

Inspection Report on

Resolution Care Services Ltd

C5 Business Centre North Road Bridgend Industrial Estate Bridgend CF31 3TP

Date Inspection Completed

10/11/2022

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About Resolution Care Services Ltd

Type of care provided	Domiciliary Support Service
Registered Provider	Resolution Care Services Ltd
Registered places	0
Language of the service	English
Previous Care Inspectorate Wales inspection	This is the service's first inspection post RISCA registration.
Does this service provide the Welsh Language active offer?	This service does not provide an 'Active Offer' of the Welsh language and does not demonstrate a significant effort to promoting the use of the Welsh language and culture.

Summary

Resolution Care Services provide support to people over the age of 18 years in their own homes.

People receiving a service from Resolution Care Services receive care from staff who are happy in their roles and feel well supported. They receive regular 1:1 supervision, team meetings, and appropriate training, that ensures staff have the skills and knowledge to carry out their roles effectively and have the opportunity to raise any concerns. People have accurate and up to date personal plans which detail their individual care needs. People, and their representatives, are complimentary about the positive relationship they have with staff and are happy with the service provided. Appropriate and up to date policies ensure staff have the information and guidance they need. The responsible individual (RI) carries out all his regulatory duties.

Well-being

People have choice about the care and support they receive. Staff develop plans with the individual and their representative, using recognised assessment tools. People provide feedback face to face, through telephone monitoring, or through service satisfaction surveys, which contributes to the quality assurance of the service. People's language and communication needs are considered. The service does not currently provide the Welsh language offer, however we are told the service does have access to translation services and do have a Welsh Language Policy in place.

Staff document people's needs and risks to their safety and well-being, in personalised risk assessments. The service is responsive to changes in care needs and regular reviews are carried out. The service uses an electronic care monitoring system, which allows care staff to communicate with office staff and the management team. The system also enables office staff to communicate promptly with care staff about any changes to rotas or care tasks.

Staff help protect people from potential harm or abuse. Staff receive safeguarding training and have knowledge of the procedure to report any concerns they have. Up to date safeguarding and whistleblowing policies are in place to provide guidance and support to staff.

People can have assistance with their medication if required. There is a medication policy in place at the service, and staff have medication training and monitoring to ensure they can carry the tasks out safely and appropriately. Regular audits are carried out by the management team, but a review of the procedures would reduce issues such as mistakes in recording on Medication Administration Records (MAR).

Care and Support

People and their families have positive relationships with staff. People told us the communication is very good. We saw a service user guide people are given and a statement of purpose, which is consistent with the service provided. Management ensures they inform staff of everything they need to know to provide good daily care and provide channels to feed any concerns or queries back to the office. Staff use a care monitoring application on their phones to access care plans, rotas, and daily notes. Feedback from people and their families is positive. One person said about staff *'they're superb... it's the little extra things they do, very person-centred...nice to hear the laughter'*. Another also told us about staff *'they're terrific... nothing too much trouble...by far the best'*.

Care plans consider people's personal outcomes, as well as the practical care and support they require. We saw evidence these are reviewed regularly. These involve people, their families, and other professionals, such as social workers and occupational therapists.

There are measures in place for assisting people with their medication, if needed. A medication policy is in place, but a review of the procedures would reduce errors/incidents. All staff have up to date medication training, and supervisors check care staff competence in supporting people with medication through spot checks and competency assessments. Some MAR charts viewed were completed appropriately but this needs to be more consistent.

The service aims to protect people from potential harm and abuse. All staff receive safeguarding training and there are policies in place informing them how to report abuse. Staff told us they feel confident they would know what to do if they were concerned about someone at risk of harm and could approach management with these issues.

There are infection control measures in place. The majority of staff have received training in this area and there is an up to date policy and procedures in place. During our office visit, we saw there were good supplies of Personal Protective Equipment (PPE) such as masks, gloves, and hand sanitiser. People receiving care and support told us staff still use PPE when in their homes.

Environment

As this is a domiciliary support service, we do not consider the environment theme. On the day of our site visit, the inspector was able to access the main building with no security checks, however it was noted the office for the service was locked and had lockable units for care files and other confidential information. The RI re-assured us both the filing cabinets and office are locked when not in use. The RI also advised the main building is used by other services, but the doors to the main building are usually only accessible via intercom through the main reception. The service is in the process of finding alternative office space.

Leadership and Management

Staff are knowledgeable in their roles and responsibilities and feel well supported by the management team. Staff told us they have time to gain the knowledge and experience they need before visiting people on their own. There is an induction process in place, which includes training and shadowing other staff. Staff have regular supervision that includes one-to-one discussions with the management team regarding their wellbeing and professional development, 'spot checks', and competency assessments. Staff receive training, which includes a mix of online e- learning and some face-to-face training.

Staff told us they receive rotas in good time via the care monitoring application and management advises them of any changes. Staff told us they feel happy and confident in their roles. One staff member said of the job '*I absolutely love it*' and of the management team '*genuinely the best you could ask for*'. Another said '*I'd not been keen on this type of work, but it*'s the best experience I've had...the managers are very supportive'. Recruitment and vetting processes are in place and are robust. All staff have up to date Disclosure and Barring Service (DBS) checks. Recruitment is ongoing at the service mainly using online platforms, and incentives for existing and new staff such as bonus schemes and travel mileage.

There are monitoring and auditing processes in place to maintain the quality of the service. The RI visits people in their own homes and has good oversight of day-to-day occurrences with staff and people receiving care. Quality of care reports and quality assurance reviews are completed. People receiving support provide feedback on the service during visits, through monitoring calls, and satisfaction survey questionnaires. They told us they can call the office with any issues or queries. A log of complaints and reportable incidents is kept at the service. A complaints policy is also in place, but there have been none at the service since their registration. Very few formal notifications have been received by Care Inspectorate Wales (CIW) since the service's registration. Although it appears only one incident has been missed, the RI needs to ensure all regulatory notifiable incidents are sent to CIW and in a timely manner.

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. Th 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	N/A
	inspection	

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