



Inspection Report on

Care & Independence (West Wales)

**Avon House
Suite 4
Dafen Trade Park
Llanelli
SA14 8NA**

Date Inspection Completed

10/11/2022

Welsh Government © Crown copyright 2022.

You may use and re-use the information featured in this publication (not including logos) free of charge in any format or medium, under the terms of the Open Government License. You can view the Open Government License, on the National Archives website or you can write to the Information Policy Team, The National Archives, Kew, London TW9 4DU, or email: psi@nationalarchives.gsi.gov.uk
You must reproduce our material accurately and not use it in a misleading context.

About Care & Independence (West Wales)

Type of care provided	Domiciliary Support Service
Registered Provider	WD Care Ltd
Language of the service	English
Previous Care Inspectorate Wales inspection	This is the first inspection under The Regulation and Inspection of Social Care (Wales) Act 2016
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

Care & Independence provide care and support to people in their own homes in West Wales, currently operating in the Carmarthenshire area. People are happy with the care and support they receive, and the prompt response they get to any changes in their needs.

The provider has experienced some difficulty with the recruitment and retention of care staff; however, this has largely only affected management tasks. The punctuality of calls is good, and people receive support for the amount of time agreed. Communication is good and if ever care workers are running late for a specific reason, people are kept informed.

People are involved in writing their personal plans, their care and support needs are documented clearly. However, there are gaps in the recording of the support people receive and with medication records.

Overall, care staff feel well supported but they do not all receive formal supervision as often as required. There are some gaps in the required information for staff records. The Responsible Individual (RI) has a good knowledge of the service.

Well-being

People speak positively about care staff and told us they feel safe and supported when they are with the carers. People told us “*The staff and the company are fantastic, they sort everything out for me*” and “*the staff are excellent, we depend on them and know we are in safe hands.*” People usually receive their support when it is planned and are made aware if any care staff are running late for a specific reason. One person told us how they are able to remain living in their own home due to the support they receive from Care and Independence.

Medication records are not always completed clearly to evidence people have had their prescribed medication at the correct times. The manager told us about difficulties transferring to a new electronic record system for medication and so the service is returning to paper records to rectify the issues. We found that oversight in the management and auditing of medicines and care delivery is not adequate to safeguard people from the risk of harm.

Calls are well planned and allow care staff sufficient travel time in between calls to ensure care provision is provided for the planned time, which supports people to achieve their personal outcomes. We found not all staff recruitment checks are thoroughly completed, failure to do this may impact on people’s safety.

The safeguarding arrangements in place ensure people are appropriately protected from the risk of harm. Staff receive training in Safeguarding and are confident in how to respond to any concerns in line with current guidance.

Care and Support

People benefit from being supported by familiar care staff, usually at the times planned. People told us if care staff are ever running late, they are informed of this by the office staff. People are involved in completing their personal plans, which contain a good level of detail to inform care staff how best to support people to meet their needs and aspirations. Plans include information about people's social history so care staff can get to know the person as well as their needs. Plans are kept under regular review to ensure any changes are captured. We saw evidence of incidental Welsh language being used in plans and in service delivery.

The provider has introduced an electronic record keeping system and we found some gaps in people's records. This is important to ensure there is evidence of people being supported in line with their personal plans. Some risk assessments are not available to care staff in people's homes and some care staff have difficulty accessing this information through the technology they have. While no immediate action is required, this is an area for improvement, and we expect the provider to take action. We will follow this up at our next inspection.

The provider has systems in place for the safe management of medication. However, we found unexplained gaps in some people's electronic medication charts so could not be assured people had received their medication as planned. While no immediate action is required, this is an area for improvement, and we expect the provider to take action. We will follow this up at our next inspection.

Leadership and Management

Care staff are given sufficient time to travel between calls and told us the organisation of their working days is good. The provider has experienced some difficulty with staff recruitment and retention, which is a sector wide challenge. The management team have supported care calls where required to ensure people receive their support as planned. However, this has had an impact on some management tasks.

Overall, care staff feel well supported by the management team. We were told the manager is very responsive to any changes in people's needs, and visits people in their homes promptly to ensure everything is working well for them.

Some mandatory training courses, such as how to support people with their mobility has not always been completed prior to care staff performing these tasks. Some of this training had been limited due to COVID restrictions but is now widely available and we note the provider has arranged for this training to take place. Care staff have not received regular one to one supervision with their line manager as often as required by regulations. This is important to ensure care staff are able to reflect on their practice and seek guidance as required. While no immediate action is required, this is an area for improvement, and we expect the provider to take action. We will follow this up at our next inspection.

We found gaps in the care staff personnel records, not all information required by regulations is kept. This includes full employment histories, written references and proof of identification. While no immediate action is required, this is an area for improvement, and we expect the provider to take action. We will follow this up at our next inspection.

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
------------	---------	--------

35	Personnel records for care staff do not all contain the required information	New
36	Care staff do not receive one to one supervision as often as required by regulations	New
58	Medication records were not completed accurately to evidence who has administered medication and whether people's medication was administered at the correct times	New
59	Care records are not kept accurately to evidence all care and support delivered. Not all risk assessments were available to inform care staff when working in peoples homes	New

Date Published 13/03/2023