



Inspection Report on

PRIDE Health and Social Care Limited

**Parkway House
Hambrook Lane
Stoke Gifford
Bristol
BS34 8QB**

Date Inspection Completed

31/05/2022

Final unpublished report

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About PRIDE Health and Social Care Limited

| | |
|--|---|
| Type of care provided | Domiciliary Support Service |
| Registered Provider | PRIDE Health and Social Care Limited |
| Registered places | |
| 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? | 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

Pride Health and Social Care Limited is a domiciliary support service. This report is for the Cardiff & Vale; and Gwent areas, due to both supporting 20 or less people. The registered services in Cwm Taff and West Glamorgan are currently dormant and not delivering care. The Responsible Individual (RI) is Darlington Mhungu. The manager, who covers all areas, is registered with Social Care Wales and ensures the smooth running of the service on a day-to-day basis.

We carried out an announced inspection of the service. To comply with the current pandemic restrictions, we undertook visits to the registered office to view documentation. Documentation required under regulations is maintained. This is thorough and regularly kept under review. People's care and support plans are individualised and explain how best to support a person. There are processes in place to safeguard people from harm and the risk of infection. There are systems in place to ensure there is oversight of the quality of care and support delivered.

Pride Health and Social Care Limited offers consistent, reliable, sensitive support to people with complex care needs, in their own homes and assists them to lead fulfilled lives. Feedback from staff, people using the service and other professionals involved is positive. Staff are supported and trained and feel equipped to carry out their duties. Professionals confirm collaborative work and the success the service has in supporting people in their care.

Well-being

People have control over their day-to-day lives. People are listened to and encouraged to speak for themselves, so they can make decisions within their capability, especially around day-to-day choices. People are treated as individuals, with their circumstances considered and supported. Care staff and people using the service know each other well. Care workers are familiar with people's needs, wants and routines and know how best to support people to achieve their personal outcomes. Care staff promote choice and have a very good knowledge of the people they support and are therefore able to notice any changes quickly and respond promptly.

The service promotes people's physical and mental well-being. The service works in partnership with other agencies to develop personal plans and risk assessments, which contain detailed key information within and are person centred. Care documentation is individualised, detailed and informative. Reviews are undertaken regularly. People remain as healthy as they can be, due to timely referrals and good communication with external professionals.

People are supported by the right number of appropriately trained care staff. Care staff receive specialist training to help them understand how best to support people. There are systems in place to safeguard people from harm. The service has appropriate infection control measures in place and care staff have access to relevant personal protective equipment (PPE) to reduce the risk of infection. The recruitment process is robust and ensures care staff suitability for the role. Care staff receive training to meet the needs of the people they support. Risks to people are assessed and their safety managed and monitored so they are supported to stay safe.

People or their representatives receiving support told us:

'I have a great care team. Carers are recruited based on my needs. If I am unhappy then they always try and resolve any issues.'

'Everybody works hard to make my package work in the best way that it can. I am treated with dignity and respect and my views are listened to. I very much appreciate this as I have had a lot of experiences of care companies, and this is head and shoulders above the rest.'

Care and Support

The service provider is clear about its aims and objectives. We viewed the statement of purpose (SOP). The SOP is fundamental in setting out the vision for the service and is a key document that should clearly demonstrate the range of health and care needs the service will provide support for, including any specialist service/care provision offered. The SOP provides an overall picture of the service offered and has been updated.

People have person-centred care and support that is of a good standard. This is consistent in both geographical areas. This means that people receive a service that is specifically designed to meet their needs. People supported by Pride Health & Social Care Ltd. have complex care needs. Detailed personal plans set out their care and support needs and provide care workers with clear instructions. Risk assessments highlight people's vulnerabilities and contain information on how to keep people safe. We examined several people's personal plans and found they are developed in conjunction with the person and their representatives and are reviewed periodically to ensure information is up to date. Care staff told us personal plans are easy to follow and contain all the information they need to support the person effectively. Audits of people's care delivery and health and safety monitoring is in place.

The service strives to provide continuity of care to people they support. Care staff know the people they support well and can anticipate their needs and wants. New staff have the time they need to meet people and read care documentation. Care staff are supportive of each other and complimentary of the support peers and members of the management team provide.

People have positive relationships with care staff who treat them with kindness and respect. This was confirmed by feedback from people and their family/relatives.

Staff are happy in their roles and feel valued by management. We were told:

'Pride provides a service which suits the service user which I think is important.'

'I'd recommend this company as the quality of care I've given/seen given is great and they value their patients'

'The Company looks out for all employees' health and physical well-being, as well as ensuring that employees are enrolled for trainings. There is good communication.'

'I feel supported by everyone including my colleagues, office staff and clinical nurses.'

Leadership and Management

A dedicated, well-organised manager has responsibility for the day-to-day running of the service and along with the lead nurse, demonstrates outstanding knowledge of the specialist care that the service provides to people.

There is a robust system to recruit care staff, with staff personnel files containing all necessary information. The induction process ensures care staff have adequate time to work with people they support so they get to know them well, and people feel comfortable being supported by them.

Care staff have relevant training and competency checks to meet people's needs, including specialist training to meet the individuals bespoke care needs. All care staff have received theory-based manual handling training. The service is having trouble in obtaining practical manual handling training due training provider availability. The service has informed commissioners of this. We propose both manual handling competencies and spot checks are included on the training matrix.

Care staff are supported in their role and receive supervision to ensure they have the skills and competence to support people. Staff said they felt equipped to undertake their duties. Policies and procedures help support the delivery of the service. These are reviewed and contain the relevant legislation and local guidance.

Written information documented in the Statement of Purpose and information leaflet outlines the services aims, values and service provision. They are available for people who use the service and contain practical information, including how to make a complaint and contact telephone numbers for agencies such as Care Inspectorate Wales. Internal systems and processes are in place to ensure the service delivers its aims and objectives effectively.

Governance arrangements in place support the operation of the service. Systems in place inform the responsible individual (RI) and management team of issues that occur. We viewed a sample of internal audits. The RI visits people in their own home, speaks to individuals and assesses the quality of care provided, producing reports to evidence their findings and outline plans for future service development. The RI completes a six-monthly quality of care report for the service that shows oversight of service delivery.

People or their representatives receiving support told us:

'Pride should be proud of what they achieve. The care manager is always at hand to offer a listening ear and put my mind at ease if I raise any concerns and always acts promptly if I do. The office staff are always at the end of the phone if I have any questions and the company nurses are always there to answer any question I may have.'

Commissioners and other professionals told us:

'Pride Health Care, offer service users a reliable and committed Service. Staff are professional and client focused. Pride act as an advocate for our clients and are reactive to changes in care needs.'

'Pride work very hard to set up bespoke packages of care for our clients in a holistic manner. They use local employees where possible, and this contributes to the overall consistency of care delivery.'

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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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