Care Inspectorate Wales

Care Standards Act 2000

Inspection Report

Gofal Ystwyth Care

ABERYSTWYTH

Type of Inspection – Full
Date(s) of inspection – Wednesday, 24 April 2019
Date of publication – Wednesday, 3rd July 2019
Summary

About the service

The service is owned by Gofal Ystwyth Care Ltd and registered with Care Inspectorate Wales (CIW) to provide a domiciliary care service for people aged eighteen and over. Gofal Ystwyth Care has an appointed responsible individual (RI) on behalf of the company who is also overseeing the management of the service and registered with Social Care Wales. The agency office is located in the centre of Aberystwyth.

What type of inspection was carried out?

This was the first inspection of the service following registration under The Regulation and Inspection of Social Care (Wales) Act (RISCA) 2016. CIW undertook a full inspection as part of our inspection programme. The unannounced inspection visit was carried out between 10:30 am and 4:45 pm on the 24 April 2019.

Information for this report was gathered from the following sources:
- We contacted two people by telephone who use the service.
- Discussions with the (RI) and one care coordinator.
- We spoke with the relatives of two people who use the service.
- A sample of records in relation to four people who use the service.
- A sample of staff records in relation to recruitment, supervision and training.
- We looked at the quality assurance systems and read questionnaires received from people who receive a service.
- Consideration of information held by CIW about the service, and records of notifiable events.
- We looked at a range of documents relating to the running of the service which included; the Statement of Purpose, service user guide, staff handbook and incident reports.

What does the service do well?

This was the first inspection of the service following registration under RISCA. Therefore, this area was not considered at inspection.

What has improved since the last inspection?

This was the first inspection of the service following registration under RISCA.

What needs to be done to improve the service?

There were no non-compliance issues identified during this inspection.

The following areas of improvement were identified, which the registered persons may wish to consider to further improve and develop practice:
- Care workers should sign the personal plans as understood and read.
- Personal plans should record the preferred gender of care worker providing the care.
- Personal plans could be further developed including individual communication records.
- The recruitment documentation needs further work – records of interviews should be made and retained.
- The medication policy could be further developed following guidance from the National Institute for Health and Care Excellence (NICE).
- Service user handbook needs reviewing and updating.
Overall, we found that people using the service are treated with respect and dignity. People have opportunities to exercise their rights to choice.

People’s diverse needs are recognised and catered for. The files of four people using the service were viewed; each contained an updated personal plan which identified their individual needs. Copies of the agency’s risk assessments were in each file inspected. Personal plans contained information relating to people’s communication needs, including what was important to them. The needs of people using the service were monitored and reviewed on a regular basis in line with legislation. We saw written evidence of reviews being conducted, with people using the service and relatives telling us they were involved in the process. This evidence shows that people receive their assessed care and are involved in decisions in relation to the care they receive.

People develop relationships with care workers and feel recognised and valued. We were told by people using the service that when the main carer is unavailable, then efforts were made to ensure that the same relief carer was available. This is good for the person using the service because staff are aware of the person’s needs and functioning of the environment in which they live. We were told by people receiving the service and their relatives that there were no missed calls and carers were on time. One relative told us the care workers are “very committed” and “carers have adjusted to the changing needs of my parent – brilliant all round”. A relative praised the management for ensuring the cultural needs of the person was respected which enhanced the quality of life of the individual receiving the service. This shows that staff and people work well together and have good relationships with each other and peoples’ individual needs and preferences are understood and anticipated.

We found that people who use the service felt safe. This is because people were safeguarded through the agency’s policies and procedures. Policies were in place to protect both people using the service and care workers. These included health and safety, finance and medication. Reference to secondary dispensing by relatives and care workers obligations and responsibilities in respect of secondary dispensing should be included in the medication policy. People told us that they would contact the RI if they had any concerns, however, they told us they had no cause to complain. People benefit from a service were the registered persons are promoting a culture of safety.

