



Inspection Report on

Miracle Workers Agency Ltd

**Sterling House
Lewis's Lane
Abergavenny
NP7 5BA**

Date Inspection Completed

26/09/2024

Welsh Government © Crown copyright 2024.

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.gov.uk You must reproduce our material accurately and not use it in a misleading context.

About Miracle Workers Agency Ltd

Type of care provided	Domiciliary Support Service
Registered Provider	Miracle Workers Agency Ltd
Registered places	0
Language of the service	English
Previous Care Inspectorate Wales inspection	05 September 2024
Does this service promote Welsh language and culture?	This service provider is working towards providing an 'Active Offer' of the Welsh language and demonstrates an effort to promote the use of the Welsh language and culture.

Summary

Miracle Workers Agency Ltd is a domiciliary support service that provides a live-in care service to people throughout Wales who require care and support in their own homes. The service provider is not currently supporting people in the Cwm Taf Morgannwg or West Glamorgan Regional Partnership areas. The service introduces self-employed care workers to people, where support is provided on a live-in basis.

People are involved in their care and can express their views knowing they will be listened to. They are complimentary about the care provided and enjoy a familiar rapport with regular care workers. The service designs care and support in consultation with people using the service and their representatives, considering their needs, wishes and outcomes. People are supported with their physical health and social well-being and to access specialist support and advice.

Recruitment procedures are in place but require improvement in some areas to ensure processes are consistently safe. Care workers are well trained and supported in their role. Safeguarding processes are well managed. Quality assurance processes support the safe operation of the service, but some development is required to ensure engagement with people across all operational partnership areas is consistently considered.

Well-being

People are listened to, and they are very satisfied with the service delivery. We received positive comments from people and/or their representative on the quality of care and support provided. One relative told us, *"I am involved in the care package and the reviews of care. Communication is good."* Another relative commented, *"They are absolutely brilliant."* Care workers support individuals on a regular basis for a specific time period. This provides good levels of continuity of care, developing positive relationships with people they support. People receive detailed information on the care worker prior to care commencing; and if they want a change of care worker, this is respected and resolved in a timely manner.

The service promotes people's physical health and emotional well-being. People are supported to access professional support and advice. There are opportunities for people to discuss their care arrangements. They are supported to participate in things that are of interest to them, and they are encouraged to be independent. One person described how they enjoy going for walks in their community and visiting the local pub. A review of care documentation show people have a personal plan, this includes essential aspects of people's physical health and daily routines. Plans are reviewed on a three monthly basis, or sooner if there is a change in need.

Mechanisms in place safeguard people from neglect and abuse. Personal plans include risk assessments to support safe practice. Professionals are involved where there is an assessed need. A safeguarding policy is in place with contact details clearly recorded and accessible. Care workers have good understanding of when to escalate matters of a safeguarding nature. The safety of individuals is mostly supported by recruitment practices, but overall checks on prospective employees require improvement. The provider has completed Disclosure and Barring Service (DBS) checks on all staff. The DBS helps employers maintain safety within the service.

The service provider maintains oversight of the service. We received positive feedback from care workers who told us they feel well supported. Learning and development systems in place ensure they receive the necessary support and induction in the role. We saw reports and logs completed by the responsible individual (RI) reflecting quality of care is reviewed, although records do not always fully align to regulatory requirements. The service provider shows a commitment to improving the processes in place.

Care and Support

Personal plans set out how people want to be supported, including routines of importance to them. The plans are person centred and include likes, dislikes and outcomes people want to achieve. They give clear guidance for staff on how to meet people's needs in a sensitive manner. Risk assessments support the care planning process promoting people's overall safety.

People are happy with the care and support they receive. One person told us, *"We would not have been able to cope without them,"* and another person commented, *"I feel listened to and give my ideas.* People value their relationships with staff and their individual circumstances are considered. People told us they are regularly involved in the review of their care arrangements. We found the review process does not always clearly define how people are supported to achieve their well-being outcomes.

The service promotes people's health and independence. Referrals are made in a timely way to relevant health and social care professionals when people's needs change. For example, a manual handling plan completed by an occupational therapist. A sample of medication administration records (MAR's) shows the management of medication is mostly effective. The service undertakes routine auditing to review measures in place and to act on any discrepancies. We identified some gaps in the recording of prescribed creams on MAR's and found the process of supporting people with homely remedies needs further consideration. CIW have been assured processes will be reviewed and action taken.

People are protected from harm and abuse. Care workers have completed safeguarding training and records we reviewed evidence this. We were told care workers wear personal protective equipment as required and people feel safe. Care workers contact emergency services to ensure care and treatment is delivered in a timely manner, for example, if someone has fallen. We spoke with the provider with regards to falls management and the action staff are required to take, and we were told policies would be developed further to include falls management protocols and escalation procedures.

Leadership and Management

There are arrangements in place for the oversight of the service. The statement of purpose (SOP) is fundamental in demonstrating the vision for the service. The SOP provides an overall picture of the service offered, including provision of the Welsh 'Active Offer.' We reviewed a selection of organisational policies; these reflect information is reviewed and updated. People and their relatives told us they are happy with the service delivery and know who to contact if they needed to raise a concern or make a complaint. The service provider ensures complaint information, and the SOP is shared with people.

The RI completes a log of operational activity over a three month period and a six month quality of care review. The activity log does not reflect an adequate representative sample of people or care workers from each regional partnership area has been consulted with. The quality of care report includes the views of people using the service, relatives, and care workers, including an overview of service delivery. However, the review must also include an analysis of falls, safeguarding risks and outcomes from regulatory inspection reports. We received assurance from the RI these areas would be acted on.

There are arrangements in place for supporting and developing staff. Care workers we spoke with told us they feel supported and valued. One care worker told us, *"I feel very supported; anything I need they make sure I receive this immediately."* Induction, supervision, and training records indicate support and development processes are in place. Care workers informed us they completed an induction when they started in their role, and this was informative. Care workers are either registered with Social Care Wales, the workforce regulator, or are in the process of completing a relevant qualification to achieve their registration.

Selection and vetting arrangements in place to enable the service provider to decide upon the suitability of care workers, however these require strengthening. DBS records reveal the relevant checks have been completed. Care worker files contain most of the relevant information, including pre-employment checks and contracts of employment. However, we identified some discrepancies in relation to employment histories, reasons for leaving previous employment with vulnerable adults, references, and identification. This is an area for improvement, we expect the provider to take action to address these matters and we will follow this up at the next inspection.

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.

Area(s) for Improvement

Regulation	Summary	Status
35	Ensure all staff have provided full and satisfactory information or documentation, as the case may be,	New

	in respect of each of the matters specified in Part 1 of Schedule 1 and this information or documentation is available at the service	
15	The service provider had not prepared a plan for all individuals which sets out the steps which will be taken to mitigate any identified risk to the individuals well-being.	Achieved
16	The service provider had not ensured individuals personal plan had been revised as necessary	Achieved

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 23/10/2024