

Inspection Report on

Amber Quays Domiciliary Care Services Ltd

53 Church Street Flint CH6 5AD

Date Inspection Completed

29/08/2024



About Amber Quays Domiciliary Care Services Ltd

Type of care provided	Domiciliary Support Service
Registered Provider	Amber Quays Domiciliary Care Services Ltd.
Registered places	0
Language of the service	English
Previous Care Inspectorate Wales inspection	This is the first inspection since registration.
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 patient care staff who know them well. Care staff know people's routines, and their care and support needs and meet these effectively. This is a growing service, as it develops and the team expands, clear documentation is required to ensure all care staff have clear instructions for the delivery of people's care. There are some inconsistencies in personal plan documentation at present, and this is an area the service wishes to improve.

The responsible individual (RI) has good oversight of the service and conducts regular monitoring to ensure any issues are swiftly identified. They are keen to develop the service and maintain ongoing improvements. They are supported by a management team which is committed to providing good quality care and support to people, through open and clear communication with people, relatives, and other professionals.

Well-being

People can expect to be listened to and their voices heard. The service provider's statement of purpose refers to a 'culture of conversation' and we found care staff and management take time to listen to people's views. Questionnaires are sent out regularly and the responses analysed. People value the support they receive and told us all their needs are met. Care staff are kind and caring with people, and people look forward to their visits. People and relatives told us care staff know exactly what support they need and described them as "excellent". One person told us "I decide what I can do and can ask them to do anything I struggle with." Whilst care staff know people well, their daily routines and care and support needs are not always recorded consistently in personal plans. This means there is a risk new members of staff may not have clear and consistent instructions for the delivery of people's care and support needs. Personal plans do not record people's desired outcomes, which may mean it is unclear what their individual goals are.

Care staff support people to maintain their physical and mental wellbeing. They identify when people need further assistance and onward referrals to healthcare providers are made accordingly. We saw evidence health monitoring checks are completed where required.

Care staff ensure people are safe from the risk of abuse and neglect. The care staff we spoke to understand their responsibilities for raising concerns for the people they care for and told us they would be confident to report any concerns about the service if the need arose. There is a system in place for people to raise any concerns and we saw this has been used effectively. The manager and RI have made appropriate referrals to safeguarding when there has been reason to believe they may be at risk of harm. Safeguarding audits completed by the service effectively pick up any issues or concerns which are thoroughly investigated.

People can communicate in Welsh if they want to. Some care staff speak Welsh and others are encouraged to learn the language. Welsh speaking care staff have lanyards to help identify them to people. One member of care staff is completing a project on the Active Offer of Welsh for their level four qualification and will be exploring how the service can best meet the needs of Welsh speakers. Documents can be translated into Welsh if requested.

Care and Support

People are supported by a consistent staff team who know them well. Initial assessments are completed which ensure the service can meet people's needs before their care commences. Care staff take time to get to know people and personal plans are person centred, containing details about people's preferences for how they would like their care delivered. People and relatives told us care staff know exactly what care and support they need. One relative told us they, "Know the routine by heart". We found this information was not always consistently recorded in personal plans. Whilst care staff deliver the care and support which is required, daily routines and details such as what health monitoring is required is not always clear on the personal plans. This means there is a risk new members of staff may not have clear instructions to follow. People's personal plans did not contain the outcomes people want to achieve, meaning the goals which are important to people are not always clear. Whilst no immediate action is required, this is an area for improvement and we expect the provider to take action. Care staff have a system in place to raise any updates which may be required to the care delivered and this information is helpful when the personal plan is reviewed. Personal plans and risk assessments are reviewed regularly.

Care staff ensure people's healthcare needs are met. They make referrals to the relevant professionals when specialist advice is needed. We saw care staff had followed a process to alert management of concerns about one person's mobility, enabling them to access an assessment by an occupational therapist. A healthcare professional we spoke to told us care staff are following their advice to ensure people's healthcare needs are met. The RI has recently introduced a new medication administration record (MAR) chart, to improve the monitoring of safe administration of medication. A senior member of staff reviews these charts every week to identify any issues or concerns. A medication champion has been appointed from the staff team and has delivered training on the new MAR charts. This new system has been effective for the service, and they now have a robust system in place to identify any errors which may occur enabling them to take appropriate action.

People are kept safe from the risk of infection. Care staff have access to plentiful supplies of personal protective equipment (PPE) and have access to training in infection control.

Leadership and Management

The RI is heavily involved in the service and provides oversight to ensure it is running smoothly and good quality care is being delivered. They make regular visits to people to review their care packages. They complete audits of the service, focusing on different areas each month. These include reviews of personal plans and spot checks of care staff. They complete a monthly oversight document which considers a range of issues including training, rotas, safeguarding and health and safety. This covers the requirements of a quarterly RI visit, and they intend to review how this information is recorded so it can be formally captured every three months. The RI also completes a six-monthly quality of care review for the service, considering what is working well and areas which can be developed and improved. The management team also complete monthly reports reviewing how the service is running based on their area of expertise.

People are supported by care staff who have the skills and experience required to provide good quality care. Care staff undergo thorough recruitment checks before commencing their roles. We saw evidence of disclosure and barring service (DBS) checks and reference checks. They have access to a range of core and specialist training to ensure they can meet people's needs. Training is provided, online, face to face and by external providers. In house training is evaluated and some recent training received positive feedback. Care staff are supported to progress in their roles, with the opportunity to take responsibility for a particular area of care delivery by becoming a 'champion'. They are supported to continue their professional development by undertaking educational courses. All the care staff we spoke with told us they enjoyed their roles and they have good support from management.

Management ensures rotas are planned with adequate time to complete care visits and travel between them. Care staff told us if travel times are tight, they can raise this with the management team and this will be addressed.

The service provider is continuing to invest, and they have recently moved to new office premises which better suits the needs of the 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
15	People's personal plans were not clear about the outcomes they wished to achieve and were not	New

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