



# Inspection Report on

**Primecare (North Wales) Ltd**

**Primecare North Wales  
71 Bryniau Road  
Llandudno  
LL30 2DZ**

**Mae'r adroddiad hwn hefyd ar gael yn Gymraeg**

**This report is also available in Welsh**

**Date Inspection Completed**

17/11/2023

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## About Primecare (North Wales) Ltd

|   |   |
|---|---|
| Type of care provided                                 | Domiciliary Support Service   |
| Registered Provider                                   | Primecare (North Wales) Ltd   |
| Registered places                                     | 0   |
| Language of the service                               | Both  |
| Previous Care Inspectorate Wales inspection           | 12 August 2019  |
| Does this service promote Welsh language and culture? | 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

Care staff deliver good quality care which considers people's individual needs and helps them feel safe and secure. People told us care staff are cheerful and caring, and they rated the service highly. Relatives told us care staff and management spend time with them to ensure they also feel supported.

The manager and responsible individual (RI) are dedicated to the service, and to providing high quality, personalised care and support to people. They understand the need to support care staff to ensure they are content in their work. Care staff are dedicated to meeting the needs of the people in their care. People and staff told us how much they value the manager and RI. Care staff told us the manager and RI are always available to support them.

## Well-being

People's wishes are listened to and their individual needs are considered. During the inspection, we spoke to people who have received a service for several years and told us how much they trust the manager and care staff to meet their needs. The compliments log for the service is extensive and we saw people regularly get in touch to say how much they value the service. One relative told us, "...*the care, attention and support received from Primecare has been great and allows my relative to continue to live in their own home.*" Another person told us, "*They are a very kind team and very reliable*".

Care staff deliver the right care and support to meet people's needs. People are supported to do as much as possible for themselves, enabling them to maintain their independence. People told us the timing of visits meets their needs, and we saw care visits are scheduled in accordance with the personal plans.

People feel safe receiving the service and are confident to contact the manager if they have a concern. During our visit we saw evidence of good practice by the manager in liaising with other professionals to keep people safe from harm.

People are supported to do things which matter to them. We heard how the service has helped some people to increase their confidence. One person has been able to meet friends and socialise more regularly because of the care they have received.

People can receive a service in Welsh if they choose. People's preferences are considered in a pre-assessment questionnaire. Several care staff speak Welsh and we were told if there was a request for a Welsh speaker this could be met. All care staff are encouraged to learn greetings in Welsh.

## Care and Support

The manager consults people and relatives to ensure their wishes and outcomes are incorporated into their personal plans. The personal plans we saw contained good detail about how each person wanted their care delivered, such as their preferences for how to cut up their food at mealtimes. They are written in the first person, ensuring the person's needs and wishes are at the centre of the plan. People and their relatives can contribute to the personal plans. The relatives we spoke to told us how reassuring they find the time and care which is put into the personal plans. One member of staff described these plans as being "*very personalised*".

The manager keeps personal plans updated and we saw an interim care plan to cover a short-term change in needs. This means care staff always have access to the most up to date information about how to deliver each individual's care and support. Care staff deliver good quality, consistent care by following these personal plans. One relative told us both care staff and the manager had gone '*above and beyond*'. They described how they had also received support and practical advice to assist them in their caring role. Another relative commented "*...their manager is an excellent source of information and advice*".

Care staff inform the manager of any risks affecting the people they support. The manager reviews risks and considers action to support people to manage these. We saw evidence of good liaison with other professionals to minimise risks for people. Care staff are supported with manual handling and told us they can request additional training or shadowing if required.

Care staff have access to robust policies, procedures and guidance to ensure they follow safe hygienic practices. Care staff can collect supplies of personal protective equipment (PPE) from the office and we saw there was a good supply.

## Leadership and Management

The responsible individual (RI) has a “hands on” involvement in the service. The RI knows each person receiving a service and member of staff well. We saw they complete regular visits to people, at times covering care calls or providing support to care staff. People and staff told us how much they value the manager and RI and they were described as “*exceptional*”. Care staff told us they feel well supported and love their jobs. One member of staff told us, “*we have an outstanding and fully committed manager who is to me a continual source of encouragement and inspiration*”. A relative told us the manager and RI go “*...the extra mile for the cared for, the carer and their team in support and kindness.*” The RI completes thorough audits, reading every page of daily notes and every medication chart themselves, to ensure a high quality of care and support is delivered. They produce 3 monthly reports on the visits they have completed and send out quality assurance questionnaires every year. The RI is working on developing and improving their visit reports and quality of care reviews.

The service has plenty of staff to meet the needs of people. New care staff have a thorough induction covering all essential training needs. They also have 2-3 weeks shadowing which can be extended if required to assist them to develop confidence in their role. Care staff told us how well supported they were during the induction. This support continues with regular supervision and spot checks. One professional we spoke to commented that the service has good levels of staff retention, and we spoke to some care staff who had worked for the service for many years. The manager and RI are aware there is work to be done with the renewal of staff training, and this is something which they are working on.

The RI ensures the service is financially sustainable and we saw they make investments in staff to enable the service to develop. There is a good system in place to support staff with travel and vehicle costs.

Care staff told us they have plenty of time to complete their calls, and to get to and from each visit. Care staff contact the manager on the occasion they are running late and they will ensure people are informed.

### 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 |
|------------|---------|--------|
|------------|---------|--------|

|     |  |     |
|-----|--|-----|
| N/A | No non-compliance of this type was identified at this inspection | N/A |
|-----|--|-----|



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