

Inspection Report on

Powys County Council

Powys County Council County Hall Llandrindod Wells LD1 5LG

Date Inspection Completed

16/01/2023

Date



About Powys County Council

Type of care provided	Domiciliary Support Service
Registered Provider	Powys County Council Adults and Children's Services
Registered places	0
Language of the service	English
Previous Care Inspectorate Wales inspection	First inspection since the service was registered under RISCA
Does this service provide the Welsh Language active offer?	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

This was the first inspection since the service was registered under RISCA. We considered all four service areas, Reablement, Domiciliary Care, Home Support and Supported Living.

People across all services receive person centred care and support from an enthusiastic, dedicated and caring staff team. Personal plans are detailed showing people's preferences, how they want their care and support needs met and what matters to them. People receiving 24-hour support are encouraged to make their own choices around leisure and employment and staff are committed to supporting them to do what is important to them.

Issues with the electronic roster system means some people receiving the domiciliary care and reablement service have had missed calls. This has caused them, and in some cases, their family members unnecessary stress. It is also demoralising for care staff. The provider has assured us this is being addressed. This is an area for improvement.

Managers and staff feel supported and give positive feedback about the training and support they receive, which helps them with their personal development and career progression.

Arrangements are in place through ongoing quality assurance processes to regularly review the standards of care and support. Issues are identified and addressed so the service can continually improve.

Well-being

People who need it have support to be involved in making decisions which affect their life. This is from staff, relatives, or advocacy services. Personal plans are detailed with what is important to them. People's views are sought regularly through reviews of their care and questionnaires. They have access to information in a language and format appropriate to their needs. Documentation is available in Welsh and English.

People's physical, mental and emotional well-being needs are being met. Personal plans contain information about people's health needs. Discussion with staff and documentation seen shows input from health and social care professionals is sought promptly when needed. People, particularly those receiving 24-hour support are encouraged and supported to maintain relationships with family and friends and to try new activities of interest to them. Family members across the services speak highly of the support they and their relatives receive from care workers. One person receiving a reablement service told us how staff had helped them to achieve their goals and regain their independence through "giving them a boost" and "cheering them on."

People are generally protected from abuse and neglect. Personal plans contain detailed risk assessments for staff to follow. Incidents are reported, investigated, and recorded appropriately so lessons can be learnt. Staff receive training and have access to policies and procedures to guide their practice. There is a clear complaints policy and people we spoke with said they know how to raise a concern. Due to issues with the electronic rostering system, some people using the domiciliary and reablement service are at potential risk of harm if staff do not turn up to provide their care and support.

People who need it have support to manage their tenancy agreement and to maintain their home to make sure it is safe. They have support to make choices about their home and how it looks.

Care and Support

People across the services told us they are happy with the care and support they receive. Some comments received include: my relative has "never been so well supported, cared for and cherished for years," "staff are very good and will do anything I ask," and "the management should be proud of their staff." However, for the domiciliary support and reablement service, some people have experienced missed calls due to a failure in the electronic roster system. This has been going on for some time leaving some people feeling anxious and worried. Staff show a genuine concern for people and say it is demoralising for them when calls are missed. The provider has put systems in place to try to reduce the number of missed calls to people. They are actively looking to address the issue. This is an area for improvement, and we expect the provider to take action.

People's needs are assessed before they receive a service. People and/ or their representatives are involved in this process. Once the service starts, further assessments take place with people to determine what is important to them. The management team recognises the need to formalise the provider assessment process and keep it under review if or when people's needs change. Management meetings are taking place to discuss and address this.

People and /or their representative are involved in planning and reviewing their care needs. Personal plans seen are detailed for staff to follow. There is evidence of regular reviews of care needs and discussion with people. People spoken with confirmed this. Plans are updated to reflect any change in care needs. Staff spoken with said changes are relayed to them in a timely way. People's personal outcomes are recorded and staff support people to achieve these. In the case of supported living, we saw how staff work with people to make sure they do what is important to them like staying connected with family and friends or attending social events.

People are supported to manage their physical health. Systems are in place to manage medication safely. Any errors are quickly identified and addressed. Staff have medication training. The medication policy used across all services is currently in the process of being reviewed to reflect current guidance. It has not been reviewed since 2014. The RI assured us this is being addressed.

Measures are in place to keep people as safe as they can be. Care documentation across the services is detailed, including risk assessments for staff to follow. Staff have training and good management support. They know who to contact if they feel people's well being is compromised. They have access to policies and procedures to guide their practice. There is good management oversight of the service so issues can be identified and acted on quickly. Systems are in place to address the issue of missed calls.

Environment

The service covers the county of Powys. There are offices spread throughout the county to support staff. All information is held securely with access to appropriate personnel only.

Leadership and Management

There is a very established and experienced management team who clearly have good oversight of the service. They are very supportive of their staff and promote career progression within the organisation. Staff we spoke with confirm this. The responsible individual carries out visits to all four service areas and speaks to people using the service and staff. Processes are in place to review the quality of the service regularly. Systems are in place for people using the service and staff to give their views on the service. There is good oversight of missed calls. We saw they are investigated for lessons learnt. Some staff raised concerns about the out of hours service and what is expected of them. We saw clear guidelines in place to support staff, but management recognise this can be stressful for staff and will reiterate procedures at team meetings.

There are systems in place to manage any concerns raised. The provider takes a proactive approach to trying to resolve any issues which impact on the wellbeing of people and staff. For example, sourcing training for staff who provide care to people with complex needs which can challenge those supporting them and the environment around them. Managers told us this has given staff more confidence and has resulted in good outcomes for people. This includes people being able to stay in their own home for longer with the right support.

Recruitment practices help to keep people safe. There are good processes in place for the recruitment of staff and the use and induction of agency staff. Staff confirm they have a good induction, training and receive good support to make sure they are confident in their role. All staff have contracts of employment and where appropriate are given sufficient travel time between care calls.

Staff across all services told us training opportunities are good. Documents seen show staff have a variety of training, so they know how to meet people's needs. They told us they are encouraged to develop their skills and knowledge and have regular one to one meeting with their line manager and an annual appraisal of their work. Documentation seen confirms this. Regular staff meetings are held so staff can discuss any issues they may have and share ideas

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
21	There are failures in the electronic roster system meaning some people are not getting their allocated	New

care calls.	

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