



Inspection Report on

PRIDE Health and Social Care Limited

**Parkway House
Hambrook Lane
Stoke Gifford
Bristol
BS34 8QB**

Date Inspection Completed

07/06/2024

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About PRIDE Health and Social Care Limited

Type of care provided	Domiciliary Support Service
Registered Provider	PRIDE Health and Social Care Limited
Language of the service	English
Previous Care Inspectorate Wales inspection	31 March 2022
Does this service promote Welsh language and culture?	This service is working towards providing an 'Active Offer' of the Welsh language and demonstrates a significant effort to promoting the use of the Welsh language and culture.

Summary

This report is for the Cardiff & Vale and Cwm Taff areas, due to both supporting 20 or less people. The registered services in Gwent and West Glamorgan are currently dormant and not delivering care. There are new managers in position who are enthusiastic and passionate. People praised the locality manager for their effectiveness and responsiveness. We found some excellent systems in place to maintain a good level of oversight. Regular management meetings and systems ensure that swift action can be taken to address issues. Staff support is good and staff receive a diverse range of training. People raised concerns regarding staff communication and competence. We discussed with managers the importance of ensuring that clear and open lines of communication are in place with people so appropriate action can be taken. Managers provided assurance that these matters would be addressed. The service is considering an office base which will aid in building relationships between everyone involved with the service. People's plans are detailed, informative and person centred. People are supported to do the things they want to do such as their hobbies and going on holiday.

Well-being

People have control over their day-to-day life. People and their loved ones told us they are involved in their care and are kept up to date on any changes. We saw managers and nurses' complete regular welfare visits with people and care staff. Most care staff are observant, responsive, and treat people with dignity and respect. We saw personal plans are person centred and consider individual circumstances.

People told us the things they enjoy, such as hobbies and seeing friends. Care staff support people to do the things they want to do when they want to do it. We saw different professionals are involved in people's care, and the service utilise professional knowledge to aid in training. Most people and their loved ones told us they are happy with the service they receive. Some people told us they get the right support when they need it, thanks to observant staff and oversight by managers.

Systems are in place to monitor people's safety, care, and any important events. The service inform the appropriate professionals regarding concerns such as safeguarding's. People told us they feel safe with most of their current care staff. One person said, "*Some staff go above and beyond.*" People and care staff told us they feel comfortable raising concerns and are given opportunity to speak with managers. Managers are considering ways to aid open communication with people and care staff to quickly resolve concerns in relation to language barriers. Care staff receive annual training in relation to keeping people safe and go through the appropriate checks during recruitment.

Care and Support

Personal plans provide an excellent level of detail in relation to people's clinical care needs. People told us they are regularly involved in their plans and asked to review these documents to ensure they are all relevant. Personal plans are detailed, person centred and consider individual circumstances. People told us they receive a very good level of care from most consistent care staff who are well trained. People told us "*They've picked up the pieces,*" and "*They work really hard to make my life better.*" People and their families told us they have built good relationships with their current care staff, who they trust. The service listens to people regarding concerns and responds to their changing needs. One relative said that their locality manager "*Deals with things*" and is "*Very hands on.*" The manager told us they are going to start to conduct regular surveys to help gather people's feedback.

People are provided with information regarding their care. Rotas are sent out in advance, so people know who is providing their support. Most people told us they are updated on changes to their care in a timely manner. Some people told us they did not have a contract with terms and conditions. We discussed this with the manager who informed us this would be actioned. Information can be translated into other languages if requested. Welsh phrases are promoted, one manager can understand and speak some basic Welsh.

People can enjoy the things they want to do. Some people enjoy going to watch the football, or go shopping. People told us they have the freedom to do what they choose during their support time and care staff are flexible to meet their needs. One relative told us the service is "*Excellent.*" People are supported to plan trips and go on holiday abroad and in the United Kingdom.

The service provide support to people with complex needs. People said most of their care staff are competent and understand their needs well. People told us they see a range a of external professionals to aid in their support needs. Care staff have contact details for important professionals if they require further advice or support. People's records reflect the complexities in their care with detailed risk assessments in place and equipment listed. Safety measures that reduce the risks to people are identified and are specific to the person.

Leadership and Management

There is a new management team in place who are professional, proactive and hold a 'can do' attitude. Managers complete welfare checks with staff and people, one person said the locality manager "*Solves problems*" and has good communication. The service hold monthly meetings where managers review each person's care individually. This includes their personal plan, risks, care staff, training, and any concerns. The service maintains oversight of near misses, accidents, incidents, investigations, and safeguarding. Where issues are identified we saw appropriate action is taken, such as training, implementing risk assessments and informing the relevant professionals.

The service work closely with external professionals to ensure their skills are relevant and up to date. The service employ nurses to ensure clinical oversight. Care staff supervision, appraisal and training is very good. Care staff told us they feel well supported and that managers are "*Hands on.*" Care staff told us they are regularly asked if they have any concerns. The majority of care staff describe the service as good. Annual competency checks are in place, although most people and some care staff feel spot checks and more regular observations would be beneficial. Staff are safely recruited, and all have the proper checks to ensure they are safe to work with adults at risk. The service is considering ways in which they can appreciate and praise care staff for their achievements and hard work.

People and their relatives told us most staff are quick to respond to concerns. The majority of people told us they are happy with their current and consistent care staff. However, most raised concerns regarding some staff's communication, impacting their ability to respond to people's needs and wants. Managers assured us immediate action would be taken to address any on-going concerns people and/or care staff have. The service are considering ways to bring care staff, office staff and people supported together in the local area. This will aid in communication, building relationships and establishing a base for everyone involved in the service.

There are some very good systems in place to maintain oversight of the service. We saw the RI completes detailed visits with people and their families gaining valuable feedback. We discussed the need for these visits and discussions to also include care staff in line with the regulations. A Quality of care report is completed, although important information is included this document needs to further consider and analyse information held by the service. This will aid the service in identifying clear areas they do well and what they need to improve.

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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N/A	No non-compliance of this type was identified at this inspection	N/A
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