



## Inspection Report on

**April Complete Care Solutions**

**April Complete Care Solutions Ltd  
14 Hendre Road Pencoed  
Bridgend  
CF35 5NW**

## Date Inspection Completed

30/03/2023

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## About April Complete Care Solutions

Type of care provided	Domiciliary Support Service
Registered Provider	April Complete Care Solutions Limited
Registered places	0
Language of the service	English
Previous Care Inspectorate Wales inspection	24.1.2022
Does this service provide the Welsh Language active offer?	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

April Care is a domiciliary support service. This report is for the West Glamorgan and Cardiff and Vale areas. There is a new manager in post who covers both areas and is registered with Social Care Wales.

People and their representatives are happy with the service they receive and speak highly of the staff and management. Individual's personal plans are person-centred and focus on positive outcomes for people. Routine reviews, to ensure changes are recognised and plans remain up to date, need to be completed more often. The recruitment process is robust and ensures care workers' suitability for the role. Care workers need more frequent supervision and training to support them in their role. The service has policies and procedures that underpin safety and good practice. There are arrangements in place for the safe administration of medication. Care staff use positive infection control measures when undertaking visits. Governance and quality arrangements need to be more robust to demonstrate the responsible individual (RI) has clear oversight of service provision.

## Well-being

People have positive relationships with care staff who treat them with kindness and respect. Feedback from people and their family/relatives indicates they have good relationships with care staff. People can make choices about how they spend their day. Care staff appear confident and enthusiastic in their roles and know people's needs well.

People have control over their day-to-day lives. People access activities that are individually tailored, promote social interaction and community presence. The service provided is flexible and people can choose when they receive support. Care workers and people using the service know each other well. Care workers are familiar with people's needs, wants and routines and know how best to support people to achieve their personal outcomes.

There are systems in place to safeguard people from harm. The service has appropriate infection control measures in place and care workers have access to relevant personal protective equipment (PPE) to reduce the risk of infection. The recruitment process is robust and ensures care workers' suitability for the role. They receive training to meet the needs of the people they support. However, not all are compliant with the service's core training requirements and improvements are required in this area.

The service promotes people's physical and mental well-being. Personal plans and risk assessments generally contain key information and are person centred. Care documentation is individualised, detailed and informative. However, reviews must be completed regularly to ensure the plans remain current. People remain as healthy as they can be due to timely referrals and good communication with external professionals. Care staff promote choice and have a very good knowledge of the people they support and are therefore able to notice any changes quickly and respond promptly.

## Care and Support

Personal plans and risk assessments are mostly accurate and evidence how care workers should meet people's needs. We found evidence the service encourages people to contribute to their individual plans and found signatures to show people agree with the service provided. Plans we viewed document people's personal outcomes and contain detailed information around their individual care needs. Risk assessments identify any hazards and outline how to reduce or eliminate these. However, we were unable to find evidence the service had completed personal plan reviews as required by regulation. We expect the provider to take action to address this and we will follow this up at the next inspection.

People are treated with dignity and respect. People receive an assessment of their needs prior to the service commencing and agree what tasks they would like assistance with and at what time. People are provided with information about the service and details of how they can complain if they are not happy. People and relatives using the service told us "*The quality of care with April is excellent*", "*They always talk to her and tell them what they are going to do*" and "*The girls are brilliant*".

There are appropriate arrangements in place for managing medication and infection control. People told us they receive their medication as and when they need it. We viewed a sample of medication administration records (MAR's) and found these to be completed appropriately. Routine audits ensure medication tasks are managed correctly and documents contain no gaps or errors. The service has an infection control policy in place and care staff have access to guidance relating to Covid 19. Care staff understand how to use personal protective equipment (PPE) to reduce the risk of cross contamination.

The service strives to provide continuity of care to people they support. Overall, care staff know the people they support well and can anticipate their needs and wants. New staff have the time they need to meet people and read care documentation. Care staff are supportive of each other and complimentary of the support peers and members of the management team provide. There is an out of hours service for staff to access. Care workers told us "*The manager is brilliant very supportive*" and "*I have used the out of hours service on many occasions and have only positive thoughts on them. Totally helpful and supportive*".

## Environment

We do not consider the environment as part of a domiciliary care service inspection, other than the suitability of its office premises: the service operates from office premises, which are easily accessible. April Care keeps records and documents securely, and there is space available for private conversations and supervision.

## Leadership and Management

The recruitment process is robust and ensures care workers' suitability for the role. New care workers receive an induction in line with Social Care Wales's requirements. Improvements are required to ensure care workers are compliant with the service's core training requirements. Care workers speak positively about their training and say they feel competent and comfortable in their roles. We were told "*I feel supported and always listened to*" and "*I feel supported and valued and know that if I want to I can go to the office whenever I need any advice*". However, records show not all care workers are up to date with their core training and require refresher training in some areas. Individual supervision gives care workers the opportunity to reflect on their performance and discuss any issues they may have. We looked at records relating to supervision and found care workers are not always receiving the required amount of formal support. We advised these are areas for improvement, and we expect the provider to take timely action to address this.

Written information documented in the Statement of Purpose and information leaflet outlines the services aims, values and service provision. They are available for people who use the service which contains practical information including how to make a complaint and contact telephone numbers for agencies such as Care Inspectorate Wales and Social Care Wales.

Rotas are stable and well managed. We looked at care worker rotas and saw sufficient staff in place to ensure people receive calls as agreed in their personal plan. Care staff told us calls are not changed or added without consultation and visiting the same people every week helped them to build up positive relationships. Rotas and feedback confirm sufficient time is given to carry out care calls and adequate time is allocated to travel from one call to the next. People told us that they have never had a missed call and that the carers mostly arrive on time. We were told "*They are smack on time always*" and "*They never not turn up*".

Improvements are required to the overall governance of the service. Currently there is no responsible individual (RI), however, the new manager is in the process of making an application to CIW to become the RI. The manager is completing three monthly oversight reports. However, they need to directly seek and record the views of people using the service. We notified the provider that they were not meeting legal requirements and will follow this up at the next inspection.

### 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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16	Not all personal plans have been reviewed at least three monthly	New
36	Not all staff have not received the required core training and one to one supervision	New
73	The RI is not gaining feedback from people using the service.	New

Where we find the provider is not meeting the National Minimum Standards for Regulated Child Care but there is no immediate or significant risk for people using the service, we highlight these as Recommendations to Meet National Minimum Standards.

We expect the provider to take action to address these and we will follow these up at the next inspection.



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