



Inspection Report on

Cymorth Llaw Ltd

**Cymorth Llaw
Unit D1
Ffordd Y Parc Parc Menai
Bangor
LL57 4BN**

Mae'r adroddiad hwn hefyd ar gael yn Gymraeg

This report is also available in Welsh

Date Inspection Completed

04/03/2024

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About Cymorth Llaw Ltd

Type of care provided	Domiciliary Support Service
Registered Provider	Cymorth Llaw Ltd
Language of the service	Both
Previous Care Inspectorate Wales inspection	4 December 2020
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 Cymorth Llaw Ltd. People and their representatives told us they feel the care staff understand their needs and they are friendly and approachable. They told us care staff are usually on time and they do not feel rushed during their visits.

Care staff feel supported and enjoy working at the service, they told us they have sufficient time to support people and have enough travel time between visits. Care staff are familiar with people's needs and understand how to raise a concern should they ever need to. The service provider completes the relevant recruitment checks before employing new care staff.

The Responsible Individual (RI) has oversight of the service and they complete their regulatory visits. The service provider have plans in place to increase supervisions of staff and the provision of training within the service.

Well-being

People have control over their care and support. People and their relatives told us they are involved in the development and reviewing of their care and support. They told us care staff treat them with dignity and respect and they feel listened to. Most care plans promote independence and are clear on what people can do for themselves. The service is providing the Active Offer of the Welsh language; people can receive the service in their chosen language. Most care staff can speak Welsh and relevant forms are bilingual, including feedback surveys.

People are supported with their physical, mental health and emotional well-being. Care staff record correspondence with health professionals. Relatives told us care staff are very proactive in seeking the right advice. Where required, care staff also keep a record of food and fluid charts. People told us they enjoy the social interactions with care staff.

People are protected from abuse and neglect. People told us they feel safe with care staff and understand how to raise a concern should they ever need to. They told us if they have ever raised an issue, these have been resolved quickly. The safeguarding policies and procedures are mostly in line with guidance and legislation. Most care staff are up to date with training, including safeguarding training and care staff we spoke with understood the procedures to raise a concern. Care staff are regularly tested on the relevant competencies to ensure they are confident in their role.

Care and Support

People are provided with the right care and support. Before agreeing to provide the service to individuals, the service provider completes a pre-assessment. Once it is confirmed the service can meet the person's needs, a bilingual letter confirming this is sent to the person. People are provided with copies of their personal plans and other documents such as the Service User Guide. The 'what's important to me' document informs care staff of what is important to the person, this includes the persons background, including preferred language, hobbies and interests. The majority of personal plans are clear on how best to support people and how to mitigate risks. People's personal goals are clear and are written using person centred language. Care staff document the care and support provided, including support with personal care and fluid and nutrition. We visited people and found interactions between care staff and people were very respectful. It is clear care workers understand the person's needs, including their likes and dislikes.

People and their relatives we spoke with, spoke positively about the service. Comments include [care staff are] "*very pleasant and very helpful*", "*they are very, very good*", "*they are very good, they are like having a friend*", "*they are absolutely fantastic*", and "*they have been a godsend*". People told us care staff are usually on time and stay for the full duration as set out in their personal plans. They said care staff keep them up to date of any changes to the rota. People said they have a say in how the care and support is provided. Most people and their relatives said the service is accommodating if they ever need to change their call times. Care staff understand their needs and they have continuity of care with the same team of care workers who provide their support. We spoke with professionals involved with the service who told us the service provider is "*open and transparent*" and engage well.

The service promotes hygienic practices and manages the risk of infection. Care staff told us they have access to Personal Protective Equipment (PPE) and said there is plenty available. The infection control policy is in line with guidance and legislation and people we spoke with told us care staff wear PPE.

Leadership and Management

The service provider has governance arrangements in place to support the smooth running of the service. There are policies and procedures in place, which are reviewed regularly. The Statement of Purpose (SoP) accurately reflects the service provided. The RI completes their regulatory visits, as part of the visits they speak with people who use the service and/or their representatives, review a selection of records of events and complaints records. The quality of care review reports are completed, these show people's views are sought and they identify what the service does well and how it can improve. There is a complaints policy in place, which is clear to people on how to raise a complaint should they ever need to. The service provider has assured us they will expand on their auditing processes to support the ongoing improvement of the service.

People are supported by a service which provides appropriate numbers of staff, who are suitably fit and have the knowledge, competency and skills to provide care and support to individuals using the service. Most staff are up to date with their mandatory training. Care staff are supported to access extra training and can make suggestions for future training sessions. Care staff we spoke with told us they feel supported working at the service, they have regular training and feel the management team are approachable. When asked what was good about working at the service, comments from care staff included *"they are above and beyond and so much better to work for"* and *"I think if there is ever an issue, there is always someone there to help"*. The service complete robust recruitment checks before employing new staff, this includes Disclosure and Barring service (DBS) certificates and seeking the appropriate references. Most staff are either registered with or in the process of registering with Social Care Wales (SCW), the workforce regulator. Supervisions and appraisals provide care staff with the opportunity to reflect on their practice, test them on their understanding of policies and procedures and identify areas for training and development. The service provider has assured us they have plans to increase the frequency of supervisions and appraisals with care staff.

Care workers are provided with sufficient travel time and the duration of the visits meet the needs of the people who use the service. We reviewed a sample of staff rota's which showed care staff have sufficient travel time between visits and people receive the visits at the same time each day. Care staff we spoke with told us they have sufficient travel time and where they identify more time is needed during the visits, this is organised in a timely manner.

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
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N/A	No non-compliance of this type was identified at this inspection	N/A
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Date Published 04/04/2024