

Annual Return 2022/2023

Provider Information to be published

The following information relates to information CIW held about this provider and its associated services on the 31st March 2023.

This section has been completed for you. There are no actions to complete. This information displayed will be included in the published Annual Return.

| | | |
|---|---|--|
| Provider name: | AMG Consultancy Services Ltd | |
| The provider was registered on: | 19/02/2019 | |
| The following lists the provider conditions: | There are no imposed conditions associated to this provider | |
| The regulated services delivered by this provider were: | AMG Nursing and Care Services - Wrexham | |
| | Service Type | Domiciliary Support Service |
| | Type of Care | None |
| | Approval Date | 19/02/2019 |
| | Responsible Individual(s) | Garrett Taylor |
| | Manager(s) | Donna Molyneux |
| | Partnership Area | North Wales |
| | Service Conditions | There are no conditions associated to this service |

Training and Workforce Planning

| | |
|--|--|
| Describe the arrangements in place during the last financial year for identifying, planning and meeting the training needs of staff employed by the service provider | All staff are trained to meet the complex needs of the three service users in Anglesey. The training programme is competency based and is assessed by qualified trainers and the registered nurse who also provides clinical oversight. Newly recruited carers are supported to complete the all Wales Induction Framework and are registered with SCW. In addition, the carers are supported to complete the NQ level 2/3. Annual mandatory training updates and competency renewals are completed |
| Describe the arrangements in place during the last financial year for the recruitment and retention of staff employed by the service provider | Shifts schedules are utilised to inform the recruitment strategy. Specific days and hours of work are advertised and parents are actively involved in the process which ensures that the individual recruited has the right attributes which are a fit for both the family and the team. Flexibility in hours worked, creating a better work life balance, Team working, Staff recognition awards, refer a friend initiatives help with retention rates. Monitored centrally retention rates are high. |

Service Profile

Service Details

| | |
|--|---|
| Name of Service | AMG Nursing and Care Services - Wrexham |
| Telephone Number | 01244347200 |
| What is/are the main language(s) through which your service is provided? | Welsh Medium and English Medium |
| Other languages used in the provision of the service | Welsh, although the preferred language of the SUs and family members we look after is English |

Service Provision

People Supported

| | |
|--|---|
| How many people in total did the service provide care and support to during the last financial year? | 3 |
|--|---|

Fees Charged

| | |
|---|-------|
| The minimum hourly rate payable during the last financial year? | 23.83 |
| The maximum hourly rate payable during the last financial year? | 37.64 |

Complaints

| | |
|--|---|
| What was the total number of formal complaints made during the last financial year? | 0 |
| Number of active complaints outstanding | 0 |
| Number of complaints upheld | 0 |
| Number of complaints partially upheld | 0 |
| Number of complaints not upheld | 0 |
| What arrangements were made for consulting people who use the service about the operation of the service during the last financial year? | Feedback forms are sent to the service users every 3 months. In addition, compliance staff have scheduled visits monthly and the nurse visit every 2 months or more regular if competency training is required. At each visit feedback is sought from the parents. The RI has visited the service users 6 times and held telephone conversations with the Parents twice. In addition, the RI attended the property to resupply PPE and paperwork - these informal visits also allowed for a welfare check to undertaken on the staff on shift and with the clients. |

Communicating with people who use the service

| | |
|---|---|
| Identify any non-verbal communication methods used in the provision of the service | |
| Picture Exchange Communication System (PECS) | No |
| Treatment and Education of Autistic and related Communication-handicapped CHildren (TEACCH) | No |
| Makaton | No |
| British Sign Language (BSL) | No |
| Other | Yes |
| List 'Other' forms of non-verbal communication used | Whilst all three clients are non communicative, the carer's do talk to each of them and use touch to connect with them. This often elicits a response |

Statement of Compliance

The Responsible Individual must prepare the statement of compliance.

CIW have published [guidance](#) on completing the quality of care review which provides advice on what could be contained within the statement of compliance.

Set out your statement of compliance in respect to the four well-being areas below.

The extent to which people feel their voices are heard, they have choice about their care and support, and opportunities are made available to them.

For each complex Service Users, the care plans are designed around the care prescriptions from the expert clinicians and are discussed with the multidisciplinary teams. Parental input is regularly sought in ensuring that the care plans meet the specific needs of the Service Users.