People receive appropriate care. Care and support plans were in place with personal plans produced by the agency reflecting the assessments made and received by the local authority. We saw evidence of co working with the health and social care professionals for example physiotherapists and district nurses. We also saw evidence of detailed routines for people with complex needs. Whilst the plans were very informative they could be improved to provide further detail with regards to personal preferences in line with the services philosophy of providing a person centred approach to care. We saw the RI had a communication book to record any telephone messages or office discussions relating to people using the service, for example a person's change in medication or change in call times. The service promotes confidentiality which could be further improved by implementing individual communication sheets for each service user.
and include these in their personal records. These areas of improvement were discussed with the RI who agreed to review the personal plans and amend to include personal preferences in relation to support and care provided. Reference to personal choice of gender of care workers would also enhance people’s quality of wellbeing, dignity and choice. People we spoke with told us they were happy with the care provided by care workers stating they were “very good” and “couldn’t have wished for better”. One person told us the RI is “very good at sorting things out – physio, wheelchairs and the hoist and care workers turn up on time and stay the full time”. People receive the right care at the right time but improvements are needed to ensure records are person centred and reflect, as far as possible, how the individuals wish their care to be delivered.

People have their individual identities and cultures recognised. The majority of people receiving a service are first language English. We saw evidence in personal plans that the individuals preferred language is clearly recorded and Welsh speaking care workers are allocated to first language Welsh speaking service users. A relative we spoke with confirmed this and commented how their relative had told them they liked having a Welsh speaking care worker. A Welsh speaking care worker will assist the RI on pre assessments should a preference for Welsh speaking staff be made in the initial referral. Translation facilities are available to translate personal plans. In addition, the RI told us that both the statement of purpose and service user’s handbook were being translated into Welsh. This shows that people using the agency receive a service in their preferred language if this is what they want.
People are cared for by motivated staff who are appreciated and want to make a positive difference to people’s lives.

People feel confident in the care they receive because staff are competent and confident in meeting their particular needs. On checking a sample of staff records, we found the recruitment process was followed in line with the company’s policy and procedures. References were sought and disclosure and barring service (DBS) checks were completed prior to appointment. The RI told us interviews take place, however no records were maintained of the interview discussions and rationale for appointing or declining an applicant. We advised the RI that they should have a rigorous selection and vetting systems in place to enable them to make decisions on the appointment or refusal of staff as stated in Regulation 35, The Regulation Services (Service Providers and Responsible Individuals)(Wales) Regulations 2017. We saw from the staff training records that staff received mandatory and specific training to enable them to care for people in a knowledgeable and safe manner. Staff received induction training and we saw evidence of training certificates verifying attendance. In house training was provided in addition to external accredited training being arranged. Care workers sign up for the Quality Care Framework (QCF) with a target of all staff being qualified at level 2 by 2020. Training attended by staff included manual handling – All Wales passport, health and safety in Social Care and medication. Formal staff supervision was provided and the RI and/or care coordinator were also available on a daily basis for support and guidance. The impact for people using the service is that their needs are being met by competent and confident staff.

People are cared for by familiar staff as turnover is low, sickness rates are low and there is no use of agency staff. Staff retention has been stable with recruitment of staff being an ongoing process. People spoken with said that they liked their care workers and that the care and support given was friendly and relaxed. The RI told us efforts are made to ensure each person using the service have regular care workers. Priority is given to people who require specific tasks at specific times which can impact on which care worker attends. Examples of specific tasks included supporting with administration of medication at prescribed times. One person told us they had “a good little team of five or six carers who come regularly – it’s nice to have the same ones’. Relatives told us: “The carers are the same this only changes when carers are away or ill.” and “couldn’t have wished for better – they are very well turned out”. People receive the right care at the right time by familiar staff.

People with complex needs receive skilful care. The RI demonstrated their knowledge of the people using the service and told us they ensured staff were fully conversant with the social and health needs of the people they support. This was achieved by sharing all relevant information, including personal plans and risk assessments for people using the service. The RI told us care workers read the documentation however there is no recorded evidence that they are aware of the support plans. Recommendations were made to include a signature sheet for confirmation as being understood and read by the care workers. New care workers are required to work alongside (shadow) experienced
care workers for a week prior to provided care. New, unexperienced staff are scheduled to shadow experienced staff for a longer period until competent and confident in their work. People receive appropriate care as assessed.
Quality Of Leadership and Management

Overall, people using the service can be confident that they will be cared for by a well-managed service. The RI is currently managing the service and is registered with Social Care Wales. The agency was registered under RISCA in August 2018 and commenced providing services in September 2018 with the agency supporting 45 people in the Aberystwyth area. The RI demonstrated their knowledge of the needs of people using the service. As the service develops and number of referrals increase arrangements would be made to appoint a manager and additional care coordinators to assist with the development of the service delivery and management of the agency.

