



Inspection Report on

TLC Nursing & Homecare Plus Ltd

**T L C Nursing & Homecare Plus Ltd
60 Pen Y Bryn
Wrexham
LL13 7HY**

Date Inspection Completed

19/06/2023

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About TLC Nursing & Homecare Plus Ltd

Type of care provided	Domiciliary Support Service
Registered Provider	TLC Nursing & Homecare Plus Ltd
Registered places	0
Language of the service	English
Previous Care Inspectorate Wales inspection	4 May 2021
Does this service provide the Welsh Language active offer?	This service is working towards providing an 'Active Offer' of the Welsh language and demonstrates a significant effort to promoting the use of the Welsh language and culture.

Summary

Relatives are happy with the care and support people receive from the service and are complimentary about care staff. Personal plans and risk assessments contain sufficient information and are clear for care staff to follow. We found there are inadequate arrangements in place for the medicines management. Care staff know people well and provide continuity of care and support. Care staff feel well supported, valued, supervised, and trained to carry out their roles and responsibilities.

There is strong leadership and management of the service. The Responsible Individual (RI) and manager are involved in the day to day running of the service. They lead by example and new care staff have the opportunity to shadow them directly. Professional feedback is positive commenting on the competence and proactiveness in resolving issues effectively.

Well-being

People have control over their day-to-day life. Relatives told us people are listened to and their preferences are respected. Care staff are matched with individuals and relatives told us it is the *“same carers which is important.”* They have rotas in advance so they know what care staff to expect and when they will arrive. Care staff told us their focus is on people; their preferences and they do what the person wants. They also said when people raise concerns or request changes, these are responded to and accommodated. Feedback from professionals includes care staff being dignified in the way they communicate with people and their families. They also commented that care staff promote people’s independence and support them to have their own voice and take control of their care.

Peoples physical and emotional well-being needs are mostly being met but arrangements for medication management needs improvement. Health needs are responded to in a timely manner and help is sought when needed. Improvements are required to ensure there are safe systems in place for people to receive their medication correctly and safely. Relatives are generally happy with the service provided and told us care staff arrive on time, are *“pleasant,” “nice,” “caring”* and do their *“job well.”* Professionals told us people are happy with the support from the service, the carers and their *“professionalism and decorum.”*

People are protected from abuse. Relatives and care staff told us they feel able to raise any issues or concerns they may have with the service. There is a safeguarding policy in place and care staff confirmed they have received training in safeguarding. Accidents and incidents are recorded and referrals made to safeguarding as required.

Care and Support

People are provided with the care and support they want; risks are considered, and they are listened to. Personal plans and risk assessments are in place for care staff to follow and are kept under review. Daily records show what care and support has been provided in line with their personal plans. Relative's comments include care staff doing a "good job," "lucky to be with them", "person is progressing brilliantly" and they are "encouraged to do for themselves." Professional's comments include their positive observations of care staff delivering personal hygiene and transferring and supporting people with moving and handling techniques. Relatives and care staff told us people's preferences are respected. People and relatives are kept informed of any changes to the care and support being provided, and they are contacted for their views about the service.

The provider has inadequate arrangements in place for medicines management. The RI told us care staff only prompt with medication. We found inconsistent and conflicting information in the statement of purpose and the medication policy about what support with medication care staff can offer. Medication Administration Record (MAR) charts are not being used by care staff. According to the training record only five care staff have received medication training. While no immediate action is required, this is an area for improvement, and we expect the provider to take action. However, we identified that some actions have already been taken by the RI to address this.

The provider is working towards actively offering a service in the Welsh Language. On arrival at the service, the RI and manager greeted us in Welsh. During our visit, the manager attended a Welsh class. Care staff spoke about how they are learning about different cultures as well as the Welsh language.

The provider promotes hygienic practices and manages the risk of infection. Care staff receive training in infection control. There is an infection control policy in place for care staff to follow. Personal Protective Equipment (PPE) is accessible for care staff.

Leadership and Management

People are supported by care staff who are recruited, supervised, and trained. Care staff files contain most of the information required and we discussed with the RI about checks on employment history. Care staff told us about completing their inductions and additional help they have to settle in. They have opportunities to spend time with more experienced care staff including the RI and manager before providing direct care to people. Care staff are supervised in their roles and the RI is reviewing this to ensure formal one to one supervision takes place as often as is required. Care staff told us they feel supported and receive plenty of training. The RI spoke about the internal training they provide for care staff as well as other external training available to them. Comments from care staff include all staff being helpful and kind, they like what they do, and they enjoy their work. They can approach managers with any issues, who are understanding and supportive. Relative's comments about care staff include "*good standard of carers,*" their attitude and confidence are great and "*can't fault their ability.*"

There are governance arrangements in place to support the service to provide care and support for people. Quality of care reviews have been completed six monthly to identify any improvements to the service. Feedback is obtained from people to monitor how care is being delivered. Relative's comments about the service include "*very happy with it,*" "*very good agency,*" "*really good*" and "*provide what we need and beyond.*" Comments from professionals include the service being extremely professional in person and on the telephone. They also told us the management are helpful, contacting them with any concerns and are very proactive in addressing these. The statement of purpose and policies and procedures are to be reviewed to ensure they accurately reflect the service provided in Wales and relevant, current guidelines. We discussed with the RI some issues raised about difficulties contacting the office and travel time, which they are to address.

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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58	The provider has not ensured that there safe systems for medication management. Ensure that staff receive training and are competent before managing, administering and supporting individuals to manage their own medication.	New
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