



# Inspection Report on

**MiHomecare Carmarthen**

**Unit 1 Mihomecare  
Llwyn-yr-eos Parc Menter  
Llanelli  
SA14 6RA**

## **Date Inspection Completed**

20/05/2024

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## About MiHomecare Carmarthen

Type of care provided	Domiciliary Support Service
Registered Provider	MiHomecare Limited
Registered places	0
Language of the service	English
Previous Care Inspectorate Wales inspection	<a href="#">16<sup>th</sup> November, 2023</a>
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

MiHomecare Carmarthen are a domiciliary support service providing good-quality care and support to people in their own homes across Carmarthenshire. People we spoke with are happy with the care and support they receive and are treated with dignity and respect. People are supported by safely recruited, motivated and professional care staff, with whom they have developed effective relationships.

Arrangements for the management and oversight of the service have been strengthened. The Responsible Individual (RI) visits the service regularly and uses the thoughts and experiences of people and a range of quality audit tools to ensure they have a good overview of the service. The manager is in close communication with the RI and regional manager, with effective processes in place to supervise the management of the service. The manager is supported by a care staff team, with an increased focus on attention to detail when delivering care and support.

## Well-being

People spoke positively about their relationships with care staff and receive appropriate, kind, and caring support. People are treated with dignity and respect and feel able to discuss issues with the manager of the service. Individuals and representatives told us that care staff are good, make you feel safe and respond to any issues promptly. A person who uses the service told us, *“They know me and we have a conversation, they know my routine and what I like. Some of the [care staff] have been with me for years.”* People can communicate in Welsh, to Welsh-speaking care staff.

People have a voice because the RI routinely spends time talking to them about the service and considers feedback from them. This detailed information is recorded in a report with a clear action plan and used to inform the six-monthly Quality of Care Review and drive improvements at the service. People can raise concerns about the service should they have the need to do so. The service has clear processes in place to address concerns and prioritises the wellbeing of people. People told us how the service responds promptly to improve their experiences. A person using the service told us, *“They have sorted it all out...I can text the supervisors and [staff] from the office.”*

People are protected from harm because safe recruitment processes are robust and care staff are trained and supported. Care staff receive safeguarding training and understand their responsibility to report concerns. A range of up-to-date policies outline and reinforce positive care practices. People are supported to be as safe as possible through effective monitoring of the care being provided. Robust processes for management and oversight ensure actions are taken to mitigate risks for people who are receiving a service, and any additional support from health and social care professionals is sought in a timely manner. Family representatives told us, *“Things have really improved at the service. We are very happy with them”* and *“If there is something wrong they do get back to you.”*

## Care and Support

People and their representatives are complimentary about the care and support they receive from care staff who take time to get to know them and treat them with dignity and respect. A person using the service told us, *"They are lovely. They treat me well."* Personal plans are clearly written, include personal preferences, risk assessments and overall contain the required information. People's personal plans direct care staff to deliver care and support in a consistent way. People and their representatives are consulted on the care received. Personal plans are reviewed in a timely manner and when necessary. Identified changes result in personal plans and risk assessments being updated. A person using the service told us, *"I am involved in an extensive review about the care. I am fully involved."* A member of staff told us, *"There are reviews happening now to make sure that people's care is accurate."*

People receive care from care staff who are motivated in their role and want to provide a good standard of care. They are knowledgeable about the people in their care and are empathic and patient in their approach. The service has effective processes in place to ensure people receive the right care and support when they require it. A member of staff told us, *"We look at people's medication and nutritional needs when we rota and all of this is considered when we have to arrange staffing cover."*

People's physical health and wellbeing is promoted. Documentation shows people receive support to access social and health care professionals when needed. The service understands people's health conditions, the support they require and can identify changes in the usual presentation of people they support promptly. People are encouraged to be as healthy as possible. Arrangements are in place for the safe management of medication within the service. The service responds appropriately and seeks professional advice in response to medication administration issues.

People are protected from harm and abuse. All care staff receive appropriate safeguarding and whistleblowing training, with access to a staff app which gives detailed information on the service's policies and procedures to keep people safe. Care staff have a clear understanding of how to report matters of a safeguarding nature. Robust processes are in place to respond to issues promptly and appropriately where people's care and support could be impacted. A family representative told us, *"If I have an issue, I know that they will resolve it at the office. They are good like that."*

Infection prevention and control procedures are good. Care staff wash their hands regularly and wear appropriate personal protective equipment (PPE).

## Leadership and Management

People are provided with accurate information about the service. There is a written guide which gives people who use the service, their relatives and others, information about the service. There is a statement of purpose (SOP) which describes how the service is provided. The service provision is reflective of information contained within the SOP.

The service has strong quality assurance arrangements in place to monitor and review the quality of care and support provided. The responsible individual (RI) visits the service, spends time talking to people and reviews the quality of the care provided. The service also has effective procedures for obtaining frequent feedback from people and care staff, to inform service delivery. The most recent quality of care review and the service improvement plan identify areas for development and improvement and uses the experiences of people to develop and improve the care and support provided. Effective oversight and supervision of management ensures a good-quality service, focussed on meeting the needs of individuals and promoting their wellbeing.

An appropriately qualified and registered manager reviews reports on a comprehensive range of areas of care provision to ensure care is provided consistently and reliably. The manager is supported by an office staff team, who regularly communicate with each other. The manager and the office care team effectively monitor care provision, recognising the importance of timely and consistent care to meet the individual needs of people. The manager has developed positive, professional relationships to manage the care team and develop staff effectiveness. A member of care staff told us, *“The management here as so understanding about things. I had an issue and the senior handled things so well and talked me through things and looked out for me and the client. They really supported me. I am really grateful for them.”*

We reviewed the service’s staffing rota and saw there are sufficient care staff at the service to provide care and support. Newly appointed care staff complete an induction programme which includes training, shadow shifts and checks to ensure they can perform specific care tasks. A member of care staff told us, *“I had extra shadow shifts so I could feel comfortable.”* Staff recruitment records contain all the information required by Regulations to ensure they are safe and fit to work at the service. Disclosure and Barring Security (DBS) checks are in place and current. The service ensures care staff are registered with the social care workforce regulator, Social Care Wales.

Care staff are provided with one-to-one support, through supervisions and annual appraisals. The service offers daily support to care staff when required and undertakes frequent spot checks for quality assurance. The service appropriately utilises performance management procedures when needed to ensure good-quality care and support.



### Summary of Non-Compliance

Status	What each means
<b>New</b>	This non-compliance was identified at this inspection.
<b>Reviewed</b>	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.
<b>Not Achieved</b>	Compliance was tested at this inspection and was not achieved.
<b>Achieved</b>	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
21	The service provider has not ensured that care and support is provided in a way which protects, promotes and maintains the safety and well-being of individuals.	Achieved
66	The responsible individual has not ensured supervision of the management of the service, to confirm proper oversight of the management, quality, safety, and effectiveness of the service.	Achieved

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
16	Service providers cannot be assured that people are receiving care and support based on their current needs. Service providers cannot be assured that the service is supporting people to achieve their personal outcomes.	Achieved

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