



# Inspection Report on

**Celtic Community Services Ltd**

**Edwards Coaches Ltd  
Unit 6-8  
Parc Busnes Edwards  
Pontyclun  
CF72 8QZ**

**Date Inspection Completed**

03/11/2023

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## About Celtic Community Services Ltd

Type of care provided	Domiciliary Support Service
Registered Provider	Celtic Community Services Ltd
Registered places	0
Language of the service	English
Previous Care Inspectorate Wales inspection	<a href="#">17<sup>th</sup> October 2022</a>
Does this service promote Welsh language and culture?	This service is working towards providing an 'Active Offer' of the Welsh language and demonstrates a significant effort to promoting the use of the Welsh language and culture.

### Summary

Celtic Community Services provides care and support to people in their own homes. The service mainly caters for people with alcohol dependency and alcohol related illnesses, substance misuse and mental health issues. Services are provided in the Cwm Taf and Cardiff and Vale regions. This report covers Cardiff and Vale.

People are pleased with the service they receive and are complimentary about the relationships they have with care workers and office-based staff. Personal plans are clear and concise and highlight people's personal outcomes. Personal Plans are regularly reviewed to ensure they remain current. Risk management plans set out strategies to keep people safe and healthy. Care workers are well supported, confident and happy in their roles. Care workers receive regular supervision, and training is provided to ensure care workers are sufficiently skilled. We found improvements are required to ensure the Responsible Individual (RI) has clear oversight of service provision.

## Well-being

People are treated with dignity and respect by care workers they know well. People told us they have good relationships with care workers and office staff. We observed care workers interacting with people in a respectful and dignified manner. People are encouraged to live as independently as possible and are involved in the planning of the care and support they receive. People's personal plans are person-centred, meaning they are specific to each person's individual set of needs.

People are protected from harm and abuse. Care workers are trained to meet the needs of the people they support and receive training in areas such as safeguarding and medication management. Care workers we spoke to show a good understanding of their safeguarding responsibilities including the process for raising concerns. Relevant policies such as safeguarding and whistleblowing are in place and easily accessible.

People are supported to be as healthy as they can be. The service provides support for people with medication needs. We saw evidence care workers support people to arrange and attend medical appointments when needed. Care workers know the people they support well and can identify the signs of deterioration or ill health and report to the relevant professional for support or advice.

People are consulted regarding the service they receive. Management meet with people regularly to discuss their package of care and gather their views regarding service provision. We found improvements are needed to ensure the RI meets with people and staff regularly for them to maintain effective oversight.

## Care and Support

People's care and support needs are set out in their personal plans. Personal plans highlight people's personal outcomes as well as providing practical guidance regarding the care and support they require. The service adopts a person-centred approach to care planning with people and their representatives being involved in the care planning process. Risk assessments are detailed and provide care workers with information regarding the best ways to keep people safe. Care documentation is routinely reviewed with people to ensure they are receiving the right level of care and support.

People are supported to do the things that matter to them. Examples of this include accessing their local community for leisure purposes or being supported to arrange and attend medical appointments. Support is available for people with medication needs. There is a medication policy and care workers receive medication training. Details regarding people's medication regimes are captured in their personal plans. Any medication administered is recorded on medication administration recording charts (MAR). We examined several MAR charts and found they were filled in correctly which suggests people receive their medication as prescribed. We saw care workers complete daily recordings which detail care and support provided.

People have good relationships with care workers. We saw positive interactions between care workers and people during our inspection. Care workers engage with people in a friendly manner. Care workers are familiar with people's needs and routines and understand the level of care and support people require. People we spoke to provided complimentary feedback regarding care workers. One person said, *"They are lovely". The service is excellent*". Another person told us, *"The carers are perfect. I get on with all of them"*.

There are infection control measures in place. Care workers receive relevant training and there is an infection control policy. We found the Infection control policy requires some minor adjustments so it reflects current guidance in relation to Covid-19. Care workers told us they have access to a plentiful supply of personal protective equipment (PPE).



## Leadership and Management

Care workers are happy working for the service and feel supported by the manager. Care workers we spoke to provided positive feedback regarding the manager; one said, *“The manager is lovely, I can’t fault her”*. Another care worker told us, *“The manager is brilliant, I can go to her for anything, she’s very supportive”*. Improvements have been made to care worker supervision procedures. Care workers receive supervision every three months which provides the opportunity to have one to one discussions with their line manager regarding their well-being and professional development. Annual appraisals are overdue, however, the manager assured us they would be completed as soon as possible.

The service provides training and professional development opportunities to ensure care workers are knowledgeable in their roles and responsibilities. We saw evidence care workers complete a structured induction and get the opportunity to shadow experienced members of the team when they commence employment. An ongoing programme of core and specialist training is provided which is relevant to the needs of people. We looked at records relating to training and found the service is mostly compliant with its training requirements. Care workers told us the standard of training provided was good and it helped equip them with the skills needed for working in the care sector.

There is a thorough recruitment process which ensures care workers are suitable to work with vulnerable people. The service completes all the required pre-employment checks. Personnel files we viewed contain information such as up to date Disclosure and Barring Service checks, references from previous employers, identification, and employment history checks. All staff working at the service have a contract setting out their working terms and conditions.

Governance and quality assurance measures require strengthening. Quality of care reviews have been conducted, however, some of the reports we viewed do not contain all of the required information. We discussed this with the RI who assured us improvements would be made. Every three months the RI is required to meet with people and staff to gather feedback on the service. We did not see sufficient evidence of these meetings. We explained this was an area for improvement which we will review at our next inspection. We examined a cross section of the services policies and procedures and found some required minor adjustments so they reflect the most up to date statutory and best practice guidance.

### 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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73	The provider is not compliant with regulation 73(3). This is because we saw little evidence to suggest Regulation 73 Visits are being conducted every three months as required.	New
36	The provider is not compliant with regulation 36(2)(c). This is because staff members have not received the required levels of supervision and appraisal.	Achieved
71	The provider is not compliant with regulation 71(1). This is because the provider has failed to inform the regulator of a change in the management structure of the service	Achieved

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