



Inspection Report on

Harlequin Care R.C.T

**35 Fram Enterprise Centre
Parc Busnes Edwards
Pontyclun
CF72 8QZ**

Date Inspection Completed

21/09/2023

Welsh Government © Crown copyright 2023.

You may use and re-use the information featured in this publication (not including logos) free of charge in any format or medium, under the terms of the Open Government License. You can view the Open Government License, on the National Archives website or you can write to the Information Policy Team, The National Archives, Kew, London TW9 4DU, or email: psi@nationalarchives.gsi.gov.uk You must reproduce our material accurately and not use it in a misleading context.

About Harlequin Care R.C.T

| | |
|---|---|
| Type of care provided | Domiciliary Support Service |
| Registered Provider | HARLEQUIN (RCT) LTD |
| Registered places | 0 |
| Language of the service | English |
| Previous Care Inspectorate Wales inspection | |
| 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

Harlequin Care R.C.T provides care and support to people in their own homes throughout Rhondda Cynon Taf. People receiving care and support have personal plans detailing their individual support needs and personal outcomes. Personal plans also contain risk assessments highlighting areas of concern. On the whole, people are happy with the care and support provided, however, improvements are needed to ensure people receive their care and support at the agreed times. People and their representatives have positive relationships with care workers and the management, saying they are kind and considerate.

Care workers are trained to meet the needs of the people they support and feel well-supported, valued, and happy in their roles. Care workers receive regular supervision and their competency in areas such as medication administration is regularly assessed. The management team have good oversight of service delivery and regularly speak to people to gather feedback. The Responsible Individual (RI) visits the service regularly and is up to date with all their regulatory duties.

Well-being

People are protected from harm and abuse. The service employs a raft of measures to keep people safe, including staff training, risk assessments and governance and quality assurance measures. There are a range of policies and procedures promoting safe practice and care workers are aware of their responsibilities in relation to keeping people safe.

People are treated with dignity and respect. Care documentation is reflective of people's current care and support needs. People are happy with the service and complimentary of the care team. People are consulted on the care they receive and are regularly asked for their views on the service. We found improvements are required to ensure people receive their care and support within the agreed times.

People are supported to be as healthy as they can be. Care workers document care and support provided and report any concerns to the relevant persons. People are supported with their medication needs. The service has appropriate medication management systems ensuring people receive their medication as directed.

Care and Support

People receive person centred care and support. This means the care and support people receive is specifically tailored to their needs. Personal plans highlight the support people require and provide clear concise instructions to care workers regarding care delivery. Care workers told us personal plans are easy to follow and contain the information they need to provide the right level of care and support. Personal plans also contain risk assessments which aim to highlight and reduce risks. People and their representatives told us they are involved in the care planning process and are consulted on the service provided.

People have positive relationships with care workers. We spoke to a number of people and their representatives who provided consistently positive feedback. One person said, *“The carers are great, I have no complaints”*. A relative of a person receiving a service told us, *“The carers are all very good. We have no complaints whatsoever”*.

Care and support is not always provided at the agreed times. We looked at the services call monitoring records and found there were many instances where calls have been considerably later or earlier than the agreed times. People and their representatives said this can be frustrating and they are not always informed if care workers are not going to be on time. Care workers said travel time is not always sufficient which can lead to them being late for calls. We discussed this with the management team and told them this is an area for improvement. We would expect this issue to be addressed in a timely manner.

There are measures in place promoting safe practice. Care workers receive safeguarding training and know the procedure for reporting concerns. Policies and procedures cover areas such as safeguarding, infection control, and medication. We examined several policies and found they contain up to date information and are kept under review. Care workers have access to a plentiful supply of personal protective equipment and receive relevant training. Support is available for people with medication needs. Care workers receive medication training, and their competence is assessed. We looked at several medication administration recording charts and found they are filled in correctly. This suggests people receive their medication as prescribed. Regular medication audits are completed to ensure any issues are identified and addressed.

Leadership and Management

Care workers are knowledgeable in their roles and feel supported by the management team. Care workers told us they complete a structured induction when they commence employment. They also get the opportunity to shadow experienced members of the team. Following this care workers have access to an on-going programme of training which aids their professional development. The service offers a mix of face to face and online training. Care workers told us the standard of the training was good. We looked at the services training statistics and found some care workers required refresher training in some key areas. We discussed this with the RI who assured us the issue would be addressed. Care workers have regular supervision where they get the opportunity to discuss their work and any concerns they may have. We looked at records relating to supervision and found care workers receive the recommended level of formal support. Care workers we spoke to said they feel supported in their roles and used words like “*approachable*”, “*supportive*” and “*very good*” to describe the management team.

The service has suitable recruitment and vetting processes in place. We looked at a selection of personnel files and found all the necessary pre-employment checks have been completed. These include Disclosure and Barring Service (DBS) checks, employment history checks and references from previous employers.

Appropriate governance arrangements help maintain the quality of the service. regular audits are completed which consider things such as staffing and medication management. The RI visits people in their homes to gather their feedback regarding the service they receive. The RI also meets with staff to gather their views on the service. On a six-monthly basis the RI completes a quality-of-care review. We looked at the last quality of care report which details the services strengths and areas identified for further development. The quality-of-care report also shows analysis of data relating to matters such as safeguarding and complaints.

Written information is available for people to view. We examined the statement of purpose and user guide. We found the documents accurately describe the service and contain useful information such as the complaints procedure. We noted the user guide requires a minor adjustment so it reflects the regulatory requirements in relation to the frequency of care plan reviews.

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 |
|------------|---------|--------|
|------------|---------|--------|

| | | |
|----|---|-----|
| 41 | The provider is not compliant with regulation 41(3). This is because people do not always receive their care and support within the agreed times. Calls are sometimes late / early and people are not always told if calls are not going to be on time. The service must try to ensure calls are made within the agreed timeframes and if this is not possible people are informed. | New |
|----|---|-----|

Was this report helpful?

We want to hear your views and experiences of reading our inspection reports. This will help us understand whether our reports provide clear and valuable information to you.

To share your views on our reports please visit the following link to complete a short survey:

- [Inspection report survey](#)

If you wish to provide general feedback about a service, please visit our [Feedback surveys page](#).

Date Published 23/10/2023