

Inspection Report on

Spring Lilly Care

Unit 2, Prospect Park Queensway Swansea SA5 4ED

Mae'r adroddiad hwn hefyd ar gael yn Gymraeg

This report is also available in Welsh

Date Inspection Completed

06/06/2024

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About Spring Lilly Care

Type of care provided	Domiciliary Support Service
Registered Provider	Spring Lilly Care Ltd
Registered places	0
Language of the service	Both
Previous Care Inspectorate Wales inspection	23 February 2023
Does this service promote Welsh language and culture?	This service does not provide an 'Active Offer' of the Welsh language and does not demonstrate a significant effort to promoting the use of the Welsh language and culture.

Summary

This was a focused inspection that explored the Leadership and management of the service following non-compliance identified at the last inspection. We focussed the inspection on the oversight of the service and the wellbeing of people receiving the service and care staff.

We found some improvements have been made to address the issues raised at the last inspection with more information now uploaded onto the providers software system, with alerts in place for reminders when quality assurance audits are due. The frequency of staff supervision is also improving but still needs further work as well as the implementation of annual appraisals. At the last inspection care staff were working long days over long periods of time and not having sufficient time off. This has been improved as most staff now have two days off per week. At the time of this inspection the RI had not engaged with people receiving the service to obtain their feedback since before the last inspection. Continued improvements need to be made to meet compliance of the Priority Action Notice which will remain in place.

Staff morale remains low at present due to announced redundancies which includes the newly appointed manager. Care staff told us that there had been some delays in them being paid on occasions due to the service waiting for payment of invoices to clear. Whilst this is not impacting people receiving the service at present there is a risk that it will in the future.

Well-being

People's voices are not always heard, and improvements are still needed to ensure the service is delivered in accordance with the Statement of Purpose (SoP). Whilst there have been positive actions to improve care planning documentation to ensure they are more person centred and reflect the needs of people, improvements are still required to ensure that people are listened to and are able to influence changes and or improvements in the service.

People overall, are treated with dignity and respect. People are supported by care staff who want to do their best for people. Care workers on the whole feel supported in their roles and receive sufficient training. However, there is low staff morale at present due to pending redundancies and the fear of further job losses in the service.

People's physical, mental health and emotional wellbeing are promoted. People receive good support with medication from the service and recent audits carried out by the regions medication management team confirmed this.

Improvements are needed to ensure the service is financially stable. There are concerns about the financial position of the service which may be contributing to the overall compliance issues. Several staff members are facing imminent redundancies and feedback from staff included concerns around the days they are paid.

People are not able to receive the service in Welsh if they want it. Almost all the care workers in the service are from overseas and are non-Welsh speakers. At present there is no demand for the service to be delivered in Welsh.

Care and Support

As this was a focused inspection, we have not considered this theme in full.

People have up-to-date personal plans in place for care staff to follow to ensure they provide support to meet their needs. We viewed a sample of care files and saw more detailed information on people's care and support compared to the last inspection. The information available to care staff now gives them a better understanding of the individual and what matters to them. Since the last inspection the service manager has prioritised this to ensure the staff have the correct information available to them. Improvements are still needed on risk assessments to ensure they reflect the individual risks to people and following the inspection visit some updated risk assessments were received to evidence this commencing.

The service has good systems for medicines management in place. We saw the outcome of a recent medication management audit carried out by the Local Authority's medication team which stated that procedures in the service overall were very good. This audit included checks on medication administration record (MAR) charts.

Leadership and Management

As this was a focused inspection, we have not considered this theme in full.

Improvements are still required to ensure the service is delivered in accordance with the SoP. At the last inspection we saw that there was a lack of audits in place to maintain oversight of the service. The new manager has ensured some audits are now in place. However, identified actions needed following these audits is not always completed. We noted also that the RI was not visiting people receiving the service to obtain their feedback to drive improvements in the service. At this inspection we found this remains the case as no visits have taken place since the last inspection. Staff supervision was not being completed quarterly as per regulatory requirements, this has improved slightly, but some gaps were still seen. We have therefore re-issued a priority action notice. The provider must take immediate action to address this issue.

There are concerns around the financial position of the service. At this inspection, we were made aware of pending staff redundancies. The RI explained due to the longer-term suspension of additional care packages from the Local Authorities the service has found themselves overstaffed and redundancies are a necessary to secure the financial stability of the service going forward. Care staff spoken with confirmed they are concerned about the redundancies and the instability of their jobs going forward. Whilst the service is still able to support people effectively at present with minimum impact on their well-being, there are concerns about this going forward. While no immediate action is required, this is an area for improvement, and we expect the provider to take action.

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
6	The service is not being delivered in accordance with the Statement of Purpose. Some improvements have been made since the last inspection and supervision and spot checks are now taking place, however these are still not taking place as frequently as mentioned in the Statement of Purpose. Staff Appraisals are still not taking place. Some improvements have been seen in oversight of the service with some audits now in place, this needs to be further developed to ensure issues found are resolved in appropriate time scales. The Responsible individual has not engaged with people receiving the service to understand and analyse how the service is delivered and identify improvements needed. Some improvements have been made to staff working patterns to ensure a better work life balance for staff, however staff morale	Not Achieved

is low with many facing redundancy due to financial	
concerns with the service. The provider must take	
action to ensure improvements are strengthened in	
the oversight of the service to ensure that the service	
is provided to people as explained in the Statement of	
Purpose.	

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
11	There are concerns at present on the financial stability of the service. The service have been in performance management with both local authorities and due to suspension of placements have not had any additional work for months resulting in a natural decrease in work load. The service were already overstaffed and are now in the process of making many staff redundant.	New

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Date Published 25/07/2024