



Inspection Report on

Cariad Care Group Cardiff and Vale

**Ground Floor
Charterhouse2
Links Business Park
St Mellons
CF3 0LT**

Date Inspection Completed

24/08/2023

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About Cariad Care Group Cardiff and Vale

Type of care provided	Domiciliary Support Service
Registered Provider	Cariad Care Group LTD
Registered places	0
Language of the service	English
Previous Care Inspectorate Wales inspection	This is the first inspection under the Regulation and Inspection of Social Care (Wales
Does this service promote Welsh language and culture?	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

This service has only been operating in the Cardiff regional area since November 2022. The responsible individual (RI) and manager have worked hard to ensure people using the service are happy and there is key care information in place to enable staff to achieve people's personal outcomes. People we spoke with are highly complementary about the quality of care they receive and describe the staff as caring and attentive. The statement of purpose accurately reflects what people can expect from the service.

Overall, there is good oversight at the service but further improvement is needed to develop robust quality assurance systems. This is important to consistently review and evaluate the quality of care and safety of the service, to ensure objectives are being achieved as expected. Care staff are well supported and trained for their role.

This service is in working progress and making changes to improve and embed the service. They intend to use this inspection to further improve.

Well-being

People are provided with good information to make informed decisions. Information packs are available which includes what they can expect from the service and how to make a complaint if they so wish. People describe the RI and the office staff “*responsive and helpful*”.

People are happy with the service they receive and built good relationships with care staff who support them. People describe the staff as caring, polite, and respectful. The care staff are happy in their role and receive appropriate training and support.

People have control over their care and support. Arrangements are in place to ensure people are included in developing their personal plan to reflect their preferences and what matters. The care staff can access care information to help them understand the individuals’ needs and preferences. However, this information must be in place prior to the commencement of the service. Personal plans are kept up to date and the service intends to include people in the review for their voice to be heard. There is a high level of written satisfaction received from people using the service and their representatives. Well-being is enhanced because people receive a reliable and flexible service that values person centred support.

People are safeguarded from harm. People using the service feel confident to raise issues and we found appropriate action taken. Care staff complete safeguarding training to ensure they know how to recognise abuse and neglect, including what their responsibilities are to protect people from harm. There are detailed risk assessments in place to inform care staff of any risk and how this is mitigated. People receive the medication at the right time to maintain their health and wellbeing. Regular medication audits need to be in place to maintain oversight. Accident and incidents are reported but there is a lack of oversight to ensure investigations take place. Staff receive a comprehensive induction and training to ensure they understand the needs and specific conditions of people they support. Care calls are monitored which alerts the office to any late calls to make alternative arrangements. Care staff working at the service are subject to suitability checks being completed before they commence their role.

The RI maintains oversight of the service but the quality assurance systems and processes need to improve. This is a new service and the priority has been to ensure people are happy with the quality of care and staff are well trained. Further improvement is needed to monitor and audit key care information to ensure any patterns/trends are promptly identified and acted upon. The RI assured us that this will be actioned.

Care and Support

People are happy with the service they receive and developed good relationships with care staff who support them. They describe the care staff as *“Lovely and very kind”*.

There is detailed information available to inform people what they can expect from the service. People told us that they understand how to raise concerns and feel confident that this would be acted upon. People told us, *“I can contact the service any time and always receive help when needed”* and *“They always look at ways to resolve issues.”* Records show that when concerns are raised, they are looked into and people receive an outcome. The service received a high level of written compliments in relation to their quality of care and staff. Some comments include, *“The company is supportive, understanding and very valued, “They have the people and staff at the heart”* and *“The care is fantastic, a big thank you.”*

People are included in the assessment of their needs and their views are clearly documented within personal plans of care. They are detailed and person centred to inform care staff of people’s needs and associated risks. However, this information must be in place prior to the commencement of the service. Daily care records show that care staff consistently achieve people’s personal outcomes. The care staff told us that they are kept informed of any changes. People and their representatives can access the electronic care app which they highly value as this gives them the assurance needed, to check the care and wellbeing of their loved one. The RI assured us that people will be given the opportunity to contribute to future review meetings, for their views to be known.

People receive the medication at the right time. The majority of care staff receive medication training in line with the detailed medication policy. Medication administration records (MAR’S) show that people receive the right medication. The RI intends to introduce an observation of practice to ensure care staff are assessed in the community prior to administering medication, particularly new staff. RI assured us that medication audits will be put in place to identify any patterns/trends for lessons to be learnt. We will look at this again at the next inspection.

People are protected from abuse and harm. The service completes an environmental risk assessment to identify any hazards that would pose a risk. There are risk assessments in place for people that require assistance to transfer safely using equipment to promote their comfort. Staff recruitment is safe and robust. All required staff personnel information is gathered and pre-employment checks are completed prior to employment commencing. Care staff are adequately trained to identify risks in many areas and take appropriate action. Care staff complete safeguarding training to ensure they know how to recognise abuse and neglect, including what their responsibilities are to protect people from harm.

Leadership and Management

This service has only been operating in the Cardiff regional area since November 2022. The RI and the manager worked hard to ensure people using the service are happy and there is key information in place for care staff to achieve people's personal outcomes. The management team provided support to care staff to ensure they are sufficiently trained for their role. Although there are some systems in place in the office to maintain oversight, this needs to be improved upon to ensure the quality and safety of the service is effectively monitored and evaluated. Although the RI is actively involved on a daily basis the quarterly oversight reports are not complete. This is a missed opportunity to review the progress of the service and identify when improvements are required. There is lack of internal reviews and audits in all areas of care delivery and regarding the adequacy of resources. There needs to be improved visibility of the manager in the community to ensure they maintain insight into the delivery of the service, and act when needed. While no immediate action is required, this is an area for improvement and we expect the provider to take action. There are systems in place to record any incidents/accidents, safeguarding and concerns to ensure any patterns/trends are identified and lessons are learnt. Accident and incidents are reported but there is a lack of oversight to ensure investigations take place and responses are followed through. The RI produced a detailed quality care report but this can be further strengthened to ensure all aspects of the service are evaluated. The RI assured us action will be taken. The manager understands legal requirements of caring for vulnerable people and makes safeguarding referrals to the Local Authority and regulation notices to Care Inspectorate Wales when required.

People are supported by care staff that receive comprehensive induction, training, and support for their role. People we spoke with told us that *"Care staff understand their needs in a respectful way."* Care staff feel well informed and supported. Records show that care staff are adequately inducted to the service and given opportunities to shadow experienced staff, which they value. Most care staff receive regular opportunities for supervision which is important to receive support and discuss their professional development. However, the practice of new care staff should be observed and evaluated before they work on their own, to ensure they have the confidence and competence for their role. The RI must ensure all staff are suitably registered with the workforce regulator. The RI assured us that there is an action plan in place to address this.

Most people are receiving calls when planned. People told us that they mostly receive the same care staff where possible but not always informed by the office when there are changes. The RI intends to action this. An individual told us *"It's nice to see a familiar face as they understand what I like and need."* The RI assured us that they will put an auditing system in place to monitor and evaluate the management of calls which includes the duration of time spent in the call and scheduling for staff. However, people told us that care staff fully support them before they leave the call and the daily care records confirmed this.

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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8	To have systems in place to audit information to assess the quality and safety of the service.	New
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