



Inspection Report on

Primacy Care Ltd

**Sophia House
28 Cathedral Road
Cardiff
CF11 9LJ**

Date Inspection Completed

13/02/2023

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About Primacy Care Ltd

| | |
|--|---|
| Type of care provided | Domiciliary Support Service |
| Registered Provider | Primacy Care Ltd |
| Language of the service | English |
| Previous Care Inspectorate Wales inspection | [Manual Insert] |
| Does this service provide the Welsh Language active offer? | This service working towards providing an 'Active Offer' of the Welsh language and intends to become a bilingual service or demonstrates a significant effort to promoting the use of the Welsh language and culture. |

Summary

Primacy Care provides care and support to people in their own homes in Cardiff. Improvements have been made to ensure all documents around care are in place and up to date; and risk assessments are robust. People's experience of care provided and times of calls vary. While there are good examples of how the service goes above and beyond to help people identify and achieve their goals, there are some poor examples of care delivery where people are left feeling disrespected. The provider is continually reviewing the service provision and is taking immediate action to prevent any further distress caused to people.

A passionate responsible individual (RI) has improved oversight of the service. A dedicated manager has responsibility for the day to day running of the service and has good systems in place to support this. The care team receive good induction and training opportunities, but there is evidence that they do not always follow the robust policies and procedures. There have been improvements to the contractual arrangements for care workers.

Well-being

The provider ensures people's voices are heard. Information is available about the service so people can be informed and raise questions if they want to. People and their representatives are involved in assessment so that personal information can be captured and inform the care plan. Care plans are reviewed with people so they can identify any changes required. Where possible, the manager arranges these changes and people sign to show agreement. The RI consults people about their experience of care provision and addresses any issues that arise. While some people tell us that the management are approachable and will listen, often going above and beyond to provide support to people that is outside of the contractual arrangements, others have lost confidence as promises made have not been kept. When people make it known that they like to speak Welsh, the service tries to provide Welsh speaking care workers to support.

People do not always have support to stay as healthy and as active as possible. People have visits from their care and support workers who always arrive. There is an issue with some visits not taking place in a timely manner and care workers not always staying for the duration of the agreed time. Documentation indicates that people are getting the right care and support at the right time, however, there is a question over the validity of such documentation. People get help to contact health professionals if they need this, and the service actively supports people to make sure the right equipment is available to help care workers provide safe support. Care workers have sufficient background information that may help identify when a person is unwell.

The safety of people is considered but procedures are not always followed. Improvements have been made to ensure risk assessments and care plans are in place and up to date. The RI has improved systems to ensure better oversight of the running of the service. Care workers are recruited safely and receive a thorough induction. Refresher training is in place to ensure care workers stay up to date with their knowledge. As part of care delivery, care workers are not always following procedures, including protecting people from infection, as they are not adhering to the need to wear 'Personal Protective Equipment,' such as aprons.

Care and Support

Consideration is given to people's wishes, aspirations and desired outcomes. The manager meets with the person prior to care being delivered to ensure information is captured that will inform a care plan, outlining how care is to be delivered. This takes into account people's wishes and outcomes they would like to achieve. Documentation is updated accordingly and a personalised care plan and relevant risk assessments are produced.. A service in Welsh is provided where possible if requested.

Care workers can access information that will help them deliver care and support safely. Improvements have been made to ensure care documentation, is accessible through electronic and paper formats, and this is audited by the manager and RI to ensure it is up to date. People are involved in reviews of their care, and if changes occur, care workers are notified through communication systems and updated plans. Improvements have been made to update risk assessments alongside care plans. Care workers have information about people's health background so they can better understand how to support them if they present with symptoms that may require medical attention.

People are not always receiving consistent care and support in a timely manner. Improvements to monitor the times people get their care visits has helped the manager and RI consider if adjustments to travel time for care workers is required. Further attention to visit times is required as people tell us that care workers do not always arrive on time, and do not always stay for the duration of the agreed visit. Some people have an agreed schedule of visits so they are aware of who should visit at what time, but some people told us they couldn't rely on this to be accurate. The provider is considering how they can improve awareness and communication around visit times, and identity of the team of care workers who may attend a call, so that people are not anxious about this.

The service is not always helping people to maintain their health and well-being, and people's dignity is not always upheld. People's experiences of care are mixed. Some people experience poor care provision, with care staff not following care plan instructions. Some people have issues with staff conduct. Other people could not fault the service they receive and complimented the service on good care. We saw examples where the service goes above and beyond to support people with their mental health, with good communication being at the centre of this. When people have assistance or prompting service with medication, this is carefully documented and all records audited. People are supported to contact health professionals such as 'district nurses' and 'doctors' when they need help to do this, but we have been given examples where health professionals felt this was not done in a timely manner, with potential impacted on management of skin health. We are told that care workers do not always wear personal protective equipment when

required which can pose an infection control issue. Some documentation is completed to indicate care is provided as agreed, or, the person has refused the care offered, but there is a question over the validity of the entries on these documents. An 'Area for Improvement' notification has been issued related to care and support, and we expect the provider to take action to resolve the inconsistencies in care and the recording of this.

Leadership and Management

Governance arrangements are in place to support the smooth operation of the service but improved methods of working now need to be embedded. The RI is passionate about the care of people and is present at the service, assisting at times with the day-to-day running and provision of care. They are aware of their duties to oversee the quality of care and have systems in place to support this, but priorities around supporting the running of the service prevents the RI from full, impartial consideration of the quality of care. There are improvements in auditing and analysis of information and the RI is supporting improvements in the service based on this, but this is not always documented. Documents including the 'Statement of Purpose' and 'Service User Guide' have been updated, but the RI is further developing the documents to ensure details about timing of calls is included.

The workforce is recruited safely and are suitably fit to provide care and support to people in the community, but do not always follow procedures. The manager has the required level of management qualification and is dedicated to provision of quality care. Recruitment processes are robust and care workers undergo an in-depth induction where they receive information suitable for their role and are tested on their application of this when working. Improvements have been made to ensure all staff who require refresher training have received this. The provider is committed to supporting care workers to register with Social Care Wales (SCW), the workforce regulator, with an increase in the overall number of staff registered with SCW.

Care workers have options around a choice of contractual arrangements and are supported to contribute to improving the service. The provider has improved contractual arrangements with care workers. Care workers are encouraged to attend staff meetings where they can contribute to suggestions to improve the service. They can also contribute through the consultation surveys distributed by the RI. Care workers have regular supervision meetings with their line manager. Supervision is valuable as it is an opportunity for staff to discuss practice issues and needs in a setting that is formal and recorded.

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 |
| 6 | The service provider has failed to deliver the key objectives described in the statement of purpose document. There are no clear arrangements for the oversight and governance of the service. | 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 |
|------------|--|----------|
| 21 | The provider is not ensuring that care and support is provided in a timely and dignified manner, and all care is delivered as per the care plan. | New |
| 7 | The service provider is not ensuring the service is run in accordance with the statement of purpose. This is a breach of Regulation 7 (1). This is because the statement of purpose indicates there is a named responsible individual who has oversight of the service, and the statement of purpose has not been updated to reflect changes in organisational structure. Whilst there is some oversight by the provider, this is not in line with the formal monitoring that would be undertaken by a nominated RI. The document would also benefit from outlining the parameters in which the provider aims to deliver call times. | Achieved |

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