



## Inspection Report on

**Quayside Care LTD**

**Grove Garage  
Redstone Road  
Narberth  
SA67 7ES**

**Mae'r adroddiad hwn hefyd ar gael yn Gymraeg**

**This report is also available in Welsh**

**Date Inspection Completed**

24/10/2023

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## About Quayside Care LTD

Type of care provided	Domiciliary Support Service
Registered Provider	Quayside Care LTD
Registered places	0
Language of the service	Both
Previous Care Inspectorate Wales inspection	31 January 2023
Does this service promote Welsh language and culture?	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

People and their representatives are happy with the care and support they receive from Quayside care. They feel listened to and their wishes and preferences are considered. Care staff are kind and caring and provide support in a relaxed manner. Managers are accessible to people to discuss any concerns they may have.

The Responsible Individual (RI) and manager have good oversight and are described by staff as supportive and approachable. Care staff are recruited safely and receive ongoing training and supervision to undertake their role. Further development of the staff supervision system will ensure they benefit fully from it and areas for further training and support can be identified.

Policies are up to date and hold the relevant information. Personal plans and reviews are relevant and reflect the support needs of individuals. Individual records would benefit from more consistency.

## Well-being

People have a voice and they feel listened to by staff. Care and support is provided to enable people to remain in their homes for as long as possible in line with their wishes. Family members are appreciative of the support they receive and one person told us, "*They are my lifeline*". Records show people are consulted and involved in creating and reviewing their personal plans and their wishes are considered.

People are respected as individuals and supported by staff who are kind and caring. The majority of people and care staff are English speaking however one member of staff told us they are learning simple Welsh phrases from a person they support. The manager has plans to translate some key documents into Welsh.

Rotas ensure that calls are undertaken at a relaxed pace and enough time is given to carry out the required tasks. One staff member said, "*We have time to sit with people for a chat and they then open up to us and will say if they have any problems*". People experience positive health outcomes because care staff know people well and notice any changes that may require additional support from health professionals. Referrals are made in a timely manner.

People are protected from abuse and neglect. Care staff have received safeguarding training and are aware of the process to follow if they feel a person is at risk. Staff spoken with would not hesitate to report any concerns to managers and outside agencies if necessary. Care staff have undergone the required checks to ensure they have the necessary skills, qualifications and character to undertake their role safely and competently. Managers undertake spot checks on care staff during calls to monitor the quality of care provided and to identify any areas for improvement.

## Care and Support

People are happy with the care and support they receive. Personal plans are mostly detailed and are created with the individual and/or their representative. A 'pen picture' gives care staff background information on a person's life and social history and enables them to have a better understanding of each person. A one page profile summarises the main points of the plan and includes who and what is important to individuals and what support is required at each visit.

People choose what support they want and how they would like it delivered, Care staff respect their wishes and preferences and one person told us *"They (care staff) are always very helpful, very obliging and will always ask 'Is there anything else we can do', before they leave"*. A family member told us, *"Nothing is too much trouble, they go above and beyond"*. Personal plans would benefit from being more consistent, some staff write more detailed plans than other staff. Risk assessments ensure any potential hazard is identified and managed, to reduce any risk to those receiving and providing care and support. Contingency plans ensure unexpected events such as severe weather are managed safely.

Personal plans are reviewed on a regular basis. We saw evidence that people are involved in reviewing their plans and their views are considered. One person told us *"They will try and accommodate whatever I need"*. People told us they know who to contact if they have any concerns and are always able to get hold of someone in the office.

The provider understands the importance of continuity and will endeavour to rota the same care staff for people where possible. This promotes positive and trusting working relationships. Continuity of care staff means they know people well and notice any changes in their presentation or care needs. Managers are made aware and we saw evidence of timely referrals to the Local Authority to request a review of care and support needs when required. There is always a senior on duty and there are good lines of communication. A family member told us, *"They always keep me up to date"*.

## Leadership and Management

Both the RI and manager have good oversight of the service. The RI undertakes quarterly visits and reports demonstrate that staff and people receiving a service are consulted. Audits and monitoring processes ensure that systems are reviewed and any areas of concern are identified and addressed. Quality of service questionnaires also provide an opportunity for people to express their views on the service they receive.

Staff spoken with said they feel supported by managers and said managers are contactable at any time. One staff member told us, "*If you have any questions there is always someone you can ask*". Staff also feel supportive of each other and can 'pull together' in a crisis. Regular one to one supervision is provided to staff and monitoring visits are undertaken during care calls. Senior staff review care staffs' performance and are able to identify any areas for development or further training. We found this process is currently not as effective as it could be and the manager is taking action to improve this.

There is a robust recruitment system in place and the required checks are undertaken prior to staff commencing employment to ensure they are suitable for their role. These include Disclosure and Barring Service (DBS) checks, Identification and employer references. Staff are up to date with most of their mandatory training, whilst some have undertaken additional specific training. A Manual Handling consultant has been appointed and will provide theory training in the office and practical training whilst out on calls. An additional room has been secured at the office and will be used for Manual Handling training/practice for staff.

Key policies were looked at and found to be up to date reflecting Welsh legislation. Staff meetings are held regularly and those unable to attend are provided with minutes to ensure they are kept informed. People supported are provided with a Service User guide which contains pertinent information such as the complaints procedure. Some people however state they are unaware of where to locate the complaints procedure. The manager intends to rectify this to ensure people are aware of where to find important information. We saw many compliments from people's families on display at the provider's office, with some heartfelt messages showing their appreciation of the support their relatives have received.

### Summary of Non-Compliance

Status	What each means
<b>New</b>	This non-compliance was identified at this inspection.
<b>Reviewed</b>	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.
<b>Not Achieved</b>	Compliance was tested at this inspection and was not achieved.
<b>Achieved</b>	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
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N/A	No non-compliance of this type was identified at this inspection	N/A
80	The RI has not completed a review of quality of care and support in the required frequency of 6 monthly. The most recent report available at the time of inspection was dated 15/02/2022.	Achieved
36	Not all staff are up to date with the required training. Provider to ensure all staff d) receives core training appropriate to the work to be performed by them; (e) receives specialist training as appropriate;	Achieved
35	The required documentation for staff was not in place. We looked at three staff files, two of which had gaps in employment history and two of the three files looked at had only one reference.	Achieved
73	The RI is not undertaking Reg 73 visits at the required timescales of at least every 3 months.	Achieved



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