



Inspection Report on

L & R Buchanan Care Services Ltd

**Canolfan Gorseinon Centre
Millers Drive
Swansea
SA4 4QN**

Date Inspection Completed

3 & 4 March 2022

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About L & R Buchanan Care Services Ltd

Type of care provided	Domiciliary Support Service
Registered Provider	L & R Buchanan Care Services Ltd - trading as Habitat Homecare
Registered places	0
Language of the service	English
Previous Care Inspectorate Wales inspection	17 June 2019
Does this service provide the Welsh Language active offer?	Working Towards. The service is working towards providing an 'Active Offer' of the Welsh language and intends to become a bilingual service or demonstrates a significant effort to promoting the use of the Welsh language and culture.

Summary

Habitat Homecare is a domiciliary support services for adults over the age of 18 in the Western Bay area, which consists of the counties of Swansea and Neath Port Talbot. The accessible office is based in Gorseinon.

Overall people receive a good service from Habitat homecare and feedback from people and staff is very positive. Personal plans are easy for staff to follow and are updated when required to reflect peoples changing needs. People are supported by dedicated care workers who are recruited, supported and trained appropriately to carry out their roles.

There is a visible management team in place who are part of the day-to-day running of the service. There are robust systems in place to ensure there is good oversight of the quality of service delivered. Improvements are required to ensure that staff supervision is carried out for all care staff on a quarterly basis and the quality of care report should be completed every six months.

Well-being

People have a voice and are involved in the content of their personal plans. Personal plans are written from the person's perspective and the individual confirms accuracy. Personal plans are reviewed routinely and updated as required to ensure they reflect the person's current needs. People spoken with are complimentary of the service received and would recommend it to others.

People are protected from harm and neglect. Care workers receive safeguarding training and those spoken with are aware of their responsibilities and procedures to report any concerns. Policies and procedures are in place which have been reviewed, this includes the safeguarding policy. There are good procedures in place for infection control and plenty of stocks of personal protective equipment (PPE). There is an infection control policy in place and the service follows the updated guidance for minimising the risk of transmission of Covid-19.

People are supported by care workers who are recruited and vetted appropriately with pre-employment checks in place. Care workers feel happy and supported in their roles and feel valued by management. Training is provided to care staff and there is a developmental path available for them to progress in their roles should they wish. Spot checks and supervision take place, but these are not completed quarterly as required for all staff at present.

There is good oversight of the service. The responsible individual (RI) is visible in the service daily and there is a good organisational structure in place with all staff having their designated roles and responsibilities. Quarterly reports are produced to monitor the performance of the service. Quality of care reports are completed however these should be completed every six months and not annually.

Care and Support

People are provided with the quality of care and support they need through a service designed in consultation with them. We looked at three care files and saw that personal plans are written from the person's perspective. There is a good overview of the person, their current care needs and support required. Hard copies of personal plans are available in people's homes; however, this information is also available in real time on a secure electronic app on staff's mobile phones. We saw these personal plans are reviewed and updated as needed. As this is completed directly into the app, the information is always up to date for care workers to see. We saw signed consent and agreement forms in place, which confirm that people are in agreement with the content of their personal plans. People spoken with were complimentary about the documentation in place to support them. Some comments included; *"I've got the care plan here and I have gone through it and it is right with what I want,"* and *"it's here in my file, I know what's in it; I know what they do for me"*.

The service has mechanisms in place to safeguard vulnerable individuals to whom they provide care and support. We saw the safeguarding policy which has been reviewed and reflects the Wales safeguarding procedures, although not specifically mentioned. Care workers spoken with have completed safeguarding training and are aware of the procedures to follow if they are concerned about anyone they support. People were complimentary of the care workers who support them and feel comfortable with them. Comments included: *"they look after me wonderfully well"* and *"they are very caring and lovely"*.

The service has systems in place for the management of medication. We saw personal plans indicate what level of support is needed by individuals with regards to their medication. Care workers assisting with medication receive medication training and competency checks are carried out. We saw that there are systems in place to log and monitor medication errors and these are investigated to prevent further occurrence, with the outcome logged on the RI's quarterly reports. Care recordings seen include details of the medication assistance provided and issues with people's health is logged and any medical intervention is sought promptly. As recording notes are held electronically care workers and coordinators are able to see any updates in real time and appropriate information can be shared with care workers immediately.

The service promotes hygienic practices and manages risk of infection. There was plenty of stock of personal protective equipment (PPE) in the office and care workers spoken with confirmed they had adequate supplies. People spoken with felt confident with the care workers supporting them and had no concerns with the infection control measures in place. We saw that the Infection control policy has been reviewed and the service are following the recently updated Covid-19 guidance for domiciliary care providers.

Environment

The quality of environment is not a theme that is applicable to a domiciliary support service. However, the office premises are accessible, clean and spacious with no personal information on display. Most information at the service is stored electronically on password-protected devices with hard copies of files and paperwork stored in locked cupboards. We saw environmental risk assessments take place in peoples own homes prior to care staff providing a service to ensure a safe working environment for the care staff.

Leadership and Management

The provider has arrangements in place for the effective oversight of the service through ongoing quality assurance. The last quality of care report was viewed and this included areas that the service were doing well and areas in need of improvement. The RI told us that people and staff complete a feedback survey and this information is used to make the judgements in the report. However, a review of the feedback itself would be beneficial. The regulations require the quality of care report is completed bi-annually and not annually as seen. We expect the provider to take action and this will be followed up on the next inspection. The RI plays an active role in the service on a day to day basis and there are good records in place to monitor all aspects of the service including; missed calls, safeguarding, complaints and more. The service's Statement of Purpose (SOP) has been reviewed and accurately reflects the service. Policies and procedures are also routinely reviewed annually or more frequently if required.

Care workers are suitably vetted, recruited and trained to meet the needs of people they support. We looked at three personnel files and saw that appropriate vetting and suitability checks are in place. These includes pre-employment references and up to date Disclosure and Barring Service (DBS) checks. We saw that many of the care workers are registered with Social Care Wales or are working towards this and the provider is supporting care workers through the process. We saw that care workers have undertaken the mandatory training as detailed in the services SOP and care workers spoken to tell us that the training they receive is good.

Staff are well supported in their roles. Care staff told us they felt supported in their roles and were able to speak to someone if they had any concerns. Comments include: *"they are extremely supportive nothing is too much trouble"* and *"there is an open door policy approach, so any issues we have, we bring it up at the time and it gets dealt with"*. Managers carry out spot checks to monitor care workers practice, use of PPE, and observe interactions with the people they support. We saw that supervisions take place, however these are not always carried out quarterly as required by the regulations. This also includes administrative and managerial staff. We expect the provider to take action and this will be followed up on the next inspection