



Inspection Report on

Aylecare Domiciliary Services

Aylecare Ltd
11 Alexandra Road Gorseinon
Swansea
SA4 4NW

Date Inspection Completed

08/02/2024

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About Aylecare Domiciliary Services

Type of care provided	Domiciliary Support Service
Registered Provider	Aylecare Ltd
Registered places	0
Language of the service	English
Previous Care Inspectorate Wales inspection	12 April 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

People are satisfied with the care and support they receive from Aylecare Domiciliary Support Service. The service is managed by an established management team and has motivated staff. There is information available for staff to understand how to best meet people's care and support needs.

Staff are available in sufficient numbers and mix of skills to provide support to people. Support staff are knowledgeable, respectful, and caring. Specialist equipment is in place and health referrals are made to promote peoples' health and well-being.

The service provider has developed systems to enable them to capture people's views and has systems to develop person-centred information but this could be strengthened. The management team have put checks and processes in place to keep service delivery under review with quality assurance measures. There is a Responsible Individual (RI) in place.

Priority action continues to be needed with staff recruitment, supervision, appraisal and training. Also, the service provider needs to ensure the service is provided in line with it's Statement of Purpose (SoP).

Improvement continues to be needed with reviews of personal plans.

Well-being

People have control over their day-to-day lives. People told us they get on well with staff and commented, “*they’re as good as gold*” and another commented “*they cheer us up.*” Records show people are offered choices to make everyday decisions. The RI told us they regularly speak with people they support and their families about what is important to them and how to best support them. Staff told us they feel well supported by the management team and commented, “*we have excellent management*” and another commented “*we have great hours, they’re very flexible.*”

People get the right care and support. People and their representatives are involved in reviews, although these are not always on a three-month basis. People said their personal plan met their needs and felt care workers include them in the development of their plan. Records reflect referrals are made to a variety of healthcare professionals such as social workers and nurses. This is also confirmed by comments from visiting healthcare professionals who told us they are satisfied with the care at the service. Care workers do not always receive appropriate training to support them in their roles.

Care workers offer companionship and support people to do things they need. People’s relationships with others are considered during the development and review of their personal plans. These acknowledge the input people’s family and friends have in their care and support. The views of people’s representatives are regularly sought as part of the service’s quality monitoring process. People told us “*The staff go out of their way to help.*”

People are safe and protected from abuse and neglect. The service provider has safeguarding policies and procedures, which are aligned to current legislation and national guidance. Staff demonstrate an understanding of their role and responsibilities. People are familiar with the care workers supporting them and value the relationships they have developed. Care workers are not always recruited in a safe way. However, people supported by the service tell us they feel safe and secure.

Care and Support

People receiving a service from Aylecare Domiciliary Support service speak very highly of both the management and care staff. Comments from people and their representatives include *“they are our carers and also our friends”* and *“we couldn’t manage without them.”* This was further supported by people receiving a service such as *“they meet new challenges”* and *“the carers go out of their way.”*

People are provided with the care and support they need by staff who know them well. Personal plans are developed in consultation with people, considering existing care and support plans provided by health and social care commissioners.

Improvement continues to be needed with reviews of personal plans. These need to be reviewed on a three month basis. Records of daily activity are recorded accurately and succinctly. Records show the service provider ensures medical advice and professional help is sought where needed. While no immediate action is required, this is an area for improvement and we expect the provider to take action.

There is an appropriate medication policy and procedure in place. Audits are in place completed by senior staff assisting people with their medication. People supported by the service are assisted to administer their medication where needed. Medication is stored appropriately in the person’s home. Staff who support individuals to manage their own medication are trained and assessed as competent.

Policy, procedure, and application of hygienic practices are in place to reduce risks of infection. Staff demonstrate an understanding of infection control and the use of personal protective equipment (PPE). Staff wear appropriate PPE when needed and follow correct procedures.

Leadership and Management

People have access to information about the service. There is an accurate and up-to-date and a guide to the service so people know what services they can expect to receive. The relevant contact details are available to enable people to enquire about the service, make a compliment/complaint or to contact the relevant regulatory authorities. People tell us they know how to raise any concerns they may have about the service and are confident on the whole they will be listened to and any concerns are addressed appropriately.

Systems are in place to check on the quality of care and support but these required strengthening. Service providers need to establish, develop and embed a culture which ensures that the best possible outcomes are achieved for individuals using the service. People are asked their views in a number of ways including via questionnaires, face to face visits and telephone calls. The responsible individual (RI) completes their three-monthly records after speaking with people and checking records. Audits of aspects of the service take place regularly and a six-monthly report is completed following a review of the service.

The service provider has extensive oversight of the financial arrangements and investment in the service. The RI assured us the service is financially sustainable to support people to be safe and achieve their personal outcomes. The RI told us of investment such as *“The majority of our profits are re-invested into the business to allow us to continue to meet the support that is needed by our service users.”*

Priority action continues to be needed with recruitment of new staff through robust recruitment and vetting procedures. The sample of records reviewed by us showed that these records were insufficient. This is still having an impact on people’s health and well-being and we expect the provider to take action.

Priority action continues to be needed with supporting and developing staff with supervision, appraisal and training. The sample of files reviewed by us showed that staff did not consistently receive supervision and appraisal as required. Staff training needed updating to ensure staff have core and specialist training. This is to ensure they are confident in their roles and practice and enables them to make a positive contribution to the well-being of individuals using the service. This is still having an impact on people’s health and well-being and we expect the provider to take action.

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
36	Reg 36 - Supporting & developing staff. The service provider failed to provide supervision and appraisal at the required frequency in supporting staff to carry out their roles and responsibilities. In addition core and specialist training was not being provided at the required frequency and amount.	Not Achieved
35	Reg 35 (2) (d) - Staff files did not contain robust work histories and the required references.	Not Achieved
6	Reg 6 - The service provider has not provided the service in line with it's Statement of Purpose.	Not 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
N/A	No non-compliance of this type was identified at this inspection	N/A
21	Care and support is not always provided in a way which protects, promotes and maintains the safety of people. Ensure people are provided with the quality of care and support they need through a service designed in consultation with the individual such as reviews of personal plans.	Not Achieved

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