



Inspection Report on

JSJ Supported Living Ltd

**Unit 53 Singleton Court Business Centre
Wonastow Road Industrial Estate (west)
Monmouth
NP25 5JA**

Date Inspection Completed

27/10/2022

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About JSJ Supported Living Ltd

Type of care provided	Domiciliary Support Service
Registered Provider	JSJ Supported Living Limited
Registered places	0
Language of the service	English
Previous Care Inspectorate Wales inspection	This is the first inspection to the service since it was registered under The Regulation and Inspection of Social Care (Wales) Act 2016.

Does this service provide the Welsh Language active offer?	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.
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Summary

JSJ provides a domiciliary care service to people living in Monmouth and the surrounding areas under the Gwent Partnership board. The responsible individual (RI) conducts the joint role as RI/ manager of the agency. People told us they are satisfied with the service/s provided and care workers are familiar and reliable. Since the pandemic, the agency has reduced the number of care and support hours it provides to people. We were told the agency is experiencing on-going staff recruitment and retention challenges. We identified areas of improvement in relation to people's personal plans and notifying the regulator of instances of infectious diseases. The service provider is expected to take the necessary actions by our next inspection.

Following our visit to the agency, Care Inspectorate Wales (CIW) was notified a long standing team member had been appointed as manager of the agency.

Well-being

People have the right information about the agency and the service it provides. The agency enables people who use the service to maintain control of their lives. People told us they are satisfied with their service. People do not always know which care workers will support them but care workers are familiar and visits are usually within agreed timeframe/s. One person said, *“very happy nothing too much trouble for them (staff) to do.”* Another person reported *“staff are all very friendly and cheerful, nice to have a chat.”*

People are supported with their physical, mental health and emotional wellbeing. The agency supports individuals with daily healthcare and general needs. People’s personal plans need revision to reflect people’s current needs. Routine reviews take place in line with regulations. The manager works with healthcare professionals to co-ordinate people’s care and treatment. Care workers support individuals with medication as and when needed.

People are protected from harm and abuse. Risk assessments support people both receiving and delivering care and support. The agency monitors accidents and incidents. Staff are trained in safeguarding protocols and report instances to the relevant agencies. Sound staff recruitment practices are in place. The agency monitors calls to avoid late, missed calls and ensures people’s needs are being met. The agency conducts regular spot checks on care workers to ensure they carry out their roles efficiently. CIW expects to be notified if there is an outbreak of any infectious disease.

Care and Support

People's personal plans do not always reflect a person's needs or gives staff enough instruction to deliver appropriate care and support to individuals. Personal plans are consistent with local authority plans which set out the number and duration of agency visits per day. However, the plans do not reflect a person's likes and preferences in relation to their care and support or identify any personal outcomes for the individual. This means individuals are dependent upon care workers knowledge of them to deliver care and support. We have identified personal plans as an area of improvement and the service provider must take action to address this.

Personal plans are routinely reviewed in accordance with the regulations. We saw evidence that people are consulted during the review process. The agency's risk assessments support individuals to be independent and meet their needs. The agency is responsive to the changing needs of people. We saw examples where care workers had identified a change in need for a person and requested a healthcare re assessment. Individual records show the actions taken by the agency to involve healthcare professionals however, the persons personal plan was not reflective of the changes which could mean care workers do not have up to date information and may not be able to deliver appropriate care and support. We did not see any evidence that individual's outcomes are being reviewed. While no immediate action is required, this is an area for improvement and we expect the provider to take action.

The agency promotes hygienic practices and manages risk of infection although, the regulator must be notified of infectious diseases. Staff are trained in infection control. Care workers can access organisational policies for advice and support. Personal protective equipment (PPE) is available to staff as, when needed. We were told of staff who had experienced Covid during the pandemic. The agency had notified public health agencies. We reminded the RI, that they are expected to notify the regulator (CIW) of any instances of any infectious disease such as Covid. While no immediate action is required, this is an area for improvement and we expect the provider to take action.

The agency has appropriate medication systems in place. Care workers support individuals with their medication according to their needs. Care workers are trained to administer medication to people. The RI routinely audits individual's medication charts. It was reported there have been issues obtaining individual's medication administration record's (MAR) from supplying pharmacies which has made it necessary for the care workers to hand write people's charts. The agency provided assurance they are consulting with the local authority to ensure individuals are fully safeguarded.

Environment

We visited the agency offices as it was the first inspection to the service since registration. The offices are suitable for intended use with secure storage facilities.

Leadership and Management

There are governance arrangements in place to support the day-to-day operation of the service. The responsible individual/ manager is a visible presence. Regular management audits are in place which support the effective running of the agency. There are monthly checks of missed, late calls, complaints and compliments, staff training and development. We noted there were no concerns or late or missed calls. The health, safety and welfare of people who use and work for the service are set out in supporting policies which are routinely reviewed. People's views of the service are considered. A six monthly quality of care review of the service has taken place. We found the report failed to establish the arrangements in place to monitor, review and improve the quality of care and support provided by the service. Given, the recent management changes to the organisation, we have identified this matter for consideration at our next inspection.

Following our inspection, CIW was notified a long term team member had been appointed as the service's manager who is registered with the workforce regulator, Social Care Wales. Their role is to carry out the day to day operation of the service. This has been a long term aim for the organisation. The service's Statement of Purpose (SoP) will need to be updated to reflect the key changes in management the organisation.

The service has robust recruitment practices in place. We viewed personnel files and found recruitment checks are in place to demonstrate care workers fitness to work with people who are vulnerable. All newly appointed staff receive an induction. This induction includes new care workers shadowing more experienced care workers before they commence their role. Staff complete a probationary period which further safeguards people using the service.

Care workers are suitably trained to support people appropriately and have the necessary skills to undertake their role. We viewed a staff training matrix which identified when individual staff members require refresher training. Staff are able to access online learning to maintain their skills and knowledge. Care workers performance is routinely monitored to support their development and senior staff conduct spot checks on care workers to ensure their performance meets the expectations of agency. People who use the service are regularly consulted about the care and support they receive from individual care workers. We saw a number of positive responses from people who use the service about staff. This information is discussed with individual care workers during supervisions. Staff receive supervision in line with the regulations. The service is working towards all care workers being registered with Social Care Wales.

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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15	We viewed three people's personal plans and found insufficient detail to support staff to provide consistent care and support according to the person's likes and preferences.	New
16	We looked at three people's personal plans. We found people's personal plans do not always reflect their individual needs. The plans are reviewed however they fail to consider if an individual has been able to achieve their personal outcomes.	New
60	The regulator has not been informed of instances where people using the service and or those working in it have experienced an infectious disease (Covid 19).	New

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