-face. The provider is proud of the training they deliver and invite people using the service and their representatives to take part. This supports people and families to have a better understanding of their care needs and provides an additional safeguard for people in a contingency situation. The provider works collaboratively with other professionals which benefits the organisation and other people in the community and wider sector. The provider is committed to growing the organisation and providing a high-quality service to their local community.

### 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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N/A	No non-compliance of this type was identified at this inspection	N/A
79	Policies and procedures require review.	Achieved
19	The guide does not include all the required information.	Achieved
73	The responsible individuals visit reports do not evidence the service is monitored in line with the regulation.	Achieved



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**Date Published** 16/02/2024