



Inspection Report on

Lotus Care and Support Services

**Storage Giant Ltd
Unit 12
Ty Coch Way
Cwmbran
NP44 7HB**

Date Inspection Completed

13/10/2022

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About Lotus Care and Support Services

Type of care provided	Domiciliary Support Service
Registered Provider	Lotus Care and Support Services Limited
Registered places	0
Language of the service	English
Previous Care Inspectorate Wales inspection	This was the first inspection since the service was registered under the Regulation and Inspection of Social Care (Wales) Act.
Does this service provide the Welsh Language active offer?	Yes. The service provides an 'Active Offer' of the Welsh language. It anticipates, identifies and meets the Welsh language and cultural needs of people who use, or may use, the service.

Summary

People are involved in their care and can express their views knowing they will be listened to. They enjoy familiar rapport with care staff and have access to specialist support and advice. Regular care workers promote good continuity of care and support for people using the service. Care documentation shows people are actively involved and consulted in decisions that affect them. Personal plans are in place although these do not always give sufficient detail on people's specific support needs or risk management. People are safe and are supported by staff who are well trained and supervised in their role. Medication and infection prevention and control practices are in place. Safeguarding policies are implemented well by all staff, promoting consistently safe working practices. There is good oversight of the service by the responsible individual (RI) with comprehensive quality assurance processes in place.

Well-being

The service provider promotes people's physical, mental, and emotional well-being. People and their relatives we spoke with feel valued and involved in the service delivery. Support and advice is sought from external healthcare professionals in a proactive way. Regular reviews provide opportunities for people to discuss their care and support with trained staff. Positive relationships are developed with regular care workers building trust and confidence. Staff are well trained and have a thorough understanding of their responsibilities. They are therefore confident in their role and able to provide a quality service to people. The provider must ensure staff have access to personal plans containing sufficient detail to ensure support is delivered in line with people's individual needs and preferences.

Mechanisms are in place to safeguard people. People we spoke with know whom to contact if they have any concerns. Records reveal care workers complete an induction and training to help them understand their role and promote people's health and well-being whilst protecting people at risk. Disclosure and Barring Service (DBS) checks are carried out on all staff. These regular updates are important to consider a staff member's suitability to work with vulnerable people. Care workers have access to up-to-date policies and procedures to support safe practice. Medication practices and auditing of medication processes are robust. The regular auditing of key documentation enhances safeguarding measures already in place at the service. Care workers are appropriately vetted prior to employment.

The service has a well-defined management structure, and the management team maintains oversight of the service. We saw quality assurance reports completed by the RI on a quarterly basis. These capture the views of people receiving support, giving them the opportunity to contribute to developing service delivery. Records show people are consistently happy with the service delivery. We received positive feedback from staff who told us they feel well supported. Learning and development systems in place ensure care workers receive the necessary support and induction in the role. The service provider reviews the quality of care and service delivery on a regular basis to continuously improve the standards at the service and promote people's overall well-being.

Care and Support

People receive support from regular, kind, and caring staff, promoting their emotional well-being. We spoke with people who receive a service and their representatives, and they are satisfied with the service delivery and very much value their relationships with the care workers. One person told us, *'(A) doesn't say much because of the dementia, but (A) does from time to time speak when the girls are here, and they are thrilled to hear this. This reaction is so important for me.'* People's communication needs and preferences are considered during initial assessments and the Welsh language provision is included within service literature. Care workers we spoke with have a good understanding of people's needs. One commented, *'I pick up on (B's) facial expressions as (B) does not speak and I know what (B) likes and doesn't like.'* Records reflect care workers support specific individuals on a regular basis giving continuity of care, fostering good therapeutic relationships.

Mechanisms are in place to support people's physical health, although care documentation needs to improve to ensure staff are fully informed on how to meet people's individual needs. Personal plans are in place for people using the service and these consider local authority care and support plans. We found documentation outlining people's preferences for support with intimate and sensitive care tasks lacks personalisation. Risk assessments are not always in place where needed. For example, falls and bed rails risk assessments. We expect the provider to take action to address this and we will follow this up at the next inspection. People's care needs are reviewed on a regular basis, and people and their representatives told us they are involved in this process. Referrals are made in a timely way to relevant health and social care professionals when people's needs change. Personal plans include specialist advice and support.

People are protected from harm. Staff receive safeguarding training, and they demonstrate a good understanding of their roles and responsibilities in relation to safeguarding people from abuse. We were told staff wear personal protective equipment and people feel safe. A safeguarding policy is available and has recently been reviewed. People are provided with information about the service and know who to contact if they have any concerns. One person told us, *'I have a good relationship with the management, they call me, and I call them.'* We sampled a small number of medication administration records and found care workers complete these well. Medication audits are in place and any required follow up action is recorded. We note medication competency assessments of staffs' ability to administer medication safely is not recorded. The provider has a medication policy in place; however, staff training and competency checks are not well defined in the medication policy. The provider assured us these matters will be addressed as a matter of urgency.

Leadership and Management

There are effective arrangements in place for the oversight of the service to ensure the best possible outcomes for people. We note the statement of purpose that is fundamental in reflecting the vision for the service, is up-to-date, and clearly outlines the services provided. The management team are visible and oversee the day-to-day running of the service. They act promptly to address any concerns including matters of a safeguarding nature. We saw evidence the service provider engages well with safeguarding and multi-agency professionals. The service needs to ensure CIW are notified of all matters as required in a timely manner. The auditing of key documentation and monitoring of call management supports good oversight of the standard and reliability of care provided. The RI visits and quality assurance reports show regular engagement with people and their representatives as well as an evaluation of the service provided. Arrangements in recording and obtaining the views of commissioners and other stakeholders could be strengthened.

People can achieve their individual personal outcomes because staff are well supported and trained in their roles. Staff are skilled and supported. There are systems in place for the supporting, inducting, and training of all staff. One member of staff told us, *'The induction when I started really helped me. Training is very good; we have had support from specialist teams who come out and give us tips.'* Staff files we looked at contain induction and probationary review records. Supervision documentation we looked at show staff receive regular one-to one supervision with their line manager and are well supported in their work. Staff training records reflect they have completed a range of mandatory core subjects, including the 'All Wales Manual Handling Passport' training and safeguarding adults at risk. Medication competency records need to be completed at least annually, or as and when required.

Selection and vetting arrangements are in place to enable the service provider to decide upon the suitability of staff prior to commencement of employment. The recruitment files we sampled show the service has conducted all the required pre-employment checks to ensure suitability. We did note references obtained to comment on staff fitness and credibility are not always obtained from the most appropriate or impartial source. The provider assured CIW this process would be revised. We saw a DBS matrix indicating the relevant checks have been completed for all staff. These checks and updates are important to review a staff member's suitability to work with vulnerable people

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
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15	Ensure personal plans set out clearly how individuals will be supported to achieve their personal outcomes, including steps which will be taken to mitigate any identified risks	New
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