



Inspection Report on

Serenity Support Services Ltd

**Room G5
Ty Cynon
Navigation Park
Mountain Ash
CF45 4SN**

Date Inspection Completed

11/08/2023

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About Serenity Support Services Ltd

Type of care provided	Domiciliary Support Service
Registered Provider	Serenity Support Services Ltd
Registered places	0
Language of the service	English
Previous Care Inspectorate Wales inspection	19 th January 2023
Does this service promote Welsh language and culture?	This service does not provide an 'Active Offer' of the Welsh language and does not demonstrate a significant effort to promoting the use of the Welsh language and culture.

Summary

Overall people and their relatives are complimentary about the care and support they receive. Person centred plans are in place prior to the start of services. Potential risks are considered, and reviews are completed in line with regulations. Medication is administered and recorded appropriately. Care is provided by a consistent and knowledgeable team of staff who are familiar with people's needs. Overall calls are received at peoples preferred times and for the full duration.

Policies and procedures are in place to support positive practices. Recruitment checks are completed to ensure care staff have the right skills and approach to care. Staff have access to training and are sufficiently skilled to undertake their roles. Staffing rotas require some strengthening to accommodate peoples preferred call times and travel planning for care staff. The service offers regular supervision and staff feel supported and valued in their roles. The RI maintains good oversight to evaluate the service provided.

Well-being

The service supports people's rights and choices. Information is gathered from people and relatives to ensure plans are person centred. The care provided reflects individual routines and preferences. Regular reviews give people the opportunity to express their opinions and provide feedback on the service they receive. People are listened to and tell us they feel comfortable discussing any concerns or issues they may have. The Responsible Individual (RI) completes three-monthly visits and consults with people around the care they receive.

People have positive relationships with staff who provide a good standard of care and support. Detailed personal plans ensure staff understand the type of care required. People tell us care staff undertake tasks in the way they like and are kind and caring in their approach. Care calls are completed in an unhurried manner and are provided by a familiar team of staff. The completion of reviews ensure documentation remains accurate. We are told office staff are easy to contact and are professional in their approach. Medication is administered as prescribed and stored safely. Staff are confident in using PPE and report having easy access to supplies.

Systems are in place to help people remain as safe as they can be. Staff understand their safeguarding responsibilities and know how to report concerns. Risk assessments are in place to inform staff of any potential areas of risk and how best to reduce these. There are appropriate policies in place to support the running of the service. The management team deals with and reports any concerns or safeguarding issues in a timely manner. All care files and staff records are held securely. Care staff receive ongoing training and supervision to ensure their practice remains of a good standard. Recruitment checks are completed appropriately to make sure appointed staff hold the skills required. Quality assurance reports are completed to support ongoing improvements within the service.

Care and Support

Personal plans are detailed, and person centred. We saw evidence personal plans outline individual care and support needs. The service gathers information around people's life experiences, likes, routines, and preferences. Staff complete daily notes to record the support they provide. Supplementary charts are maintained to monitor any changes in people's health and well-being. We saw evidence plans are updated to reflect any changes and regular reviews are held to ensure people can feedback on their care. We saw people have access to copies of personal plans within their home. Care staff tell us they have access to plans before completing calls, this ensures they understand the level and type of care required.

People are complimentary about the care provided and have positive relationships with staff. People tell us they benefit from a consistent and familiar team of staff. Daily care records show a small and consistent team of staff provide support in line with people's personal plans. People tell us they are happy with the care and support they receive. They do not feel rushed or hurried during care tasks and staff take the time to ensure they deliver care in a way people like. Comments include:

"I can't fault the care they give me",

"They are brilliant", "They take their time and do their job",

Carers are "very kind",

"I feel I can trust staff",

"We have a laugh and I see them like friends".

Care calls are received at a time people like. Overall, people tell us care staff arrive at their agreed time and remain for the full duration of their calls. Comments include *"Call times are ok" and "They come on time and are rarely late"*. The service sends rotas each week to show the staff member allocated to each call and people told us they found this useful. Staff stated scheduled rotas did not always suit people's preferred call times, as a result they often changed scheduled times to accommodate these.

Medication management is safe and effective. Staff competency is checked before they can administer medication and there is a detailed medication policy in place for staff to follow. We viewed Medication Administration Charts (MAR'S) and found these to be accurate and fully completed, this indicates people receive the right medication at the right time.

Leadership and Management

Recruitment practices are safe, and staff feel supported in their roles. We found recruitment files are in good order and contain the required checks. All staff records are held securely in the office to ensure confidentiality. Staff report feeling happy in their roles, they describe the management team as approachable and responsive and feel confident in raising issues. We were told office staff are helpful and out of hours co-ordinators are always available to provide advice. Comments include:

"I love it (the job)",

"I feel supported by the service",

"Managers are very flexible",

"I love my job and the clients".

There are systems in place to monitor the quality of care provided. The service carries out audits to monitor the care provided, these include the use of spot checks, monitoring of call times, appraisals, and auditing of documents. Accidents and incidents are reported, actioned, and reviewed in a timely manner. Daily records and medication charts held in people's homes are collected and stored safely. Arrangements are in place to ensure all staff are registered with Social Care Wales, this is an ongoing process, and the service is making increased efforts to complete this within the required timeframe. The provider has sufficient policies in place to guide staff and these are kept under review to ensure they remain up to date. The RI completes six month quality of care reports to consider the standard of services provided and any improvements required.

The management of staff rotas requires strengthening. Care staff told us travel times between allocated calls are overall sufficient. We were told the scheduled order and times of calls often varied and are not always provided at peoples preferred time. Staff comments include. *"We know what time they (people) like"* and *"We move calls around to what people want"*. The RI of the service advised they are already aware of this issue and provided evidence to show they are taking positive steps to address this matter.

Staff receive regular training and supervision. Newly appointed staff tell us they are offered a period of induction as well as opportunities to attend shadowing visits with experienced colleagues. The training matrix we viewed, and staff feedback evidence that training is offered on a regular basis. People using the service tell us they are confident staff are skilled and able to carry out their roles. Records and feedback from staff show formal one to one supervision is offered. Minutes show these sessions are used to discuss wellbeing, daily practices, and professional development.

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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N/A	No non-compliance of this type was identified at this inspection	N/A
80	The RI does not undertake quality of care reports in line with regulations.	Achieved
58	The service does not have effective medication management systems in place.	Achieved
36	The service does not provide staff with regular opportunities for one to one supervision.	Achieved

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Date Published 13/09/2023