Review of the documentation showed that all Service Users had a care plan and these were approved by the parents. Care plans were specific to each intervention and procedural guidelines were included and available within the property. This enables staff to refresh their understanding of the procedure should this be required.

The service user handbook gives directions to parents on how they can contact the office including out of hours.

The main outcome that the parents wanted for the Service Users was that they were looked after by skilled carers and that AMG provided the support to enable them to achieve the necessary qualification to do this.

Feedback from the parents was generally positive and they praised the carers for the support they provided for the SUs this included recognition for when they went 'above and beyond' to help. They stated that the team working was excellent, and they all supported each other covering shifts when personal events required a change to the rota. The main issue which was consistently raised related to pay and the ability of staff to review their pay slips. It was evident that whilst some members of the care team had followed the guidance provided (to access their pay slips and time sheets) others were still struggling. Recent recruitment had been successful and the increase in hours and additional staff rostered had given Mum and Dad the opportunity to have more family time with the extended family.

Visit feedback identified that additional support was required to assist care staff in the utilisation of the IT systems introduced to make information more accessible. The monthly visits by the compliance officer were of benefit and would therefore continue.

Summary

All service users have care plans which are person centred and are mutually agreed with the parents or the multidisciplinary team. It is evident that the Manager and office staff maintain regular contact with the Service User and the care staff. Feedback from the Service User's parents is very complimentary. Maintaining the visits by the nurse and compliance staff are a positive step in the service users/family members and carers feeling supported in their role.

The extent to which people are happy and supported to maintain their ongoing health, development and overall wellbeing. For children, this will also include intellectual, social and behavioural development.

Care plans are developed to meet the specific needs of the Service Users. In all instances the care plans are comprehensive and have been mutually agreed with the family member and follow the care prescriptions from the relevant professionals. The audit conducted by the quality team confirmed that each of the Service User's care plans were person centred and appropriately focused on outcomes. There was clear evidence that the assessor was familiar with the specific care needs of each individual. The plans were comprehensive and provided details on how each individual liked to be supported and what the carers are to do to achieve this. Appropriate risk assessments were evident, and these contained clear details of the risk reduction measures necessary to keep the service users safe. There was evidence that appropriate reviews are undertaken, and changes are acted upon. The nurse stated that she regularly attended MDT reviews and additional meetings were held with the LTVT for the Service User who had transitioned to adult services. The agreement to increase the hours of support has been recruited to. Mum stated that the ability to retain the carers and the additional hours was something that she didn't think was possible. It had reduced the amount of stress that she had about transition and meant that continuity in the skilled staff was retained which was so important to the Service User's wellbeing. Mum also stated that the consultant was extremely complimentary about the care each of the Service Users was receiving. He stated the skin integrity around the stoma and overall was a testament to the skills of the carers and diligent care they delivered. Mum stated that this was very important to her and had in her opinion contributed to how well all were. Mum explained how important it was for carers to engage actively with the Service Users and she described a comprehensive range of activities that the carers did with each one of them. The things that they liked to do were very different and this was evidenced in the care plan. Two carers recently recruited have now been fully trained to care for the Service Users. Support was provided to staff to complete AWIF and to enable them to register with SCW. The initial phase of introducing the electronic care planning system was successful. Access to information via the family app was welcomed as this provided remote visibility and assurance that all was well with the SUs when the parents were away.

The extent to which people feel safe and protected from abuse and neglect.

During the audit, all carer files were audited to ensure safe recruitment practices and that the correct documentation was uploaded and was clear to view. 17 files of the 19 audited had evidence of their update training being completed and 2 were in progress. 1 file had not uploaded the evidence of their induction training. In addition, although competency training had been completed the certificates had yet to be uploaded. In addition to this the DBS confirmation require a rescan as the uploaded documents were in some files difficult to read.

All staff have safeguarding training, and this is refreshed on an annual basis. Safeguarding is also included in the staff handbook. The carers looking after the complex service users receive safeguarding children level 2 training. Training material is also accessible to the cares via the online training platform.

A review of the compliance data showed that the new members of staff, caring for the complex children, have yet to complete all their competency training although there are clear plans in place to complete this.

There is a process in place to record all incidents, accidents, concerns, and complaints on the RADAR event reporting system. Although during this period there have been no safeguarding issues raised, the manager did demonstrate a clear understanding of the process for identifying and reporting safeguarding matters. Whilst there have been several concerns raised in relation to the pay system (which have all been resolved) there have been no formal complaints.

