



## Inspection Report on

**Monmouthshire Home Care services**

**Gwent Healthcare Nhs Trust  
Chepstow Community Hospital  
Tempest Way  
Chepstow  
NP16 5YX**

**Date Inspection Completed**

21 July 2022

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## About Monmouthshire Home Care services

Type of care provided	Domiciliary Support Service
Registered Provider	Monmouthshire County Council Adults and Children's Services
Registered places	0
Language of the service	English
Previous Care Inspectorate Wales inspection	This is the first inspection of this service since it was re-registered under The Regulation and Inspection of Social Care (Wales) Act 2016 (RISCA).
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

People are happy with the care and support they receive and are very complimentary of the service provided. Care and support is designed in consultation with people using the service, which considers their needs, wishes and aspirations. People know and understand what care and support is available to them, they are listened to and contribute to decisions affecting their lives. They are supported with their physical, mental health, emotional and social well-being. Personal plans are in place, although the review process requires some attention. There is an embedded multidisciplinary approach at the service prioritising people's well-being and empowering independence. There is oversight of the service by the responsible individual (RI) with comprehensive quality assurance processes in place. Recruitment and reporting practises require some strengthening. The service provider has made structural changes within the leadership and management of the service to develop and enhance overall oversight. CIW acknowledge the significant pressure the pandemic has placed on the service provider.

## Well-being

People's physical health and overall well-being is promoted. People are supported to access the relevant health and social care professional support and advice when required. Care workers we spoke with have a good understanding of people's health conditions and the support they require. They have developed positive relationships with the people they support. This has a positive impact on people's emotional well-being and provides reassurance to family members. Personal plans are in place; however, the review process requires some improvement. We received consistent positive feedback from people and their relatives on the quality of care and service delivery. Care workers receive training and support to enable them to provide safe, good quality care. Infection control and prevention measures are in place.

Mechanisms are in place to safeguard people. People we spoke with know whom to contact if they have any concerns. Care workers confirm they complete an induction and training to help them understand their role in protecting and supporting adults at risk. Records show checks via the Disclosure and Barring Service (DBS) are carried out on all staff; however, some checks require renewal. These regular updates are important to consider a staff member's suitability to work with vulnerable people. Care workers have access to up-to-date policies and procedures to support safe practice. Medication practices and auditing of medicine management systems are robust. However, the oversight of daily logs and finance risk management requires some attention. The auditing of key documentation will enhance safeguarding measures already in place at the service. Care workers are appropriately vetted prior to employment, although the overall recruitment process needs improvement.

The service has a well-defined management structure and maintains oversight of the service. We saw quality assurance reports completed by the RI on a quarterly basis. These give a detailed overview of the service and capture the views of people receiving support, giving them the opportunity to contribute to developing service delivery. We received positive feedback from staff we spoke with who told us they feel supported. Support mechanisms for staff are in place, however three monthly one to one supervision is not always provided consistently. Reporting processes to CIW and the relevant professional registration body require some attention to ensure timely intervention.

## Care and Support

People value their relationships with care workers, they feel listened to and involved in their care. People receive care and support from a familiar group of care workers, who are generally on time and stay for the duration of their allocated visit. We spoke with 12 people using the service and received positive comments on the service delivery.

Comments included: *'I have made good friends with some of them, they always ask if there is anything else they can do before leaving.'* *'When we have been at the call we have seen (x) treated with dignity and respect.'* *'They listen to me, and I feel involved in my care.'*

Questionnaires are available for people to share their views and opinions on the service and can be completed anonymously. People's comments are then captured in quality assurance systems to guide and develop service delivery. Care workers we spoke with have a good understanding of people's needs and aspirations.

The service promotes people's health and independence. Multi-agency working is a strength at the service. Referrals are made in a timely way to relevant health and social care professionals when people's needs change. Care workers attend regular multi-disciplinary meetings advocating on people's behalf to ensure people receive the best possible care and support. Infection control measures in place reduce COVID-19 and other infection risks. A sample of medication administration records (MAR) shows the management of medication is effective. The service undertakes routine auditing to review measures in place and to act on any discrepancies. We note good example of detailed medication audits, however the auditing of daily logs and finance records needs strengthening. CIW have been assured following inspection this is now in place.

