



Inspection Report on

Pride in Care Ltd

**Pride In Care
Unit 7**

**Woodfieldside Business Park Penmaen Road
Blackwood
NP12 2DG**

Date Inspection Completed

07/09/2023

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About Pride in Care Ltd

Type of care provided	Domiciliary Support Service
Registered Provider	pride in care ltd
Language of the service	English
Previous Care Inspectorate Wales inspection	22/02/2023
Does this service promote Welsh language and culture?	This is a service that does not provide an 'Active Offer' of the Welsh Language. It does not anticipate, identify or meet the Welsh language needs of the people who use or intends to use the service.

Summary

Pride in Care is a domiciliary support service providing care to people in their own homes. Most people we spoke to who receive a service from Pride in Care rate the service between nine and ten out of ten, describing it as “*perfect for me*”. This is not the experience of all people and “*mediocre*” has also been used to describe the quality of care provided.

There is evidence of significant efforts made by the service to improve the quality and consistency of care provided. There have been notable improvements seen which has had a direct positive impact on the wellbeing of some people.

People have their own personal plan which staff access via an application (“app”). This plan directs care staff to understand the person’s likes and dislikes and them as a person in addition to their needs. Plans are “live” documents and updated as and when needed. Formal reviews of personal plans are completed every three months and although there is some evidence of people being involved in their reviews, this is not always recorded.

The Responsible Individual (RI) is involved in the oversight of the management of the service and there is also a suitably experienced and qualified manager appointed at the time of inspection. The RI continually considers the quality of the service they are providing and works with the manager to implement actions into practice.

Well-being

The majority of people speak positively about care staff and tell us *“they are good as gold”* and *“they help me be as independent as possible”*. People who have used the service for some while have noticed an improvement in the consistency of care visits taking place at their preferred times. People told us care visit times are *“much better, best it has been”*, *“they are always on time”* and *“if they are running late, they always let me know”*. Another person described the service provision as *“mediocre at best”*. When the times of care visit are inconsistent, people’s routines, choices and overall wellbeing can be affected.

People told us they prefer consistent care staff, and some people have this for most of the week. Overall people are confident in the abilities of the care staff they see regularly with one person saying she would *“give them all ten out of ten as they are all so very good with me”*. Some people have a different experience when care staff they are not familiar with support them and are less confident in the quality of care they receive at these times.

There is travel time planned between care visits and some staff feel added time between visits is needed to ensure they are not rushing or late to the next person. Some feel there is a difference between how visits and travel times are planned and what happens in practice.

Most people feel communication with the office staff has improved and is overall good. People told us they feel anxious and frustrated when contact with the office or management is not as good.

Electronic Medication Administration Records (EMAR) charts are consistently completed as are the notes made by care staff. The overall standard of these notes is very good with concise and meaningful records made. People can access the “app” used by pride in care to view their notes if they wish.

People can be confident they are supported by care staff who have been recruited safely with all the required pre-employment checks being completed and verified. The frequency of formal supervision provided to care staff had recently declined however, the service has now resolved this.

Care and Support

Overall, people receive adequate care and support from Pride in Care. Many people feel they have a good service and have noticed improvements in the way their care is organised and provided. One person spoke of the positive impact this has had on their wellbeing and told us *"I get my calls at the time I want, and this is great for me, in fact its perfect"*. Records show people are being supported at their preferred times much more than at the last inspection. Care visit times can be affected during periods of staffing issues, more so towards the latter part of the day.

People mostly have regular care workers for some of the week and prefer being supported by care staff they are familiar with. Some people experience inconsistent care and support which impacts their ability to undertake their own routines and activities as they would like. Pride in Care is working with people who experience this to improve the quality of the service they receive.

People receive care and support from care workers who are respectful to them and who treat them with kindness. Most people speak very positively of the care workers and told us *"they are so good to me"* *"there isn't anything I would change, I look forward to seeing all of them"*. The manager makes effort to provide people with their preferred care staff team however, due to limited diversity within the staff team, including Welsh speaking care staff, this is not always possible without affecting the times people receive their care.

People have good quality, person centred care and support documentation. These contain information about their needs and how they want them met, along with their likes and dislikes and what matters to them. Care and support plans are kept up to date and reviews are completed every 3 months. Pride in Care is transferring to a completely electronic system to record reviews. The previous process has clear evidence of the person being involved in discussions about their needs and their personal goals and Pride in Care is developing the new process to also include this valuable process.

Care workers complete notes following each care visit which are of a high standard and includes concise and relevant information. Records about medication are also completed consistently to a satisfactory standard. All care documents and records are completed in English and bilingual documents are not available.

Leadership and Management

The RI actively oversees the service and is accessible to the manager, office and care staff as needed. The RI undertakes regular reviews of the quality of service provision and has governance arrangements in place to support the operation of the service. A quality-of-care report is completed every 6 months and provides enough information to satisfy us there is supervision of the management of the service. Although the RI attends the service most days, records of completion of specific regulatory visits need to be kept.

The RI also supervises the manager of the service. The manager has responsibility for the operational delivery of the services and oversees the planning of care visits and manages several “care runs” with the support of a deputy manager and two care coordinators. On the day of inspection, we saw travel time planned in between all the care visits. Care staff told us more travel time would be very beneficial. Some care staff did not feel the “care runs” reflect their experience and sufficient travel time is sometimes lacking between care visits.

Pride in Care are continually reviewing and developing their recruitment processes as there is a high turnover of staff. Both the RI and manager are exploring insightful options for shift pattern to increase and sustain an improved workforce. Safe recruitment processes are in place which ensure people are supported by staff who have the competency, skills and knowledge to support them appropriately.

There had been a recent decline in the frequency of formal supervision meetings for care staff however, once identified, significant effort was made by the RI and manager to ensure all staff were provided with this. The details of these discussions are not available due to an administrative error, and we are unable to comment on the quality of these meetings. However, care staff told us *“Supervision ok, had one three weeks ago and feel able to raise any issues”*.

Pride in Care have their own workforce trainer as well as sufficient training resources. The manager arranges and leads team meetings which are held regularly. The manager has developed how these are delivered to increase staff attendance and participation. The records from the team meetings clearly show how the areas identified within the quality-of-care audit as needing improvement are being addressed and shared with the staff team to improve the quality of service provided to people.

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.
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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
21	Peoples care and support needs are not consistently being met, people are receiving poor outcomes as a result	Achieved
22	The provision of care and support is not always consistently provided in terms of the times of calls and the care staff provided. The inspection found that each service user spoken with mentioned inconsistency with carers and care provision, however this is potentially due to the use of short term agency staff. Agency care staff have been commissioned by the LA to stabilise the service as an alternative to POC's being handed back to them as the LA were unable to source an alternative service provider. I note that handing the POC back was the preferred	Achieved

	<p>option for PIC. The use of agency care staff was to be in place until another provider was sourced and / or the staffing crisis experienced by PIC was resolved. PIC has now successfully handed back 7 POCs, with notice still pending action on 1 POC and report a successful recruitment drive and the use of agency care staff ended on March 22nd. The staff team has stabilised and compliance with regulation needs to be tested under these conditions.</p>	
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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
N/A	No non-compliance of this type was identified at this inspection	N/A
35	Although most staff recruitment checks were in place we found some gaps people's employment history and a few references outstanding	Achieved

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