



Inspection Report on

All Care (South Wales) Ltd

**All Care (s Wales) Ltd
228 Holton Road
Barry
CF63 4HS**

Date Inspection Completed

23 February 2022

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About All Care (South Wales) Ltd

Type of care provided	Domiciliary Support Service
Registered Provider	All Care (South Wales) Ltd
Registered places	0
Language of the service	English
Previous Care Inspectorate Wales inspection	This is the first inspection under the Regulation and Inspection of Social Care (Wales) Act 2016
Does this service provide the Welsh Language active offer?	Working Towards. 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

The Covid-19 pandemic has impacted the service in relation to staffing and sickness. At times managers have had to prioritise supporting and caring for people in the community. This means that some recording and paperwork responsibilities have been effected. People's personal plans are detailed and person centred. Some have been reviewed in depth and with the individual, however most have not been reviewed for some time. People have very good relationships with their consistent carers and are happy with the care and support they receive. Care staff are happy in their roles however, they do not receive regular training nor competencies. We saw that supervisions have not been completed in line with regulation and some care staff feel they require refresher training. The service has tried to be proactive and innovative within their approach during the Covid-19 pandemic. We saw different ways in which the Responsible Individual (RI) has continued to reach out and support people in the community and care staff.

Well-being

People and their families are very happy with the care and support they receive. People have a regular opportunity to speak with care staff and with the managers. People like their consistent care staff team and describe them as “*professional*”, “*brilliant*” and “*thoughtful*”. Detailed review documents ensure people have a chance to share their views and make any changes to their care. We saw that people and their loved ones are involved in these reviews. However, these are not completed in a timely manner and as required.

People are supported to be independent. We saw that personal plans are extremely detailed and person centred. The plans clearly identify what the individual can do and what they need support with. Relatives told us the service are very accommodating and work with them as a family to meet the person’s needs. People receive support when expected and are made aware of any delays. The service has ensured and prioritised providing care and support during the Covid-19 pandemic.

People told us they felt happy and safe in their home and with their carers. The RI gains peoples feedback directly and via feedback surveys. Social events are held to provide an open space where people and their families can liaise with the service. Policies are detailed however they could be improved by including safeguarding contact details. Risks to people are identified and documented, although some of these documents lack in detail. Care staff know how to raise a concern with their manager and external agencies. Regular training and/or competencies for care staff would ensure that all care staff are competent within this area. Recruitment checks are in place and in line with regulation. However, several disclosure and barring service (DBS) checks had expired. The service took action to address this following the inspection.

Care and Development

Personal plans include detailed and person centred information. An 'all about me' document helps care staff to gain an insight into the person's life. Plans and assessments regarding people's medication are in place. This level of detail could be reflected in other important documents such as the 'Moving and Handling' assessment. Care staff provide regular feedback notes following their visits to the person. People have a contract with the care service and terms and conditions. These explain to the person what to expect from the service.

There are excellent review documents in place and these involve the person. However, we could not see that every person had had this opportunity. Care staff and supervisors visit and speak to people on a regular basis and this is recorded. Although full reviews of plans are not completed every three months as required. People told us they have not been recently involved in a review of their care plan. Care staff told us that care plans are not reviewed on a regular basis. We expect the provider to take action to address this and we will follow this up at the next inspection.

People told us they are very happy with their care and praised their consistent care staff team. One person said "*they are a dream*" and another said "*we are absolutely delighted with them*". People have access to office phone numbers to raise any concerns and feel confident speaking with care staff and the office. Care staff have a good understanding in how to raise a concern with managers or external agencies. Care staff told us that any updates to policy or guidance is shared with them. We noted that several care staff disclosure and barring service (DBS), checks had expired. The provider took action to address this and explained this task had not been appropriately reassigned following the member of staff responsible for this leaving.

Communication methods with care staff had to be adapted during the Covid-19 pandemic. We saw the service took innovative approaches using different methods such as podcasts and FaceTime. These ensured care staff were up to date with any changes. Social events and engagement meetings are facilitated to maintain contact with people, their families and staff. One person told us they felt confident raising any issues and said that care staff are "*more like family than strangers*" to them. We saw feedback surveys to show that the majority of people are happy with their care and support.

Leadership and Management

The RI is involved within the community and works with different providers and local authorities. Throughout the Covid-19 pandemic the service has worked hard to ensure care staff and people are safe and receiving care when required. The service ensured that all

care staff had received handmade masks during times when there were personal protective equipment (PPE) shortages. Visors were also created using 3D printers to ensure staff and people were safe in the community.

The RI has completed a quality of care review which identifies ways in which the service could improve and what they have done well. This includes some evidence to show the RI has gained direct feedback from people and care staff. These documents could be strengthened by including direct feedback from people and an analysis of information such as accidents and medication errors. Policies and procedures are in place however, some of these could be improved by including key contact details such as the local Safeguarding team and the Ombudsman. The service can provide these documents in Welsh if required and have some Welsh speaking staff.

Managers are dedicated to ensuring that care staff are registered with Social Care Wales (SCW), complete their induction and understand their roles and responsibilities. We saw some specialist training is provided and that care staff had received recent infection control training. However, the service does not provide regular training to care staff. Some care staff have worked at the service for several years and have only received full training during their induction. Some care staff told us they felt they needed some refreshers regarding their training. We saw some training certificates such as moving and handling which state expired.

Every member of care staff we spoke to told us they are happy and get good support from their line managers. Managers have maintained oversight of the service and care staff during the Covid-19 pandemic as they have been actively supporting in the community. However, some paperwork and recording responsibilities have not been completed in line with regulation.

We saw no evidence to show that regular competencies for medication and moving and handling are completed. The majority of care staff have received an annual appraisal. However, they have not received their supervisions in line with regulation. We expect the provider to take action to address the training concerns and the support of staff. We will follow this up at the next inspection.

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
35	There was minimum evidence to show that care staff are fit, skilled and competent within their role Care staff did not have current DBS in place Supervisions and spot checks have not been regularly completed Training is not regular and competencies are not	New

	completed with care staff	
16	Reviews are not being completed three monthly	New

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