

Inspection Report on

Abacare Bangor Branch

Abacare Care Agency Ltd Unit 9 Llys Onnen Ffordd Y Llyn Parc Menai Bangor LL57 4DF

Mae'r adroddiad hwn hefyd ar gael yn Gymraeg

This report is also available in Welsh

Date Inspection Completed

25/05/2023



About Abacare Bangor Branch

Type of care provided	Domiciliary Support Service
Registered Provider	Abacaredig Holdings Ltd
Registered places	0
Language of the service	Both
Previous Care Inspectorate Wales inspection	This is the first inspection since RISCA
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.

Summary

People receive consistent care by care staff whom they know well. Care staff feel supported and encouraged by management. The management team are consistent and thorough and are effective in recruiting and sustaining staff via incentives. There are robust systems in place to ensure people receive the right care at the right time. There are ongoing investments into the service. Oversight of the quality of the service is thorough.

Well-being

People have control over their day to day lives and are central to the planning of their care, which is based on individual need. We spoke with people, and their families about the care provided and they are very happy. One person told us; "*The carers are all lovely* ". Another person told us, "*I wouldn't change anything*". The sample of care records we viewed are electronic, detailed, easily accessed and well organised. The electronic system allows for care to be reviewed and monitored at any time. People's choices and individual routines and preferences are recorded and followed by care staff.

People are assisted to be as healthy and active as they can. Care staff enable people to be as independent as possible. Appropriate links are made with health professionals when required. People are encouraged to stay in touch with family and friends. We evidenced good communication and record keeping regarding the care people need and receive. The oversight of care is efficient and reliable.

People are safeguarded from harm and risk. There are systems in place to ensure this and to prevent people from being harmed. We viewed thorough and detailed risk assessments which are based on individual need. Care staff told us they have enough time with people and in between calls. We evidenced this when reviewing personal plans. The training programme shows care staff receive ongoing training in areas such as safeguarding, falls, moving and handling, which is up to date. Management responds efficiently when care staff communicate issues. Care Inspectorate Wales (CIW) have found the service to be efficient and timely when responding to any concerns or safeguarding issues.

Care and Support

We viewed a sample of personal plans which are up to date, detailed to individual needs and accurate. We saw peoples' needs are central to the planning and provision of care. We were showed how the electronic care records can be recorded by the carers whilst they are with people. These can be accessed by all carers involved in individual care and overseen by management, in any location. The quality of the care records is good and accurate. Care records are set out to ensure people's individual needs, preferences and wishes are considered during each call.

The care records we viewed demonstrate effective communication and planning of care, in partnership with individuals, their family and relevant professionals. We spoke with professionals who told us communication from the provider is "timely, efficient and clear." We evidenced regular review of care needs and saw records are updated or changed if individual care needs change.

Care staff are involved in administering medication and there are effective procedures in place for care staff to follow. Care staff who administer medication have had the necessary training in medication administration. The service has up to date policies and procedures in medication, which care staff can access at any time via the electronic system. Care staff are effective in following guidance from health professionals and management. They told us they feel confident and supported in administering medication. Management oversees the medication process and monitor this regularly.

Environment

Leadership and Management

There are effective and robust governance arrangements in place. This is a key element to the good quality service which is provided. The statement of purpose (SOP) has recently been updated and is an accurate reflection of the service provided. All policies and procedures are up to date, reviewed and updated when required; these support and inform the training provided for care staff.

The quality of care is overseen regularly and thoroughly. Steps are taken to maintain good quality care via monitoring and ongoing improvement. The responsible individual (RI) and management team gather information about the quality of care. They speak to people, care staff, professionals, and family. Regular audits take place surrounding specific areas of care. These include personal plans.

There are effective measures in place to ensure financial stability of the service, whilst ensuring the service provided is of good quality. Training is provided for care staff in the offices which are accessible, appropriately secure, and central. Although the pandemic has had a negative impact on staffing levels, there is and has been ongoing and safe staff recruitment and retention. This was reflected in staffing records and service finance documents. We viewed a sample of audits, which shows effective and efficient financial planning and maintenance.

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

N/A	No non-compliance of this type was identified at this	N/A
	inspection	

Was this report helpful?

We want to hear your views and experiences of reading our inspection reports. This will help us understand whether our reports provide clear and valuable information to you.

To share your views on our reports please visit the following link to complete a short survey:

• Inspection report survey

If you wish to provide general feedback about a service, please visit our <u>Feedback surveys</u> <u>page</u>.

Date Published 04/08/2023