



## Inspection Report on

**Allcare Nursing Agency Ltd**

**167 Station Road Deganwy  
Conwy  
LL31 9EX**

## **Date Inspection Completed**

3 August 2023

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## About Allcare Nursing Agency Ltd

Type of care provided	Domiciliary Support Service
Registered Provider	ALLCARE NURSING AGENCY LTD
Registered places	0
Language of the service	English
Previous Care Inspectorate Wales inspection	This is the first inspection of the service since it was registered under the Registration and Inspection of Social Care (Wales) Act 2016
Does this service promote Welsh language and culture?	This service is working towards an 'Active Offer' of the Welsh language and intends to become a bilingual service.

### Summary

People receiving a service from Allcare Nursing Agency Ltd are very happy with the care and support they receive and praise the staff who provide this. Care staff arrive when people expect them and often stay longer than the care plan requests. They go above and beyond to ensure people's wellbeing. There are Welsh speaking staff to care for people who prefer to speak in the Welsh language. Some people have enjoyed years of care from the service and say they would highly recommend the agency to others. Professionals are happy with the outcomes achieved for people they are involved with; they praise care staff for their caring approach, for their knowledge regarding dementia care, and their prompt communication and co-operation. People have choice and control about their care, specifying what they want, how they want their care to be delivered and changes are made swiftly when required. Staff have access to information about the people they care for, but this lacks detail and does not always highlight and mitigate risks.

The provider seeks the views of people using the service but also needs to seek views of professionals and staff. Frequent quality audits of systems and processes would help identify areas for improvement.

## Well-being

People have choice and control over their care. Their views are sought on what care and support they need and prefer. Social services commission the packages of care in most cases and they produce detailed integrated care and support plans for each individual. The services own plans lack the same detail and need improving. Improved quality monitoring is needed so that such issues can be identified sooner. People's views are sought about the ongoing care, and changes are made to care delivery if requested or needed. Information about the service can be provided in the Welsh language, and some people can have care provided by Welsh speaking staff. People's views about their care are sought annually but they told us they can make changes to their care plan and discuss any aspect of their care they are not happy with at any time.

People feel they get the right care and support when they need it. Health and well-being is a focus of the care provided. Care staff act promptly if there are any health concerns by contacting relevant family members, and health professionals to arrange home visits. Professionals gave us examples of how the service had improved outcomes for people with dementia and other mental health issues. They told us management are very approachable; they are willing to discuss and listen to what works well and change the way they are doing things to support people's health and well-being. Professionals praise staff for their knowledge on dementia care. They praise the continuity of staff which has enabled strong and trusting relationships between the staff and person being supported. All people receiving care said care staff can be relied upon to turn up on time.

People are protected from abuse as staff receive training on safeguarding and there are policies and procedures to guide them. They know when to raise concerns to management about people's well-being. Moving and handling risk assessments are completed to protect the person and the staff, and care summaries give basic instructions to staff on how to reduce risks in other areas.

People are supported to maintain family and personal relationships. People told us if care staff conclude their tasks in good time, they stay and chat about how their weeks have gone and they are described as fun and friendly, personable and cheerful. Staff take people to meet their friends and to do their shopping. Family members feel involved in the care planning and are encouraged and assured by regular feedback from the relatives receiving care and from staff providing it.

## Care and Support

The service provider considers a range of views and information before agreeing they are able to provide the care. The commissioning authority, usually social services, provide a detailed plan of the person's needs, abilities, desired outcomes, preferences, history, and present interests. The care manager visits the person in their home to gain the person's views. The service gains a clear picture of the person they are about to support. The manager knows the capacity and expertise of the current staff group and can make effective decisions about the ability of the service to meet the person's needs.

While the service has adequate information from the commissioning authority about the person requiring care, some of the detailed information is not transferred to the service's own plan of care. The manager completes a limited summary sheet of a person's needs to inform staff of what they need to do, omitting much of the more personal details about, for example, their history, what matters to the person, what makes them happy. Plans do not always include all the risks highlighted in the commissioner's assessment; we saw one person is at risk of falling due to visual impairment and this is not included in the summary instructions for staff. These omissions have not impacted on people using the service. All people and professionals involved in the inspection praise the care and confirm their care needs are met. Staff know them well and do what is needed to keep them happy and safe. While no immediate action is required, this is an area for improvement, and we expect the provider to take action.

Plans are updated on a continual basis. Daily notes evidence people's care is changed promptly as and when needed; we saw *'extra chores to be added to morning call'* following a change in the capacity of family to help. All people we spoke with say they get the care they want in the way they want it and can make changes at any time.

Care staff monitor the health and wellbeing of people they care for and will arrange GP appointments, refer to social services when needs change or contact family when required. Professionals praise the service for good communication and prompt feedback. The service can be relied upon to ensure information is passed to the relevant professionals swiftly. Professionals shared examples of staff going above and beyond in the interest of people's health and wellbeing. One person told us *'they help me keep my independence; they go above and beyond.'*

## Leadership and Management

The service provider has governance arrangements in place to help ensure the service runs smoothly. The manager is supported by a care manager and is in the office every week. They feedback to the RI (responsible individual for the service) to keep them up to date and there are reports indicating the RI visits the service every three months. Policies and procedures help ensure safe practices and informed staff, we observed staff contact the office anytime for advice and information. Staff are experienced and trained to ensure people achieve the best possible outcomes.

There are some arrangements in place for oversight of the service, but these are insufficient. The manager uses questionnaires to ascertain what people feel about the care they receive but these are not currently sent to staff, professionals, and relatives to provide a fuller picture. We saw many compliments and cards thanking the service for their service and professionals praise the agency and its staff. The local authority commissioning team have evaluated the service and completed a report of their findings; the manager has made some of the changes indicating a desire to further improve the service. More effective quality audit systems may have identified issues sooner, particularly around completeness and detail of the service's own care plans and, absence of a staff annual training needs analysis. We saw no quality audit reports to show any parts of the operation have been reviewed and audited throughout the year. While no immediate action is required. This is an area for improvement, and we expect the provider to take action.

People are supported by care staff who are suitably fit and have the required knowledge and skills to help people achieve their personal outcomes. We saw there are recruitment procedures followed and care staff are properly vetted. Care staff are registered with Social Care Wales; this ensures anyone providing support to people are competent and qualified to do so. Training records illustrate care staff are trained in a range of subjects relevant to their role. The service has purchased new computer software to provide them with a more effective data base; they will know when staff need refresher training, and the system will flag up due processes. Staff told us they feel valued and are happy working for Allcare. Many staff have worked for the agency for several years. Staff describe management as *"more like a family"* and *"very supportive"*. *"If you have a problem they listen to you. They'll do something about it"*.

### 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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15	staff are guided by care plans which lack detail and do not always identify all risks ad/or how to manage these.	New
80	Quality audits are insufficient to ensure all processes and systems are compliant with regulations.	New



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**Date Published** 15/08/2023