

Inspection Report on

Seren Ffestiniog Cyf

Uned 1 & 2 Llwynygell Blaenau Ffestiniog LL41 3NE

Mae'r adroddiad hwn hefyd ar gael yn Gymraeg

This report is also available in Welsh

Date Inspection Completed

30/03/2021



About Seren Ffestiniog Cyf		
Type of care provided	Domiciliary Support Service	
Registered Provider	Seren Ffestiniog Cyf	
Registered places	0	
Language of the service	Welsh	
Previous Care Inspectorate Wales inspection	26/11/2020	
Does this service provide the Welsh Language active offer?	Yes	

Summary

This was a focused inspection looking at areas of regulatory non-compliance identified during the service's previous inspection. People receive care provided by care workers who they know well and who understand their needs, we saw they are treated with kindness by caring and friendly staff. People and their representatives spoke positively about the relationship they have with care workers and office staff. They stated they are happy and are involved with the service they receive. Personal plans and risk assessments are reflective of people's individual needs. We saw there had been an improvement in how the service provider meets regulatory requirements in relation to staffing, safeguarding and notifications to CIW. The overall oversight of the service has improved, however we have identified areas where this could be strengthened further.

Well-being

People's well-being is supported and they have control over their day-to-day lives. Personal records demonstrate assessments and care documentation enable people to receive the care they need. Care documentation illustrate people are referred to healthcare professionals as required. We observed positive relationships and warmth between care workers and people. People told us they are able to make choices and decisions in relation to their daily lives.

There are measures in place to protect people from the risk of harm and abuse. The safeguarding arrangements at the service have been reviewed and improved. We saw there has been an improvement in safeguarding matters being referred to the local authority and CIW. Staff are aware of their safeguarding responsibilities and feel comfortable in communicating concerns to the management team. People told us they are well looked after by care workers. The service has a safeguarding policy in place for the guidance of staff and care workers have received safeguarding training. The recruitment processes at the service have been strengthened. Measures are in place to minimise risks associated with cross-infection.

There are systems in place to monitor the quality of service provided. People benefit from a service where the oversight of the service has improved. However, there are areas where the quality of care processes would benefit from strengthening to ensure all regulatory requirements are met.

The service works actively towards providing an Active Offer of the Welsh language. This means the service strives to be able to provide a service and documentation in Welsh to people without people having to ask for it. The service actively encourages people to receive a service in their preferred language. People benefit from care workers who are able to converse and support them through their preferred language.

Care and Support

People benefit from positive relationships with care workers. We observed staff supporting people in a warm, kind and caring manner, and they had the opportunity to converse with staff in Welsh. We spoke with people and a relative who were complimentary of the service and told us they are happy with the care and support they receive and they feel involved in their care and listened to.

People are supported by care workers who have the information required to provide the correct care and support. Personal plans were reviewed, are functional and outline the actions expected of care workers. Risks are identified as part of the care planning process and are supported by risk assessments. However, improvements are required to ensure all relevant documentation is updated when people's needs change. Care records demonstrate people are supported to access healthcare professionals' advice and supported with their health and well-being needs. We spoke with care workers who demonstrated they understood how to support people in line with their personal plans. A discussion with the acting manager demonstrated they had a good knowledge of the people they support.

People are supported by care workers who have the knowledge to keep them from harm. We spoke with care workers who demonstrated they know the people they support well and know how to protect them. Policies and procedures in relation to safeguarding, falls and infection control provide staff with appropriate guidance. Staff records show they receive up-to-date safeguarding training. The service records incidents and actions taken as a result of any incidents which occur, which include referrals to the appropriate health and social care professionals. Care workers have access to sufficient supplies of personal protective equipment (PPE) and we saw care workers use PPE appropriately to reduce the risk of cross-infection.

Leadership and Management

People receive a service where the recruitment processes have improved. Overall, people are supported by staff who are safely recruited and fit for their role. Care workers are employed with appropriate checks carried out to ascertain their fitness for their work and are registered with Social Care Wales (SCW). The service has access to guidance on how to refer staff misconduct to SCW. The service must ensure they use risk assessments appropriately to show they have assessed all risks and identified ways of managing them as part of their recruitment policy and processes.

People receive a service where staff training and supervision has improved. A review of records relating to staff supervision demonstrate care workers are receiving supervision to support them within their roles. We spoke with staff who confirmed they receive training and overall feel well supported and supervised. The service has systems in place to ensure there is support available to staff and people throughout the day and night. Overall, care workers stated senior staff are approachable and confirmed that they are able to contact them whenever they need to. The service is currently operating with an interim acting manager in post who is in the process of registering with SCW. The service has appointed a SCW registered manager who is currently waiting to start within the role as they are currently going through recruitment checks. Staff files demonstrate staff have completed mandatory training, including safeguarding and the management of falls. The service has systems to monitor staff training, the training matrix demonstrates that overall staff are upto-date with training.

People benefit from a service where systems are in place to assess the quality of the support provided; however there are areas where oversight of the service could be strengthened. Since the last inspection, there has been an improvement in the oversight of the service and how the provider notifies regulatory bodies and statutory agencies in relation to notifiable incidents. We saw the service has policies and procedures in place to guide staff when significant events occur. The provider of the service checks people are happy with the quality of care and support, and looks for ways to develop and improve. The Responsible Individual visits to oversee progress and developments and meets with people who receive the service and care staff. The service provider has systems in place to oversee ongoing development and improvement of the service. However, the quality of care processes should be developed further through being completed more frequently and addressing all regulatory requirements. People have access to information about the service which provides them and their relatives with information about the service and what the service offers to people.

Environment

The Environment is not considered as part of CIW's inspection of domiciliary care services.

Areas for improvement and action at, or since, the previous i	inspection. Not Achieved
None	
Areas where priority action is required	
None	
Areas where improvement is required	

None

Areas for improvement and action at, or since, the previous inspection. Achieved

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