



Inspection Report on

Prestige Care Pembs Ltd

**73 Queen Street
Pembroke Dock
SA72 6JE**

Date Inspection Completed

20/07/2023

Welsh Government © Crown copyright 2023.

You may use and re-use the information featured in this publication (not including logos) free of charge in any format or medium, under the terms of the Open Government License. You can view the Open Government License, on the National Archives website or you can write to the Information Policy Team, The National Archives, Kew, London TW9 4DU, or email: psi@nationalarchives.gsi.gov.uk You must reproduce our material accurately and not use it in a misleading context.

About Prestige Care Pembs Ltd

Type of care provided	Domiciliary Support Service
Registered Provider	Prestige Care Pembs Ltd
Registered places	0
Language of the service	English
Previous Care Inspectorate Wales inspection	30/08/2022
Does this service promote Welsh language and culture?	This service does not provide an 'Active Offer' of the Welsh language and does not demonstrate a significant effort to promoting the use of the Welsh language and culture.

Summary

Prestige Care Domiciliary Support Service supports people to live independently in their own homes within the area of Pembroke Dock. People receiving services, and family members, report that they are extremely happy with the service provided and find the care workers to be friendly and helpful. Staff know individuals well and are familiar to them, some having supported them for a number of years. Staff recruitment and vetting processes ensure care workers are safe and fit to work. Although a manager is in place, the Responsible Individual (RI) frequently assumes the role when the manager is absent. There is effective management oversight at the service with reporting mechanisms sufficiently robust to protect people. Formal staff supervision has not taken place regularly but informal support is available at all times and care staff told us they feel very well supported in their roles. Quality assurance systems, which review and inform the development of the service, are routinely conducted on an informal basis but need to be formalised in line with Regulations.

Well-being

People are strongly encouraged to make everyday choices. Staff support individuals to take an active part in their lives such as cooking, cleaning, shopping, and maintaining living arrangements whenever possible. Risk assessments assist individuals with positive risk taking. Care staff are familiar to people, with several staff having known some service users for a number of years. There are examples of individuals who have made significant improvements to their lives since receiving services from the agency. People told us they are very happy receiving services from Prestige Care Domiciliary Support Services.

People are supported to access healthcare services as or when needed. Individuals are encouraged to be active and keep themselves healthy. The agency works in collaboration with social and healthcare professionals to support individuals receiving services. Appropriate referrals are made when a change in a person's health is identified. Staff are knowledgeable about individual's needs.

People are safeguarded from harm. Incidences which have affected individuals' safety are reported to the relevant agencies in accordance with protocols. Accidents and incidents are monitored. Staff receive safeguarding training which outlines how to report events. Discussions with professionals to support the best interests of individuals take place and people can access independent advocacy when needed or wished for.

Care and Support

Emphasis is placed on ensuring people are treated with dignity and respect. People's personal plans set out how they want to be supported. The plans are person centred and include their likes and preferences. Personal plans are routinely reviewed and people and family members are involved in the process whenever possible. Care workers we spoke with confirmed personal plans and risk assessments give them enough detail to undertake their role appropriately and are an accurate reflection of the person they are supporting. Relatives of people receiving a service feel staff can support them or their relative in the way in which they require.

People are supported with positive risk taking to promote their independence and are encouraged to make everyday choices. Risk assessments are in place to support people to maintain their daily living needs. People have a variety of ways to express their views and opinions. Staff know individuals well. There are knowledgeable and meaningful interactions between staff and service users .

People are protected from potential harm, abuse or neglect as far as is possible. Care workers are checked robustly prior to starting work at the agency. Risk assessments and personal plans are accurate and reviewed in a timely fashion. Training records showed most staff have undergone mandatory training and the RI told us that training relevant to the needs of individual service users is provided if requested or required. Care workers have carried out training in safeguarding vulnerable adults and are able to describe the actions they would take if they suspected any harm or neglect to the people they support. Medication management systems are in place and care workers receive training in medication management.

Environment

Leadership and Management

People are supported by a well-trained team of care staff who are recruited safely. Personnel files show that care workers have the required recruitment documentation in place, including up-to-date Disclosure and Barring Service checks, proof of identity and pre-employment work history. Care staff start work once pre-employment checks are completed. New care staff complete an induction programme and a period of shadowing with a more experienced care worker. Care staff are registered with the workforce regulator, Social Care Wales. Training records show care staff have up to date training in the majority of core areas of care. Care workers told us they feel well trained and are able to make requests for additional training.

Care staff feel supported in their roles. They told us they feel they can approach their managers and senior staff at any time. Care staff have access to regular informal support but regular formal supervision and yearly appraisals to reflect on their performance, identify support they might require, and discuss any issues are not currently taking place consistently. The RI fully recognises this and stated an intention to rectify this imminently. The service has sufficient staff to work for the people it supports and staff recruitment is a continuous process.

The RI has a very thorough knowledge and oversight of the operation and running of the service and frequently provides care and support to people. However, governance, auditing, and quality assurance arrangements which support the running of the service need to be evidenced in order to demonstrate that the service is able to self-evaluate and identify where improvements are required. At present the RI does not undertake the required six-monthly quality of care reviews. The service does gather the views of people who use the service and these demonstrate that people and their relatives are extremely happy with the care and support provided by the service. The service has procedures to deal with complaints and we saw a large number of written compliments had been received. The service is open and transparent, identifying and acting to resolve issues as they occur.

Information for people to understand the service is available. The Statement of Purpose, which details what the service is and how it is provided reflects the service. Policies and procedures, such as for complaints, infection control, medication, and safeguarding, are in place. They give guidance to care staff, for example telling them what to do if they thought someone was at risk of harm. The majority of these have not been recently reviewed and the RI stated an intention to address this.

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. 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
------------	---------	--------

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

Was this report helpful?

We want to hear your views and experiences of reading our inspection reports. This will help us understand whether our reports provide clear and valuable information to you.

To share your views on our reports please visit the following link to complete a short survey:

- [Inspection report survey](#)

If you wish to provide general feedback about a service, please visit our [Feedback surveys page](#).

Date Published 16/10/2023