



Inspection Report on

Meddyg Care (Help at Home) Ltd

**Meddyg Care
11 Bank Place
Porthmadog
LL49 9AA**

Mae'r adroddiad hwn hefyd ar gael yn Gymraeg

This report is also available in Welsh

Date Inspection Completed

23/02/2024

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About Meddyg Care (Help at Home) Ltd

Type of care provided	Domiciliary Support Service
Registered Provider	Meddyg Care (Help At Home) Ltd
Registered places	0
Language of the service	Both
Previous Care Inspectorate Wales inspection	This is the first inspection since registration
Does this service promote Welsh language and culture?	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 happy with the care and support they receive from Meddyg Care, Help at Home. Care staff are safely recruited, well trained, and supported. They work effectively in collaboration with health care professionals to meet a range of care and support needs. This enables people to continue living independently in their own homes. People have personal plans in place and are involved in the ongoing process of review.

The service is well managed and overseen. Communication and record keeping is good, evidencing support delivered. There are good processes in place to monitor the quality and effectiveness of the service. Policies and procedures ensure people and care staff have access to important information.

The Responsible Individual (RI) is present in the service, carrying out the requirements of their role and providing support to the team. The manager and operations director demonstrate a commitment to growing and improving the service to provide the community with a high quality and much needed service.

Well-being

People receive a service which is agreed with them and tailored to meet their needs with consideration of their personal outcomes. People told us they have built good relationships with the staff who support them and have confidence in their ability. One person told us *“Staff are very friendly and really respectful,* another said *“staff are helpful and incredibly patient.”* People are consulted about their views and participate in the processes of care planning and review. We were told staff are on time to care calls and have sufficient time to carry out support without feeling rushed. People said communication is good and there is always someone to speak with if they need to. People told us the service has meant they can remain at home and maintain their independence which may otherwise not have been an option. People are asked about their language needs and the provider has processes in place to promote the use of the Welsh language and culture.

People are supported to maintain all areas of their well-being. They are supported to access services from external professionals and the provider ensures any issues around people's health are addressed quickly. People told us there is continuity between the service and external professionals who are involved in their support. People are supported to be engaged in activities, holidays and their local community and the provider has plans to develop this approach further.

Systems are in place to protect people from abuse and neglect. Care staff complete safeguarding training and there are policies in place to support this knowledge and promote the use of safeguarding processes. We spoke with staff who were able to tell us about safeguarding and how they would report any concerns they had. The provider is proactive in recording and reporting safeguarding concerns and notifying the relevant professional bodies. Good records are kept of any concerns and this information, along with the safeguarding process is audited on a regular basis.

Care and Support

People receive a service which is person centred and supports them to live their lives how they want to. The provider has a good process in place to support new packages of care. People can be confident the service is able to meet their needs as a detailed pre-assessment is carried out by an experienced manager who liaises with people, their families, and other professionals, ensuring a smooth transition to receiving care. Pre-assessment information is reviewed soon after a person begins receiving a service and informs the personal plan which is created in collaboration with people and/or their representative. Personal plans are person centred and consider people's wants, wishes, and needs. Personal outcomes are discussed and recorded with information about how the person wants to be supported to achieve these. The provider monitors the quality of care records and makes changes where needed to ensure the format and information meets the needs of the service and the person supported.

People are supported by staff who are experienced and have completed an in-depth induction to the role. The manager works with other professionals to ensure people receive any additional support needed, such as the district nursing team, occupational therapists, and primary care services. The Help at Home service is supported by senior managers and nursing staff with clinical experience who work within the provider's other services. We saw where people have specific needs as a result of referrals, this information is recorded in care records and updated if there are any changes. One person told us the care delivered between the Help at Home and district nursing team was "*seamless.*"

People have the option to be supported with medication management as part of their package of care. Support staff complete medication training and are supported by clinically trained staff within the organisation. There is a medication policy in place to support staff in their role. The manager told us about the limitations of medication administration within a domiciliary care service to ensure people receive their medication, and the process is safe, in line with national guidance.

Staff complete infection prevention and control training and have access to appropriate personal protective equipment (PPE). We saw on the day of inspection, support staff wearing the appropriate PPE to prepare food for a person being supported. Records of spot checks in recruitment files show this practice is monitored so any issues can be rectified.

Leadership and Management

Information about the service is provided in a clear, accessible format. The service's statement of purpose outlines what support people can access and includes information about the complaints policy and external contacts, which people can access for additional support. A comprehensive suite of policies and procedures supports staff in their role and gives guidance in areas such as whistleblowing, safeguarding and medication.

People are supported by staff who are recruited safely and well trained. During this inspection we looked at staff recruitment files and found these to be a detailed record of staff pre-employment checks and ongoing support and development. Staff have disclosure and barring service (DBS) checks in place and are supported to complete the All Wales Induction Framework in order to register with Social Care Wales, the workforce regulator. Staff undergo an in-depth induction process which equips them with the training and skills required to support people safely. Staff have probationary meetings at various stages of their initial appointment to discuss their progress. We found staff receive one-to-one supervision on a regular basis and spot checks are carried out to monitor the quality of care being delivered. Systems are in place to ensure staff are supported and able to reach people for help and support when needed. Without exception, all staff we spoke with told us they enjoy their work and feel well supported in their role.

The provider ensures the quality and effectiveness of the service is monitored and reviewed on a regular basis. We saw audits of areas of service provision checking compliance against the requirements of the Regulations. We found auditing processes to be effective in identifying areas which need development. Actions from audits are recorded on a quality review record which creates an action plan for the team to address with realistic timescales and key persons accountable for specific actions. The RI for the service is present on a regular basis and reviews the overall operation of the service, supported by the processes which monitor quality and effectiveness. We were told by both people supported and staff, the RI is approachable and seeks their views.

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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