Care plans demonstrate that they are written to ensure that a person remains safe.

Whilst feedback from the parents is always positive, frustration relating to pay is evident and has a profound impact on the carers and parents alike. There have been repeated occasions when the matter has been directly raised with the RI which shows that the escalation process works, however the ability for the branch to immediately resolve these issues requires attention. Monthly meetings with compliance in the Anglesey have been positively received and these should continue.

There is evidence that all staff are appropriately trained, and a plan is in place to ensure that all competencies are achieved. Certificates need to be uploaded in the carers file as evidence for future compliance audits.

It was identified that permanently displaying the instructions relating to the introduction of new technologies would be beneficial.

The following section requires you to answer questions about the staff and volunteers working at the service.

Number of posts and staff turnover

| | |
|--|----|
| The total number of full time equivalent posts at the service (as at 31 March) | 24 |
|--|----|

The following section requires you to answer questions about each staff type including information about the number of filled and vacant posts, the training undertaken, the contractual arrangements in place and the qualifications of those staff.

The information entered should relate to the period during which the staff member has been working for the provider only.

Staff Type

Service Manager

| | |
|---|-----|
| Does your service structure include roles of this type? | Yes |
|---|-----|

Important: All questions in this section relate specifically to this role type only. Unless otherwise stated, the information added should be the position as of the 31st March of the last financial year.

| | |
|---|--|
| Filled and vacant posts | |
| No. of staff in post | 1 |
| No. of posts vacant | 0 |
| <p>Training undertaken during the last financial year for this role type.</p> <p>Set out the number of staff who undertook relevant training. The list of training categories provided is only a sample of the training that may have been undertaken. Any training not listed can be added to 'Please outline any additional training undertaken pertinent for this role which is not outlined above'.</p> | |
| Induction | 0 |
| Health & Safety | 1 |
| Equality, Diversity & Human Rights | 1 |
| Manual Handling | 1 |
| Safeguarding | 1 |
| Dementia | 0 |
| Positive Behaviour Management | 0 |
| Food Hygiene | 0 |
| Please outline any additional training undertaken pertinent to this role which is not outlined above. | Governance Training Recruitment and retention Use of Access IT systems |
| Contractual Arrangements | |
| No. of permanent staff | 1 |
| No. of Fixed term contracted staff | 0 |
| No. of volunteers | 0 |
| No. of Agency/Bank staff | 0 |
| No. of Non-guaranteed hours contract (zero hours) staff | 0 |
| Outline below the number of permanent and fixed term contact staff by hours worked per week. | |
| No. of full-time staff (35 hours or more per week) | 1 |
| No. of part-time staff (17-34 hours per week) | 0 |
| No. of part-time staff (16 hours or under per week) | 0 |
| Staff Qualifications | |
| No. of staff who have the required qualification to be registered with Social Care Wales as a Service Manager | 1 |
| No. of staff working toward required/recommended qualification to be registered with Social Care Wales as a Service Manager | 0 |
| Deputy service manager | |
| Does your service structure include roles of this type? | No |
| Other supervisory staff | |
| Does your service structure include roles of this type? | Yes |
| Important: All questions in this section relate specifically to this role type only. Unless otherwise stated, the information added should be the position as of the 31st March of the last financial year. | |

