



# Inspection Report on

**Serenity Support Services Ltd**

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

**Date Inspection Completed**

19/01/2023

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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	
Does this service provide the Welsh Language active offer?	This theme was not considered at this inspection.

### Summary

We undertook an unannounced focused inspection to consider Priority Action Notices issued at the last inspection. These relate to reviews, Responsible Individual visits, and call times.

We found the service has made improvements in all priority action areas. Personal plans are reviewed to ensure they remain up to date and accurate. Calls are received on time and care staff stay for the agreed duration. The Responsible Individual completes regulatory visits to ensure they maintain sufficient oversight. People are happy with the care provided and receive a reliable and professional service. Overall care staff are happy working for the service however some feel rotas and communication needs improvement.

## Well-being

People have a voice and receive care in line with their personal plans. People told us they receive care from a familiar group of staff who are aware of their needs. Care staff arrive on time, complete tasks professionally and stay for the full duration of calls. Documents show the completion of reviews are in line with regulations and people and their relatives tell us they are actively involved in this process.

People are supported to remain safe and well. People and their representatives told us they know how to raise a concern and feel comfortable in doing this. Rota's demonstrate staff receive sufficient time to undertake call tasks and travel between visits. We found evidence the Responsible Individual meets with people, relatives, and staff to gather feedback on the service provided.

## Care and Support

As this is a focussed inspection this theme will not be considered in full. Consideration will be given to those areas raised as a Priority Action Notice and general observations made during the inspection visit.

The service reviews personal plans. The service has made improvements in this area since the last inspection. All personal plans we viewed show reviews are being completed routinely. Reviews consider if care is being provided in line with personal plans, if there have been any changes in people's needs and asks for feedback on the quality of the service provided. People we spoke with confirm they are regularly contacted by office staff to ensure they are happy with the service they receive.

Care calls are received as scheduled. The service has made improvements in this area since the last inspection. Rotas show calls are provided as scheduled and for the full duration. People told us the service is reliable, carers turn up on time and people are notified if calls are to be significantly later than scheduled. Staff take their time when completing tasks and remain for the full duration of their scheduled calls. People told us *"I don't feel rushed"*, *"They (staff) stay as long as they need to get everything done"*, *"Carers don't rush"* and *"They make me feel relaxed"*.

People benefit from positive care from friendly and professional staff. People and relatives told us tasks are completed to a good standard and carers are friendly. One person told us they feel comfortable with staff and *"we all get on very well"*. Other comments include *"Carers who come are very pleasant"*, *"They come with an upbeat attitude"* and *"They are wonderful"*. Relatives describe staff as a *"god send"*, *"mum sings their praises"*, *"they have been marvellous"* and *"I know they are taking good care of dad"*. Rotas we viewed and feedback from people indicate people receive regular carers. One person told us *"I have regular staff and they know what they are doing"*.

## Environment

As this is a focussed inspection this theme will not be considered in full. Consideration will be given to those areas raised as a Priority Action Notice and general observations made during the inspection visit.

We visited the office premises and found confidential records are stored securely with no personal or confidential information on display. Documentation which is stored electronically benefits from passwords and paper records are stored in locked cupboards.

## Leadership and Management

As this is a focussed inspection this theme will not be considered in full. Consideration will be given to those areas raised as a Priority Action Notice and general observations made during the inspection visit.

Overall, there are good governance measures in place. The service has made improvements in this area since the last inspection. We found the completion of three-monthly Responsible Individual visits are being carried out in line with regulations. People told us office staff are easy to contact and they feel comfortable in raising a concern or complaint. We found the Responsible Individual speaks with a selection of staff, relatives and people on a regular basis and maintains sufficient oversight of the service.

Overall care staff feel supported however rotas require some improvements. The majority of care staff told us they feel confident in approaching office staff and managers with concerns or queries. Comments include *“Coordinators are brilliant, they try to help you.”* and *“They (staff) try their hardest to help”*. While a small number felt the management team did not always take general concerns on board and at times spoke to staff *“Poorly”*.

All staff report having adequate time to spend with people during care calls and sufficient travel time. Care staff told us if additional travel time was required, they could contact office co-ordinators who were very accommodating. Some staff report additional calls are added to rotas at short notice without consultation and this caused additional stress. Comments include *“Lots of last-minute changes”, “They add them in randomly”, “We plan a rota and then things change, no phone call, or notice”*, Others felt their rotas were more stable with regular calls, with comments such as *“Staff rotas are good”* and rotas are *“Really fair”*.

### 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
16	The reviewing of the care plan is not completed at least every three months in line with regulations.	Achieved
21	Care calls are not received in line with peoples care plans and personal plans.	Achieved
73	RI visits 73(3): The RI visit the service to meet with staff and individuals at least every three months, which must be evidenced.	Achieved



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
80	The RI does not undertake quality of care reports in line with regulations.	Reviewed
58	The service does not have effective medication management systems in place.	Reviewed
36	The service does not provide staff with regular opportunities for one to one supervision.	Reviewed

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