



Inspection Report on

Celtic Community Services Ltd

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Parc Busnes Edwards
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CF72 8TQ**

Date Inspection Completed

01/11/2023

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About Celtic Community Services Ltd

Type of care provided	Domiciliary Support Service
Registered Provider	Celtic Community Services Ltd
Registered places	0
Language of the service	English
Previous Care Inspectorate Wales inspection	17th October 2022
Does this service promote Welsh language and culture?	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

Celtic Community Services provides care and support to people in their own homes. The service mainly caters for people with alcohol dependency and alcohol related illnesses, substance misuse and mental health issues. Services are provided in the Cwm Taf and Cardiff and Vale regions. This report covers the Cwm Taf region.

People receive a good standard of care and support and have positive relationships with care workers. Care documentation is outcome focused and is clear and concise. People are involved in care planning and review processes. Risk assessments highlight areas of concern and provide information on how to keep people safe. Care workers are subject to a thorough recruitment process to ensure they are suitable to work with vulnerable people. Care workers receive the required levels of formal support and feel confident within their roles. We found improvements are needed to ensure care workers are sufficiently trained and the Responsible Individual has clear oversight of the service.

Well-being

People are supported with their health needs. Care workers provide support to people to arrange and attend medical appointments. Support is available for people with medication needs. This includes medication collection, storage, and administration. Care workers can spot the signs of ill health and report to the relevant professional for support or advice.

People are protected from harm and abuse. Care workers receive safeguarding training and there is a safeguarding policy which is aligned with the most recent statutory guidance. Care workers we spoke to are aware of their safeguarding responsibilities and the process for raising concerns. People have individualised risk assessments which clearly highlight the risks to people's health and safety as well as providing strategies for keeping people safe.

Care workers are kind and considerate and treat people with dignity and respect. People used words like "*consistent*", "*very good*" and "*great*" to describe care workers. Care and support plans are produced in conjunction with people and their representatives, and people are regularly consulted about the service they receive. The service communicates well with the people it supports. People said care workers let them know if they are going to be late.

Care and Support

People are pleased with the care and support they receive and have positive relationships with care workers. We spoke to people using the service and received complimentary feedback regarding care workers and office-based staff. One person said, *“To be honest they’re great. They good at their Job and they’re good at communication. They let me know if they’re going to be late”*. Another person said, *“They are very good. I get on with all of them. I’ve had a few agencies. Celtic Community Services are better than the other agencies I’ve had. The staff are very consistent. They are always on time and extremely helpful”*.

People’s personal plans capture their care and support needs and are person-centred. This means they are specifically designed to meet the needs of the individual. They contain clear information regarding the care and support people require; care workers said these are easy to follow. Risk assessments consider risks to people’s health and safety and provide information on how to keep them safe. People are involved in the care planning process and regular reviews are conducted to ensure care documentation remains current.

The service offers support for people with medication needs. Details of people’s medication routines are documented in their personal plans. There is a medication policy and care workers receive medication training. All medication administrations are documented on medication administration recording (MAR) charts. We looked at a number of MAR charts and found they are filled in correctly with no gaps. This suggests people receive their medication in line with the prescriber’s recommendations.

The service supports people to maintain independence. People told us care and support is delivered in a relaxed manner and care workers are kind and considerate. People are supported to have control over their day to day lives and receive support for things like arranging and attending medical appointments, food preparation, managing alcohol consumption, and maintaining their homes.

Infection prevention and control measures help reduce the risks of infection. Care workers have access to the appropriate personal protective equipment and receive relevant training. There is an infection control policy, however, this requires some minor adjustments so it accurately reflects current guidance in relation to Covid-19. We discussed this with the management team who assured us this would be actioned.

Leadership and Management

Care workers are recruited in line with regulation. We looked at a number of personnel files and found the service conducts all of the necessary pre-employment checks. These include, Disclosure and Barring Service (DBS) checks, employment history checks and references from previous employers. On commencement of employment care workers complete a structured induction programme which involves the completion of core training and shadowing experienced members of the team before providing care and support. Care workers told us the induction process is good as it gave them the opportunity to familiarise themselves with the service and the people before supporting them.

Improvements are required to ensure care workers are sufficiently trained. Care workers we spoke to said they receive training relevant to the needs of the people they support. However, examination of the services training matrix showed not all care workers are up to date with their training requirements. We discussed this with the management team and said this was an area for improvement. We expect the provider to take timely action to address the issue.

Governance and quality assurance measures require strengthening. On a three-monthly basis the RI is required to meet with people and staff to gather their feedback to aid continuous development of the service. We did not see sufficient evidence of these meetings in line with regulation. We discussed this with the RI and explained this was an area for improvement. We would expect this matter to be addressed by the next time we inspect. Every six months the service must complete a quality-of-care review. We looked at the latest quality of care reports and they require strengthening. Not all the reports contain all the required information. We discussed this with the RI who assured us improvements would be made.

Records show care workers receive the required level of formal support. We looked at the services supervision matrix and found care workers receive supervision every three months. We were also shown evidence care workers receive annual appraisal. Most of the care workers we spoke to provided complimentary feedback and told us they feel supported in their roles. However, we were told communication amongst the team was not always clear and concise. We discussed this with the management team who assured us they would investigate this further.

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
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73	The provider is not compliant with regulation 73(3). This is because we saw little evidence to suggest Regulation 73 Visits are being conducted every three months as required.	New
36	The provider is not compliant with Regulation 36(2). This is because not all staff are up to date with the services core training requirements.	New
36	The provider is not compliant with regulation 36(2)(c). This is because evidence to show staff have received the required levels of supervision and appraisal have not been seen at inspection.	Achieved

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