People receive support from a service which sets clear aims that are focussed on people’s needs. We viewed the recent Statement of Purpose (reviewed August 2018) which was submitted with the services application for re registration under RISCA. The service also has a service user’s handbook. Both documents explain to people what services they can expect to receive which helps them to make an informed decision about whether the service can meet their needs. The service user's handbook requires updating to include reference to the development of the electronic call monitoring system, guidelines for specific tasks and complaints. People are aware of the care, support and facilities available to them.

The agency has systems in place for the protection of both people using the service and staff, which includes health and safety procedures and risk assessments. Individual risk assessments were devised for the protection of people using the service and staff. We saw evidence of risk assessments on people’s files. The service has an electronic system for ensuring there are no missed calls. Staff are required to digitally “log in” on arrival to a service users home and departure which is linked to the office computer system. An out of office on call service is available for staff and people using the service should an emergency arise during evenings and weekends. The RI will conduct announced and unannounced spot visits during the working week. Any equipment used by care workers are checked during these visits. The impact for people using the service is that they can feel safe and assured that the service is being monitored.

The service has been operational since September 2018 and the RI has commenced the process of conducting a quality assurance review of this service. This includes obtaining the views of people using the service, their relatives and professionals. We looked at returned questionnaires from people using the service. Overall the comments were positive. The RI told us they reviewed the responses and acted accordingly to comments received. For example one person commented “The previous care company provided a list of carers for the week which we found helpful – it’s not essential but it’s nice to know who is coming”; in response to this the responsible individual now provides a weekly rota. Another questionnaire referred to requesting the same carers. The RI told us efforts were made to ensure continuity of carers, however priority has to be given to people who require visits at specific times each day in line with their personal plans. Other comments included:

“I have no complaints at all and I’m very pleased with the carers and the service. I think
they are all doing a good job”.
“Happy with the care provided to … (relative) – also so helpful to be able to contact you at any time”.
We value the impeccable service provided and the standards of good practice upheld by every individual who visits us at home”.
“More than happy with the service provided – many thanks”.

Quality of The Environment

This is not applicable to domiciliary care/supported living.

The office is located in the centre of Aberystwyth in shared office accommodation. We found the office had sufficient storage and work space in addition to facilities for training and meetings. Access to the office are suitable for people with mobility issues. The premises were secure with additional security measures put in place by the RI.
How we inspect and report on services

We conduct two types of inspection; baseline and focused. Both consider the experience of people using services.

- **Baseline inspections** assess whether the registration of a service is justified and whether the conditions of registration are appropriate. For most services, we carry out these inspections every three years. Exceptions are registered child minders, out of school care, sessional care, crèches and open access provision, which are every four years.

  At these inspections we check whether the service has a clear, effective Statement of Purpose and whether the service delivers on the commitments set out in its Statement of Purpose. In assessing whether registration is justified inspectors check that the service can demonstrate a history of compliance with regulations.

- **Focused inspections** consider the experience of people using services and we will look at compliance with regulations when poor outcomes for people using services are identified. We carry out these inspections in between baseline inspections. Focused inspections will always consider the quality of life of people using services and may look at other areas.

Baseline and focused inspections may be scheduled or carried out in response to concerns.

Inspectors use a variety of methods to gather information during inspections. These may include;

- Talking with people who use services and their representatives
- Talking to staff and the manager
- Looking at documentation
- Observation of staff interactions with people and of the environment
- Comments made within questionnaires returned from people who use services, staff and health and social care professionals

We inspect and report our findings under ‘Quality Themes’. Those relevant to each type of service are referred to within our inspection reports.

Further information about what we do can be found in our leaflet ‘Improving Care and Social Services in Wales’. You can download this from our website, [Improving Care and Social Services in Wales](https://www.gov.wales) or ask us to send you a copy by contacting us.