Arolygiaeth Gofal Cymru
Care Inspectorate Wales

Inspection Report on

Castell Care and Support - Powys

Wales & West Housing
Ty Draig
Clos Dewi Sant
Deeside
CH5 3DT

Date Inspection Completed

12/07/2021

About Castell Care and Support - Powys

Type of care provided	Domiciliary Support Service
Registered Provider	Castell Ventures LTD
Registered places	0
Language of the service	English
Previous Care Inspectorate Wales inspection	
Does this service provide the Welsh Language active offer?	No

Summary

We visited one of the services Castell Care and Support provides in Powys. People are not always happy with the care and support they receive and care workers are not always trained in areas appropriate to the care they undertake. Staffing levels are also not adequate. People's personal plans are detailed and give staff instruction how to undertake care and support for the person, however they are not always reviewed in a timely manner and do not evidence involvement by the individual or their representative. Managers do not always have effective oversight of the service.

Well-being

People do not always have control over their day to day lives. People or their representatives are not always involved in choosing the care and support they receive. People's support plans are detailed but do not always show pre-assessments had been undertaken prior to the person receiving support. Reviews of these personal plans are also not always in place in a timely manner.

People are not always protected from potential abuse, harm or neglect. Reviews of personal plans are not always in place in a timely fashion and therefore may not be an accurate reflection of what the person wants or needs. Training records showed care workers are not always trained in areas appropriate to the work they undertake. Staff recruitment processes are robust.

People may not always receive support with their physical and mental well-being. We spoke with people receiving support and care staff who confirmed support is not always provided in a timely manner. We spoke with people and saw professionals records which showed medical administration errors were occurring.

Care and Development

The provider does not always consider a wide range of views and information prior to people receiving a service. We viewed three peoples' personal plans, none of these had evidence a pre-assessment had been undertaken prior to the person receiving a service. Of these three files, one also had no social worker assessment which should have been in place. Therefore managers may not be able to make an accurate assessment as to whether appropriate care and support can be provided by the service, or how care staff are to support the person once their care and support commences. This may put the individual receiving support at risk of harm and we have issued a priority action notice. The provider must take immediate action to address this issue.

People cannot always be confident care staff have an accurate and up to date plan for how their care is provided. We viewed people's personal plans which were detailed and gave staff instruction on how to support the person. Personal plans are stored electronically and accessed on devices care workers carry with them. We saw a back-up print out, which staff are given when the electronic systems are unavailable. This print out contained very little detail and it was felt new or agency staff may have difficulty undertaking care with this information. We expect the provider/registered person to take action to address and we will follow this up at the next inspection. The personal plans we viewed also had no proof the individual had any involvement in their plan of care. We also spoke with people receiving a service all of whom confirmed they had no involvement in the care and support they receive. The person may therefore be receiving care and support they do not want. This can put the individual potentially at risk of harm and/or abuse. We have issued a priority action notice. The provider must take immediate action to address this issue.

The administration of medication is not always safe enough to ensure the protection of people's health and well-being. We saw staff training in regards medication administration was up to date and input from the local health board is being received. Manager's spot checks and medication competencies are also being undertaken. However we have received evidence from professionals of a number of medication errors having taken place, including missed administration, and Medication Administration Records (MAR) being completed by care workers incorrectly. People being given the incorrect medication or medication being missed can put them at risk of harm. We have issued a priority action notice. The provider must take immediate action to address this issue.

Leadership and Management

The service lacks effective arrangements for monitoring, improving and reviewing the quality of care and support provided by the service. We spoke with the Responsible Individual (R.I.) who advised us at the start of the inspection formal governance around the service had been lacking. We saw audits had not been undertaken on a regular basis and we saw the RI had not undertaken formal reviews of the service in the timescales stipulated by regulations. We viewed a number of people's files which showed personal plans were not being reviewed regularly or were being reviewed late. These issues may mean managers are unaware of potential issues which may be taking place. It may also lead to the care and support people are receiving not being accurate or what the person wants or needs. This places people receiving care and support at potential risk of harm and we have issued a priority action notice. The provider must take immediate action to address this issue.

People cannot be confident they are supported by a service which provides appropriate numbers of care staff who are suitably fit and have the knowledge, competency, skills and qualifications to provide the levels of care and support to all individuals. We viewed care workers files which showed robust recruitment processes are in place. However, we spoke with people who told us there was not enough care staff. One person said *"very frustrated, call can be very late… up to an hour late."* Another person told us *"staff will leave your call to answer the handset."* We also spoke with care staff who all felt there weren't enough staff on duty. They told us calls are finished late, calls are rushed which causes pressure, and they can be late attending calls due to handsets ringing. We spoke with senior managers who told us they were recruiting more care staff, however, insufficient staff numbers may lead to people not getting the care and support they need in a timely fashion and may put them at risk of harm. We have issued a priority action notice and the provider must take immediate action to address this issue. We also viewed a training matrix which showed training was up to date and spoke with staff who felt their training was adequate to support people, one care staff member told us their induction *"was fabulous."* However we saw from training records and speaking with a senior manager, staff had not received formal training in regards someone's medical condition. Staff not receiving formal training may put the person at risk of harm, neglect and abuse and we have issued a priority action notice. The provider must take immediate action to address this issue.

Areas for improvement and action at, or since, the previous inspection. Achieved

Areas for improvement and action at, or since, the previous inspection. Not Achieved	
None	

Areas where priority action is required	
The service provider must ensure that there are effective arrangements in place for monitoring, reviewing and improving the quality of care and support provided by the service. Regulation 8 (1).	Regulation 8(1)
The service provider must not provide care and support for an individual unless the service provider has determined that the service is suitable to meet the individual's care and support needs and to support the individual to achieve their personal outcomes. Regulation 14 (1)	Regulation 14(1)
The personal plan must be reviewed as and when required but at least every three months Regulation 16 (1) When carrying out a review under this regulation, the service provider must involve the individual, the placing authority (if applicable) and any representative Regulation 16 (4)	Regulation 16(1) Regulation 16(4)
The service provider must ensure that at all times a sufficient number of suitably qualified, trained skilled, competent and experienced staff are deployed at the service having regard to – (b) the care and support needs of individuals; (c) supporting individuals to achieve their personal outcomes Regulation 34 (1) (b) (c)	Regulation 34(1)(b) Regulation 34(1)(c)
The Service provider must ensure that any person working at the service (including a person allowed to work as a volunteer) (Regulation 36 (2)) (e) receives specialist training as appropriate.	Regulation 36(2)(e)
The service provider must have arrangements in place to ensure that medicines are stored and administered safely Regulation 58 (1) These arrangements must include the arrangements for – The effective ordering, re-ordering, recording, handling and disposal of medication. Regulation 58 (2) (b)	Regulation 58(1) Regulation 58(2)(b)

We found poor outcomes for people, and / or risk to people's wellbeing. Therefore, we have issued a priority action notice and expect the provider to take immediate steps to address this and make improvements.

Areas where improvement is required	
The service provider must prepare a plan for the individual which sets out- (a) how on a day to day basis the individuals care and support needs will be met, (b) how the individual will be supported to achieve their personal outcomes (c) the steps which will be taken to mitigate any identified risks to the individuals well-being, and (d) the steps which will be taken to support positive risk taking and independence where it has been determined this is appropriate. Regulation 15 (1) (a) (b) (c) (d)	Regulation 15(1)

The area(s) identified above require improvement but we have not issued a priority action notice on this occasion. This is because there is no immediate or significant risk for people using the service. We expect the registered provider to take action to rectify this and we will follow this up at the next inspection.

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