People have personal plans in place, which set out how care and support needs will be met. Personal plans evidence people are being supported to improve their health and well-being and achieve their personal outcomes. The review of care documentation take place, however there is a lack of consistency in the review process. We found one person was fully involved in the review process and told us they have a good relationship with their care worker, goals are set in their care plan and reviews are regular. The personal plan we saw reflect these comments. On the other hand, one person told us reviews very rarely happen and they would like this to occur more often. We note care documentation for this person and found the personal plan on file has not been reviewed as required. Risk assessments are generally in place, however we identified areas that require more robust measures in place, such as falls, behaviour and finance management. The personal plan for one person was not available for review. We expect the provider to take action to address these matters and we will follow this up at the next inspection.

## Leadership and Management

The service provider maintains good oversight over the quality of care, considering the views of people using the service. There is a clear management structure and lines of delegation. The statement of purpose (SOP) sets out the vision for the service and how this will be achieved. Structural changes have been made to the overall management of the service outlined in the SOP to enhance oversight of key performance areas. The RI visits the service on a regular basis and reports show a detailed oversight of the service including engagement with people. They have also made provision for the quality of care to be reviewed on a quarterly basis and the report shows a detailed overview of the service. The manager told us they feel well supported and records show they receive regular supervision. Compliments and comments/ complaints are recorded at the service. A complaint policy is available. There are many expressions of thanks and gratitude from people receiving a service within the compliments log. A few comments were recorded on how the service could be improved and the provider assured us these are used to further develop the service.

Reporting and recording processes require some improvement. Care staff we spoke with have a good understanding of when and who to report matters of a safeguarding nature. A safeguarding policy is available. A safeguarding log presented to CIW was inaccurate, lacking critical information. Records of all safeguarding allegations, referrals made, and any action taken must be maintained and overseen by the service manager and RI to enable oversight and scrutiny at service level. The service provider mostly notifies CIW of events as required, however, there have been some occasions where notifications have not been submitted in a timely manner. This includes referring incidents to the relevant professional registration body as necessary, which supports timely intervention. We expect the provider to take action to address these matters and we will follow this up at the next inspection.

The recruitment process needs improvement to ensure legal requirements are fully met. We requested recruitment records for 10 staff employed at the service, however records for two staff were not available. Not all the required information was kept on file as required. We reviewed a Disclosure and Barring Service checklist indicating the relevant checks have been completed for most staff, however, DBS checks for seven staff remain outstanding. These regular checks and updates are important to review a staff member's suitability to work with vulnerable people. The service provider has assured us changes have been made to the overall recruitment process to strengthen this area. We will follow this up at the next inspection.

Systems are in place to for staff to receive support in their role, however the frequency of supervision requires some improvement. We reviewed minutes of regular meetings held with more senior staff. Staff we spoke with told us they feel supported and valued in their role. Staff receive an annual appraisal. However, supervision records indicate not all care

workers are receiving formal supervision every three months. Care workers told us they receive training and support to complete a recognised care qualification and register with Social Care Wales. The service has been involved in a pilot upskilling a group of care workers in areas such as oral care, hydration and enabling techniques. Training statistics indicate care workers complete a range of mandatory training. Records reveal most staff have completed training, however some staff have yet to complete their training in safeguarding, fire safety and emergency first aid where others require refresher training in these core subjects. CIW acknowledge the significant impact the pandemic has had on the ability of service providers ensuring all staff receive refresher training pertinent to their role as required. We expect the provider to take action to address this and we will follow this up at the next inspection.

### Summary of Non-Compliance

Status	What each means
<b>New</b>	This non-compliance was identified at this inspection.
<b>Reviewed</b>	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.
<b>Not Achieved</b>	Compliance was tested at this inspection and was not achieved.
<b>Achieved</b>	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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16	Personal plans are not reviewed consistently on a three monthly basis.	New
36	The service provider has not ensured all persons working at the service receive appropriate supervision on a three monthly basis.	New
35	The service provider has not ensured all persons working at the service has provided full and satisfactory information or documentation in respect of each of the matters specified in Part 1 of Schedule 1 and this information must be made available for the service regulator.	New
37	The service provider has not adhered to the code of practice on the standards of conduct and practice expected of persons employing social care workers in line with Social Care Wales requirements.	New
59	The service provider did not make all records as specified in Part 1 of Schedule 2 available to the service regulator on request.	New

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