

# Inspection Report on

**Inspired Homes Network Ltd.** 

7 The Reserve Llanrwst Road Glan Conwy Colwyn Bay LL28 5SX

**Date Inspection Completed** 

06/09/2024



## **About Inspired Homes Network Ltd.**

| Type of care provided                                 | Domiciliary Support Service   |
|---|---|
| Registered Provider                                   | Inspired Homes Network Ltd.   |
| Registered places                                     | 0   |
| Language of the service                               | English   |
| Previous Care Inspectorate Wales inspection           | This is the first inspection for this service since re registration under Regulation and Inspection of Social Care for Wales (RISCA).             |
| Does this service promote Welsh language and culture? | This service is making a significant effort to promote the use of the Welsh language and culture or is working towards being a bilingual service. |

#### Summary

People are supported by kind and caring support staff, who are committed to assisting them to achieve their goals. They know people well and take their time with them to build their confidence to do the things they want to do. They know how to spot the signs when people are feeling anxious or distressed and can use strategies from positive behaviour support plans to assist them.

Care staff are supported by a manager and responsible individual (RI) who visit the service regularly to ensure it is running smoothly. They provide support to the staff through supervisions and staff meetings, and ensure they speak to people for their views.

#### Well-being

People can expect to receive care and support which meets their needs. We saw people are relaxed and comfortable with support staff, who treat them with kindness and respect. People we met were happy and felt well supported by the service. They were able to tell us how they are supported to do things which are important to them. We saw their food preferences are taken into account, and food is prepared in the way they like it to be. People's preferences for their support staff are considered and needs such as a male or female support team can be met. They have a consistent staff team for familiarity. A relative told us, "They are very good at working with X and deciding what is best."

Support staff ensure people are safe and protected from the risk of abuse and neglect. They have regular training in safeguarding and told us they are confident to report any concerns. People told us they would be happy to speak to a senior member of staff or the manager if they are worried about anything.

People are supported to participate in activities they enjoy, and which enable them to form links within their local community. We saw people are supported to engage with other projects within the local community and can enjoy activities which are important to them, such as walking groups and spending time with animals. They are supported to maintain links with family and friends. One person told us how they enjoy spending time with their siblings, and that this is an achievement they feel particularly proud of. A social care professional told us the service has made "an incredible difference" to the person they support. They told us they have more independence and are accessing more community groups.

The service provider could offer support to people in the Welsh language if this were requested. They have Welsh speaking staff and can translate documents into Welsh if required.

#### **Care and Support**

Support staff know people well and take care to ensure their preferred daily routines are followed. Personal plans contain detailed background information about people, and carefully consider their needs and wishes. They contain quotes from people about what is important to them. These thoughts and feelings are captured in the personal plan, ensuring they are person centred. Any risks affecting people are considered and both personal plans and risk assessments are reviewed regularly and updated with any changes. Support staff can follow these personal plans knowing they will reliably inform them how to deliver care to people in a person-centred way.

The manager and support staff work hard to ensure people's health and social care needs are met. We saw they have advocated for people with external agencies to ensure they receive the right support to meet their needs. A social care professional told us they are "very reassured by the manager and staff" and receive good communication from the service. People are supported to any healthcare appointments they need to attend as required. Support staff have safe and secure systems for managing medication, ensuring it is stored safely and good records of administration and ordering medication are kept.

#### **Leadership and Management**

People are supported by support staff who are skilled and competent for their roles. The manager ensures new staff undergo thorough recruitment checks, and we saw evidence of these in staff files. All support staff are required to have a valid disclosure and barring service (DBS) check in place and to complete a range of mandatory and specialist training. They are trained in autistic spectrum disorder and learning disabilities to meet the needs of the client group. Support staff receive regular supervision and annual appraisals, to review their performance and discuss their learning and development. They also have regular team meetings, giving them the opportunity to input into the running of the service, and discuss any challenges as a team. The support staff we met told us they enjoyed their job and felt well supported by the manager and RI. One staff member told us, "They are always there if you need anything."

The manager and RI are in regular contact with staff and visit the service to ensure it is running smoothly. The manager completes spot checks and medication audits, and these can help them to identify any issues or errors so they can be addressed. The RI visits the service at least every three months, and ensure they speak to both people and staff. They provide a written report of their visits. They also complete a six-monthly quality of care review which considers what is working well and any improvements which could be made.

The service provider invests in the service. They ensure support staff have everything they need to support people and continue to deliver a good quality service.

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

| inspection |  |
|------------|--|
|            |  |

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