| | |
|---|---------------------|
| Filled and vacant posts | |
| No. of staff in post | 2 |
| No. of posts vacant | 0 |
| <p>Training undertaken during the last financial year for this role type.</p> <p>Set out the number of staff who undertook relevant training. The list of training categories provided is only a sample of the training that may have been undertaken. Any training not listed can be added to 'Please outline any additional training undertaken pertinent for this role which is not outlined above'.</p> | |
| Induction | 1 |
| Health & Safety | 1 |
| Equality, Diversity & Human Rights | 1 |
| Manual Handling | 1 |
| Safeguarding | 1 |
| Dementia | 1 |
| Positive Behaviour Management | 1 |
| Food Hygiene | 0 |
| Please outline any additional training undertaken pertinent to this role which is not outlined above. | Compliance training |
| Contractual Arrangements | |
| No. of permanent staff | 2 |
| No. of Fixed term contracted staff | 0 |
| No. of volunteers | 0 |
| No. of Agency/Bank staff | 0 |
| No. of Non-guaranteed hours contract (zero hours) staff | 0 |
| Outline below the number of permanent and fixed term contact staff by hours worked per week. | |
| No. of full-time staff (35 hours or more per week) | 1 |
| No. of part-time staff (17-34 hours per week) | 1 |
| No. of part-time staff (16 hours or under per week) | 0 |
| Staff Qualifications | |
| No. of staff who have the required qualification to be registered with Social Care Wales as a social care worker | 0 |
| No. of staff working towards the required/recommended qualification | 0 |
| Senior social care workers providing direct care | |
| Does your service structure include roles of this type? | Yes |
| <p>Important: All questions in this section relate specifically to this role type only. Unless otherwise stated, the information added should be the position as of the 31st March of the last financial year.</p> | |
| Filled and vacant posts | |
| No. of staff in post | 2 |
| No. of posts vacant | 0 |

Training undertaken during the last financial year for this role type.

Set out the number of staff who undertook relevant training. The list of training categories provided is only a sample of the training that may have been undertaken. Any training not listed can be added to 'Please outline any additional training undertaken pertinent for this role which is not outlined above'.

| | |
|---|--|
| Induction | 0 |
| Health & Safety | 2 |
| Equality, Diversity & Human Rights | 2 |
| Manual Handling | 2 |
| Safeguarding | 2 |
| Dementia | 0 |
| Positive Behaviour Management | 2 |
| Food Hygiene | 0 |
| Please outline any additional training undertaken pertinent to this role which is not outlined above. | Tracheostomy Management Oral and Tracheal suctioning Pulse oximetry PEG management/medication and Feeds Mechanical Ventilation |

Contractual Arrangements

| | |
|---|---|
| No. of permanent staff | 2 |
| No. of Fixed term contracted staff | 0 |
| No. of volunteers | 0 |
| No. of Agency/Bank staff | 0 |
| No. of Non-guaranteed hours contract (zero hours) staff | 2 |

Outline below the number of permanent and fixed term contact staff by hours worked per week.

| | |
|---|---|
| No. of full-time staff (35 hours or more per week) | 2 |
| No. of part-time staff (17-34 hours per week) | 0 |
| No. of part-time staff (16 hours or under per week) | 0 |

Staff Qualifications

| | |
|--|---|
| No. of staff who have the required qualification to be registered with Social Care Wales as a social care worker | 2 |
| No. of staff working towards the required/recommended qualification | 0 |

Other social care workers providing direct care

| | |
|---|-----|
| Does your service structure include roles of this type? | Yes |
|---|-----|

Important: All questions in this section relate specifically to this role type only. Unless otherwise stated, the information added should be the position as of the 31st March of the last financial year.

Filled and vacant posts

| | |
|----------------------|----|
| No. of staff in post | 18 |
| No. of posts vacant | 0 |

Training undertaken during the last financial year for this role type.

Set out the number of staff who undertook relevant training. The list of training categories provided is only a sample of the training that may have been undertaken. Any training not listed can be added to 'Please outline any additional training undertaken pertinent for this role which is not outlined above'.

| | |
|---|--|
| Induction | 5 |
| Health & Safety | 5 |
| Equality, Diversity & Human Rights | 5 |
| Manual Handling | 18 |
| Safeguarding | 18 |
| Dementia | 5 |
| Positive Behaviour Management | 5 |
| Food Hygiene | 0 |
| Please outline any additional training undertaken pertinent to this role which is not outlined above. | Tracheostomy Management Oral and Tracheal suctioning Pulse oximetry PEG management/medication and Feeds Mechanical Ventilation AWIF NVQ training |

Contractual Arrangements

| | |
|---|----|
| No. of permanent staff | 0 |
| No. of Fixed term contracted staff | 0 |
| No. of volunteers | 0 |
| No. of Agency/Bank staff | 0 |
| No. of Non-guaranteed hours contract (zero hours) staff | 18 |

Staff Qualifications

| | |
|--|----|
| No. of staff who have the required qualification to be registered with Social Care Wales as a social care worker | 12 |
| No. of staff working towards the required/recommended qualification | 6 |

Other types of staff

| | |
|--|----|
| Does your service structure include any additional role types other than those already listed? | No |
|--|----|