



## Inspection Report on

**Relax Care Services**

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## **Date Inspection Completed**

13/08/2024

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## About Relax Care Services

Type of care provided	Domiciliary Support Service
Registered Provider	Relax Care Limited
Registered places	0
Language of the service	English
Previous Care Inspectorate Wales inspection	21/02/2023
Does this service promote Welsh language and culture?	The service is working towards providing an 'Active Offer' of the Welsh language and intends to become a bilingual service or demonstrates a significant effort to promoting the use of the Welsh language and culture.

### Summary

People told us they are very happy with the care they receive. The majority of people feel their voices are heard and care staff understand them well. Personal plans provide care staff with a good level of information regarding the person and their needs. People told us their consistent care staff know them very well. Care staff enjoy their roles, receive training, supervisions and spot checks. People praised the management team saying communication is good and they feel listened to. However, we found the service has failed to inform Care Inspectorate Wales (CIW) of important events in line with regulation, but they are taking action to address this. There is a statement of purpose (SoP) in place, but we found the service is not being provided with sufficient skill and competence in line with this. The responsible individual (RI) completes visits and a quality-of-care review, however these measures fail to identify important matters. There are ineffective oversight systems in place to ensure regulations are consistently met. This could pose a serious risk to people's safety and well-being. We are therefore issuing a Priority Action Notice regarding this.

## Well-being

People told us they have control over their day-to-day life. People told us the service are quick to respond to any issues and maintain good levels of communication. People told us they value their independence which care staff respect and the service is flexible to meet their needs. The service identifies individual circumstances and documents this within people's personal plans. People told us their plans are reflective of their support and care needs.

People's emotional and physical health is supported. People commented they enjoy chatting with their care staff and they know and understand their needs. People said the service is quick to make changes to meet their health care needs. We found medication records to be fully complete. People expressed they are very happy and get the right care and support at the time they need it. People praised the service and their consistent care staff. People said the service is "*Brilliant*" and they get along with them very well. People are treated with dignity and respect. People told us they regularly get to speak to a manager, and we saw reviews are in place.

People stated they trust the care staff and managers. People and care staff say managers are responsive. People receive some information about the service such as the SoP, this is also available in Welsh. We found some action is taken by the service to mitigate risk, such as producing risk assessments to inform care staff. We saw complaints are investigated by the service. However, the service has at times failed to take appropriate action following a complaint and have failed to maintain effective oversight of the quality of the service. This is placing people's safety, health and overall well-being at risk.

## Care and Support

Most personal plans include a very good level of detail. A 'highlights' section provides a good summary for care staff to understand the person. Personal plans identify people's needs, history and some personal outcomes. Risk assessments are in place, most are personalised and include important measures. People told us they are happy with their plans and the information within them is correct and up to date. We found most people do not have a copy of their plans in their home as offered in the services statement of purpose (SoP). Managers regularly visit people in their home to review their care. Reviews are in place, but the service needs to ensure personal plan updates are completed in line with regulatory requirements and the whole plan is reviewed.

People told us the service is quick to make changes to their care to suit their needs. The service is quick to implement medication changes following confirmation from health professionals. Medication Records are complete and care staff receive competency and spot checks. We noted ongoing training and support is required for staff to be competent. We saw the service employees contact professionals such as social workers when required. Care tasks clearly identify how people want their support and consistently promote people's independence.

Many people told us they value their independence and care staff ensure they promote this. People told us the service involves and includes their representatives where appropriate. People and their relatives can access the electronic care management system. This is particularly beneficial for people who have relatives that live far away. People praised the service and one person said, *"I wouldn't change anything."*

## Leadership and Management

People praised their consistent care staff saying they're "*Excellent*," "*Brilliant*," and "*Good as gold*." Care staff receive appropriate checks on their identity and Disclosure and Barring service certificates are completed to ensure they are safe to work with adults at risk. Work references are requested but we noted these are not always received. We discussed this with managers who told us they are working on obtaining the missing documents, which is a regulatory requirement. Care staff receive training, spot checks and medication competencies. We noted several medication competencies identified the need for care staff to be reassessed or retrained. We found supervisions show care staff have requested specific training regarding meal preparation and some people told us some care staff don't know how to prepare basic meals like a sandwich. Managers are working with training providers to ensure care staff have the skills and competence required to meet the needs of people.

Staff told us they enjoy their roles and feel well supported by colleagues and managers. Care staff told us the on-call system in place is good and they trust managers to take appropriate action. We saw managers investigate complaints. However, we noted that some complaints relate to staff misconduct and professional concerns which have not been shared with other organisations such as safeguarding and CIW. The service is working on systems to ensure managers have the correct knowledge and good oversight to ensure this can be appropriately managed. This is an area for improvement, and we expect the provider to take action to address this.

The service has an electronic system in place which aids in the monitoring and oversight of care delivery. Managers can monitor care staff arrival times and see when they complete the required care tasks in-line with the personal plan. People told us care staff are "*Always on time*." People told us they trust the manager and feel they could contact them with any issues. One person described a particular manager as "*Brilliant*." The RI completes a quality-of-care review and gains feedback from people and care staff throughout the year.

However, we found that systems in place have failed to identify regulatory breaches and the service is not being provided in line with its SoP. This is placing people's health and well-being at risk, and we have, therefore, issued a priority action notice. The provider must take immediate action to address this issue. The RI and managers are taking action to address our concerns and are working on implementing systems to ensure that they maintain the appropriate knowledge and oversight to identify improvements.

### 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
6	The service needs to ensure that clear arrangements are in place to maintain oversight of the service to ensure regulations are met.	New

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
60	The service have not notified Care Inspectorate Wales of important events as required by regulation.	New

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