

Inspection Report on

Affinity Homecare Aberystwyth

26 Bridge Street Aberystwyth SY23 1QB

Date Inspection Completed

27/07/2023

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About Affinity Homecare Aberystwyth

Type of care provided	Domiciliary Support Service
Registered Provider	Affinity Homecare Group Ltd
Registered places	0
Language of the service	Both
Previous Care Inspectorate Wales inspection	[Manual Insert]14 th November 2022
Does this service promote Welsh language and culture?	The service is working towards 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

Affinity Homecare provide long term support to people in their own homes. Overall people are happy with the care they receive from Affinity. People feel respected and listened to and are happy to raise any concerns with the manager.

People are cared for by a small team who know people well. Personal plans are detailed and care staff support people to remain as independent as possible. Regular reviews of personal plans involving people and/or their representatives are required to ensure compliance with regulations and to maintain individual's rights.

Care staff mostly feel supported by managers who are always available and responsive to any concerns. Care staff consider they work well together as a team. Mandatory training is provided to staff and additional specific training as and when required according to people's care and support needs.

There is clear and effective leadership and governance in place and the Responsible Individual (RI) and managers have very good oversight of the service.

Well-being

People have positive relationships with care staff because there is a consistent team in place. One person said, "*There is a good team now, I hope things stay the same*". People are listened to and are happy with the care and support they receive. Care staff are described as lovely and helpful. People usually receive care at a relaxed pace but one staff member told us they can feel rushed if there are staff shortages and one person said, "*Sometimes they rush*".

People receive the right support because care plans are detailed and a 'What matters to me' section gives people a voice in how they want their care delivered. Managers are easy to get hold of and are responsive when issues are raised. One person told us, *"They've got much better (with times), since I asked, it shows they listen"*. Regular formal reviews involving people and/or their representatives would further enhance people's right to contribute to decisions that affect them.

People experience positive health outcomes because care staff collaborate with other professionals such as occupational therapists and district nurses to provide consistent care. Daily notes are detailed and document care which has been delivered. Care staff can alert managers via an app on their phones if they are concerned about an individual's health and well-being and they feel additional support or assessment is required. People therefore receive support/referrals as and when they require it. Records show that there is effective communication between people, staff and other health and social care professionals. One person told us *"Communication is really good"*.

People are kept safe and protected from harm as much as possible. Thorough recruitment systems are in place which include obtaining references and undertaking Identity (ID) and Disclosure Barring Service (DBS) checks. Staff receive Safeguarding training and know the procedure to follow should they have any concerns. People also know who to contact and would not hesitate to discuss concerns with the manager in the first instance. Policies are clear and hold up to date information and contact details for outside agencies. Risk assessments of the home environment protect care staff and people they support. Senior staff undertake observations on care staff as part of their supervision to ensure they are providing good quality care and support.

Care and Support

Overall people are happy with the care and support they receive. There is consistency of care staff and therefore people are able to build trusting relationships with those supporting them. However, a recent shortage of staff has resulted in some people receiving care from those they are not so familiar with. One person said, *"They (care staff) are not perfect but they try their best"* another person said, *"the main carers are brilliant, really lovely, so helpful"*. Managers will assist with covering calls when required and there are no missed calls. Care staff mostly feel they have enough time between calls however can be rushed on times when there are staff shortages.

On the whole care staff and people feel communication is good within the service. One person told us, "*They will say if they are running late*" whilst another person said, "*I don't get told if they are going to be early and I need to know*". Managers provide a rota a week in advance so people do have some notice of time changes.

Individual care and support plans are detailed and person centred. A section 'What matters to me' ensures people are able to state their preferences and how they would like their support delivered. Managers need to ensure this is in place on all personal files. Care staff use an app on their mobile phone to log in and out of the call and complete detailed handwritten daily logs. Care staff can use the app to contact seniors and alert them of any concerns they may have. Personal records are stored safely in a secure office building.

Whilst personal plans are reviewed if care and support needs change, they are not always reviewed every three months as required. Some reviews are undertaken face to face whilst others are over the phone on an 'ad hoc' basis, as and when required. This is an Area for Improvement and will be checked at the next inspection. We have discussed this with the manager who will ensure reviews are pre-arranged, take place every three months and involve people and/or their representatives.

People feel that the manager is approachable and easy to get hold of. People feel listened to and can discuss any concerns they may have. One person said, "*The manager always responds really well…things always get done*".

Leadership and Management

The RI has good oversight of the service and regularly visits to consult with people and staff. The most recent report evidences that the RI will review and analyse the information collated from the visits in order to improve the quality of care and support provided.

The manager and deputy manager ensure the day to day running of all service delivery is organised and are always available to support staff. There is a duty system during the evenings and weekends therefore staff are always able to contact a senior for advice and support. Most staff feel supported by the manager and describe them as approachable. One staff member told us "*They always get back to me no matter what time of day it is*".

People can be assured that a robust recruitment process is in place and staff undergo the relevant necessary checks such as Disclosure and Barring Service (DBS) and Identity (ID) in addition to providing suitable references prior to commencing. Staff receive a thorough induction and receive a Handbook that the manager will go through with them to ensure they know what is expected of them in their role.

Most staff are up to date with mandatory training. The deputy manager has undertaken 'Train the trainer' and is able to provide Manual Handling update training to staff. There is a training room at the office where this takes place. Care staff receive additional specific training as and when required. Some staff are registered with Social Care Wales and the manager assures us that those who are not are in the process of being registered. This will be checked at the next inspection. Staff receive regular supervision and are also observed during care calls as part of their supervision. This identifies any training and/or support they may require and allows them to reflect on their practice.

We looked at several key policies, these are up to date and provide information for staff and people using the service. A service user guide is given to people on commencement of receiving support.

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. The 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	

16	The provider has not been involving the individual and/or their representative in the reviews of personal plans. During the inspection on the 20/07/23 three Personal care plans were looked at. There is no evidence that people or their representatives have been part of the review. People spoken with and the manager confirmed they are not routinely involved in the reviews of personal plans.	New
73	No reports were available to demonstrate the RI has carried out the required monitoring visits. The manager was unaware of any such reports.	Achieved
36	There are gaps in staff training with some staff either not having completed training, or training is out of date. A relative said they thought staff could, at times, be better trained before carrying out care duties. The training matrix shows some staff at not up to date with supervision.	Achieved

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