



## Inspection Report on

**Carelink Home Services Ltd**  
**Park Mount**  
**Glanhwfa Road**  
**Llangefni**  
**LL77 7EY**

### **Date Completed**

07/11/2023

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## About Carelink Homecare Services Ltd

Type of care provided	Domiciliary Support Service
Registered Provider	Carelink Homecare Services Ltd
Registered places	0
Language of the service	English
Previous Care Inspectorate Wales inspection	<a href="#">6<sup>th</sup> December 2019</a>
Does this service promote Welsh language and culture?	The service provides an 'Active Offer' of the Welsh language. It anticipates, identifies and meets the Welsh language and cultural needs of people who use, or may use, the service.

### Summary

People receive good quality care from a staff team who know them well. Care is person centred, and promotes choice, independence, and participation. Personal plans are detailed, personalised to individual need and updated when care needs change. People told us they are happy with the service and praised care staff.

Management work effectively to ensure people receive care from a consistent staff team. The same care staff attend to people's needs, which means people have continuity and support from care staff whom they are familiar with. Care staff report feeling part of a family who are supported well by management. They told us they enjoy working with this service. Management is passionate about the service and ensure people receive ongoing, consistent, and timely care of a high standard. There are well established systems in place, which are pivotal to the smooth running of the service. Management's oversight of the service is thorough and continuous.

## Well-being

People are listened to, are involved and in control of the service they receive. They are central to the planning of their care. We spoke with people and their families about the care provided. All reported positive feedback. One person told us, "*There is nothing too much trouble for care staff*". People can approach care staff and management if they have any issues. Care staff are committed and efficient. Care records are detailed, reviewed, and updated. Management has robust systems in place to ensure ongoing and effective monitoring of the quality of care.

People's physical, mental, and emotional well-being needs are being met. They are supported to be as active and as independent as possible. Care staff know people well and communicate effectively with health professionals. Appropriate links are made with health professionals when required. People are encouraged to stay in touch and to maintain positive relationships with people they live with, family and friends and the care staff who provide support. We evidenced good communication and record keeping regarding the care people need and receive. Management oversight of care is efficient and reliable.

People are safeguarded from harm and risk. There are systems in place to ensure this and to prevent people from being harmed. We viewed thorough and detailed risk assessments which are based on individual need. Care staff told us they have enough time with people and in between calls. We evidenced this when we reviewed personal plans. The training programme shows care staff receive ongoing training in areas such as safeguarding, falls, moving and handling, which is up to date. Management responds efficiently when care staff communicate issues. Care Inspectorate Wales (CIW) have found the service to be efficient and timely when responding to any concerns or safeguarding issues.

## Care and Support

People feel confident that service providers have an accurate and up-to-date plan for how their care is to be provided to meet their needs. People's personal plans are person centred, detailed and up to date. They are recorded clearly for care staff to follow. Care records are updated throughout the day and are reflective of how the individual's day has progressed. Personal plans include relevant risk assessments where appropriate. Medication Administration Records (MAR) are kept and monitored by management to ensure accuracy and to identify any issues if they arise. Communication with professionals is frequent, effective, and ongoing. This ensures people receive a prompt and efficient service. For example, daily and weekly meetings take place with a multidisciplinary team. This is in addition to care reviews. Care records reflect people's individual care needs. Care staff, management and the multidisciplinary team are knowledgeable about people's individual needs because of effective information sharing and communication.

People are provided with the quality of care and support they need through a service which consults with them. Surveys are completed to ensure people are happy with the service. Managers undertake frequent monitoring calls and observe care staff while they provide the care. They ensure people receive the care service from a staff team who know them well. We spoke with people who receive the service, who said;

*"I'm lucky and very happy with the carers. They know me and know what to do for me"*

*"They do always make sure the same carers attend to people."*

*"Pawb yn dda iawn ac yn glen. (Every carer is kind)"*

*"Any issues, are sorted out promptly".*

Managers, staff and people and their families using the service told us the provider aims to provide full attention to people, in particular if any issues arise. Care staff and the management team are passionate, knowledgeable, and efficient regarding the people they support and work for.

People are supported to have access to health and other services. We reviewed a sample of personal plans which showed timely and appropriate links made with various health professionals, when care needs change, and their involvement in providing care. We found records are clear, up to date and organised. We observed a multidisciplinary meeting which demonstrated effective communications with numerous health professionals, including, district nurses, occupational therapists, social workers. Health professionals we spoke with are positive about the service and the care provided. They confirmed communication and information sharing about people's care needs is well organised, efficient, and effective.

The provider has mechanisms in place to safeguard people from the risk of harm. People and their families are initially provided with information about how to share a concern, and what support is available to enable them to do so. Care staff are provided with safeguarding training and have access to the service safeguarding policy other policies and procedures to keep people safe. We spoke with care staff who told us they know what to do if they are concerned; this includes whistleblowing. The provider works regularly, in partnership with multidisciplinary agencies to ensure safety and manage risk. We reviewed the safeguarding records maintained by the service. We saw these are organised, monitored for oversight and consistent with the records sent to Care Inspectorate Wales (CIW).



## Leadership and Management

The provider has effective governance arrangements in place to ensure people's outcomes are met. The responsible individual has an established routine of regular visits to the service, during which time, they link with care staff and people to gather information about the service provided. They also complete quality-of-care reports on a six-monthly basis. These identify any improvements needed and also, what is working well, and progress made. The statement of purpose and service policies and procedures are up to date and accurately reflect the service provided. Appropriate, accurate and organised information records are kept of any incidents, complaints, compliments, and concerns. These are reviewed and monitor to ensure effective oversight. People, their relatives and care staff can approach the provider if any issues arise. The provider has established good working relationships with health and care professionals. This is key to the ongoing, regular and effective communication. Care Inspectorate Wales are appropriately notified as required.

The service provider has oversight of financial arrangements and investment in the service so that it is financially sustainable. It supports people to be safe and achieve their personal outcomes. The staff team are well supported, and sufficient time is planned between calls.

Care staff are safely recruited, supported, and trained. Staff files we reviewed showed this. Care staff told us they feel supported, work as a team and feel they can approach management; the rotas are planned around their availability. The RI told us they aim to support care staff to maintain a good rapport and morale. Hours are offered if required or available, in addition to care staff's regular hours. Management provide regular supervision and training. Both training and supervision records demonstrate consistency within times and dates of occurrence. All staff we spoke with told us they feel supported and happy in their work.



### 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

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
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N/A	No non-compliance of this type was identified at this inspection	N/A
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