



# Inspection Report on

**I-Care Cardiff**

**Connections Design  
21 Penlline Road  
Cardiff  
CF14 2AA**

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06/12/2021

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## About I-Care Cardiff

Type of care provided	Domiciliary Support Service
Registered Provider	I-Care Dom Care Ltd
Registered places	0
Language of the service	English
Previous Care Inspectorate Wales inspection	This is the first inspection since the service re-registered under the Regulation and Inspection of Social Care (Wales) Act 2016
Does this service provide the Welsh Language active offer?	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 very happy with the service they receive and praise the staff who provide their care. Care documentation is robust and reviewed regularly to ensure it is accurate and current. Care staff are happy in their roles and feel well equipped to do their jobs. Staff receive training and supervision and feel valued working for I-Care. Staff retention is good, which is positive for people using the service as it enables them to have continuity of care. There is travel time allocated between care calls and people tell us that care staff stay the duration of the allocated time.

There are policies and procedures in place for the smooth running of the service, and quality assurance processes are in place to ensure that people are happy with the quality of their care. The Responsible Individual (RI) has good oversight of the service.

## Well-being

People are supported to have autonomy over their lives. Care documentation is person centred and contains wishes and feelings of the person receiving the care. Care plans are reviewed, updated and adjustments made to care delivery as required. Prior to services commencing an assessment is completed to ensure that the agency can meet needs of the person, and suitable call times can then be assigned. I-Care has a robust complaints process in place and takes complaints seriously. People tell us that management are approachable and are always contactable. Quality assurance monitoring takes place, which includes engagement with service users and/or their representatives.

People can be confident that their needs are met. There are policies and procedures in place for the running of the service. Staff receive relevant training and feel well equipped to undertake their roles. Staff are well supported and receive formal supervision where they can raise any issues. Travel time is allocated on staff rotas, which enables staff time to travel to calls and stay the full duration of the allocated time. I-Care has good staff retention and so continuity of staff is good, so people get care from staff who understand their needs fully. Each day care staff update the office staff and management of any issues or changes in needs of the people they have cared for that day. Following these updates, any changes or adjustments are made to care packages.

People can be assured they are protected from abuse and harm. I-Care has a safeguarding policy in place and the manager and understand legal requirements in regard to caring for vulnerable people. All staff receive training in the safeguarding of adults at risk of abuse, and this training is refreshed annually. Staff are recruited safely and pre-employment checks are completed. Disclosure and Barring Service (DBS) certificates are renewed three yearly or checked yearly if staff are on the update system. Risk assessments are completed where required to ensure that people have their care provided safely at all times.

## Care and Development

People get the care they need at the right time. Care documentation is robust and contains detailed information about people's needs and risks. There are systems in place to ensure these documents are reviewed regularly to keep them reflective and up to date. The majority of people we spoke with told us that they are very happy with care they receive and described the care staff as "*great, lovely and approachable*". One person we spoke with told us that I-Care had arranged additional care for their relative when it became necessary and also commented that they tend to "*keep their staff*".

Staff rotas are scheduled with allocated travel times to ensure that staff have time to travel to each and every call. Staff told us that generally the time is sufficient, but sometimes road works and traffic can hold them up slightly. People we spoke with told us that staff are generally on time, but if they are significantly delayed the main office will call them to let them know. I-Care has a computerised system that will alert staff if a care call is missed, but to date there is no missed call recorded at the service.

People can be assured they have choice and control over their lives. Care documentation contain people's likes and dislikes, and outlines how people wish for their care to be provided. People are part of the reviewing processes and have an opportunity to influence their care. People we spoke with told us that care staff do everything they need them to do, and stay for the full duration of the care call. Most people told us that they have good continuity of care staff, which enables them to build a good working relationships with the staff who provide their care. One person told us "*my home is full of laughter when the carers are here, this is so important to me*". Good continuity also ensures that people receive their care how they want it, at all times. One person told us that they had complained to the service, but was able to get the situation resolved to their satisfaction. People told us that they receive a good standard of care from staff who "*know what they are doing*". We were told several times that people would not choose to receive their care from another agency. Service users and their families have the option of being sent a rota of the staff who are going to call to them in advance. Some people opt for this service, while others decline, but can opt back in at any time.

## Leadership and Management

People are assured they are supported by staff who are well trained and supported. We viewed the staff training matrix and saw that all care staff are up to date with training, and all courses they receive are appropriate to their roles. Staff told us that they feel well supported by the management and feel confident that they could raise any issues they may have. One person said *"I love my job and feel valued; management ask the opinion of care staff and listen to what we say"*. All staff receive formal supervision in appropriate timescales which is important as this is an opportunity to discuss practice issues and needs in a formal setting that is recorded.

Staff personnel files are well structured and contain all required information. We were able to see that staff recruitment is safe as pre-employment checks including references and DBS certificates are applied for before employment commences. These checks are important as they determine a person's suitability to work with vulnerable people.

People benefit from the leadership and management in place. I-Care has a manager who oversees the day to day running of the service and an RI who has overall accountability for the service. We spoke with the manager and RI and are confident that they understand their roles and legal requirements attached to their roles. We viewed a selection of policies and procedures and found them fit for purpose, but we did advise that the safeguarding policy would benefit from being updated to reflect current legislation. Safeguarding referrals are made to the Local Authority as required and are then stored centrally with outcomes recorded. This is good practice as it enables management to monitor referrals and scrutinise for themes and trends. The manager and RI make notifications as required to Care Inspectorate Wales.

There are processes in place for monitoring the quality of care being delivered, which includes feedback from staff and people using the service. The RI is involved in the running of the service, this enables her to have good oversight. Complaints and compliments are taken seriously at I-Care and monitored as part of quality assurance processes. We saw evidence that compliments are fed back to staff and complaints are dealt with appropriately with outcomes recorded.

### 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
N/A	No non-compliance of this type was identified at this	N/A

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