



Inspection Report on

Pembrokeshire County Council Domiciliary Support Service

**Milford House Centre
Dartmouth Street
Milford Haven
SA73 2AH**

Date Inspection Completed

26/04/2022

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About Pembrokeshire County Council Domiciliary Support Service

Type of care provided	Domiciliary Support Service
Registered Provider	Pembrokeshire County Council Adults and Children's Services
Registered places	0
Language of the service	English
Previous Care Inspectorate Wales inspection	This is the first inspection under RISCA
Does this service provide the Welsh Language active offer?	No. This is a service that does not provide an 'Active Offer' of the Welsh language. It does not anticipate, identify or meet the Welsh language needs of people /children who use, or intend to use their service.

Summary

Overall, Pembrokeshire County Council Domiciliary Support and Reablement services endeavours to support people to maintain their independence. The staff team are enthusiastic and want to make a positive difference to people's lives. Care workers focus on each person's needs, to positively impact on their well-being. People and their relatives say care workers support them well and are fabulous. Care workers feel well supported by the management team overall. Good communication channels are evident throughout the service and there are robust systems in place to monitor the quality of care provided.

Well-being

People are more than satisfied with the service they receive from both services. People say care workers support them very well and they are always respectful and professional in their approaches. Personal plans reflect each person's support needs and goals and care workers are aware of the importance of each person's well-being.

People say they feel safe with the care workers who support them in their homes every day, especially when the care workers are familiar to them. This gives each person reassurance that their needs and personal preferences are understood, this empowers people, and they are enabled to make choices. People say they know how to make a complaint and are confident the manager would listen to them if they did. Each person's privacy, dignity and personal information is always protected.

People say their care workers are rarely late and never rush them. People said about the reablement care workers, "*They are brilliant angels, they helped me get back on my feet again.*" And "*They are brilliant can't complain, they are helping me to get back to how I was.*" The encouragement and support the reablement carers provide, promotes people's independence and wellbeing. People said about the domiciliary care workers, "*The carers are very good, they give me time and listen.*" And "*They are very good, they mix up my times sometimes which is hard as I have a lot of appointments, having them come the same time each day is better for me.*" This means people can expect to receive the right support at the right time.

The provider does not offer the Active Offer of the Welsh language: this means being proactive in providing a service in Welsh without people having to ask for it. Some staff members do speak Welsh.

Care and Support

There are accurate and up-to-date plan for how care workers provide people's support, to achieve their best possible outcomes. The provider considers a range of information to ensure they can meet people's needs before their support is put in place. This includes obtaining information from relatives and external healthcare professionals such as social workers, together with all assessments relating to the person. From this, senior staff develop care records to describe people's support arrangements and requirements. All care workers access information about each person's support arrangements on apps installed on their work mobile phones: this means they can update the person's records there and then, giving senior staff in the office immediate access to any developments. Care workers with the reablement team cover calls with the domiciliary team, they told us *"The app is great but if you're with reablement you can't access the information you need for the domiciliary care. Each person has a copy of their care plan, but it is better to have the information before going in"*. Each person's needs are discussed at regular management meetings. In addition, to remain current, all care records are regularly reviewed, more frequently wherever support needs change.

People and their relatives are happy with the support they receive. One person said, *"Yes, perfectly happy. They mix up my times sometimes which is hard as I have a lot of appointments, having them come the same time each day is better for me."* Another person said they feel involved in what the care workers do when they visit them. They added, *"They are brilliant can't complain, they are helping me to get back to how I was."* However, some families were not happy with medication errors/missed meds on more than one occasion. This was discussed with the manager, and we saw evidence of the actions taken following these incidents. The provider needs to ensure they are notifying CIW when reoccurring medication errors happen.

The provider has detailed policies and procedures to manage the risk of infection. There are good hygiene practices throughout the service and care workers may refer to infection management policies when necessary. Measures are in place to ensure people are kept safe from infection as far as possible: this includes the monitoring of all visitors and the appropriate use of personal protective equipment by all care workers.

As far as possible, the service takes steps to safeguard people from neglect and abuse. Risks to people's health and well-being are clearly recorded and minimised so people can maintain their independence as far as possible. Care workers recognise their personal responsibilities in keeping people safe. They are aware of the whistleblowing procedure and are confident to use it if the need arises. They say they would go to the manager initially but would be confident to go to external agencies such as the safeguarding team if they thought they needed to.

Leadership and Management

The service is committed to developing a culture which ensures the best possible outcomes are achieved for people. There are clear systems in place designed to monitor peoples' well-being and the quality of support each person receives. The responsible individual (RI) identifies all actions needed to improve people's well-being in a six-monthly quality of care report. However, the RI does not evidence meeting with people and their relatives or members of the staff team to check on the overall quality of support being offered. While we have not issued an area for improvement on this occasion, we expect the provider to act on this and will follow this up at the next inspection.

Staff team meetings are held to give all employees the opportunity to discuss their work and to keep up to date with all new developments. During the pandemic, these meeting have been virtual and over the phone to ensure all staff were safe and followed the guidance. Three-monthly employee supervision records and annual appraisals show all care workers are regularly given the opportunity to discuss any issues they wish to raise, in a formal setting and have the conversations recorded.

The provider ensures there are enough knowledgeable and skilled care workers to provide the right support for people. Pre-employment checks take place before new employees start work - these include reference checks, photo identification and Disclosure and Barring Service (DBS) checks. The staff files held at the office do not contain the pre-employment checks, this is kept with HR. We discussed with the manager how it is evidenced these are completed, all information required to be seen for staff files is requested and sent by HR. The manager is working to develop an evidence and checking system. The staff induction programme links to the 'All Wales Induction Framework for Health and Social Care.'

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 inspection	N/A

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