

# Inspection Report on

**Everycare Bridgend Ltd** 

Everycare Bridgend Ltd 61 Bridgend Road Aberkenfig Bridgend CF32 9BG

## **Date Inspection Completed**

06/03/2023



# **About Everycare Bridgend Ltd**

Type of care provided	Domiciliary Support Service
Registered Provider	Everycare Bridgend Ltd
Registered places	0
Language of the service	English
Previous Care Inspectorate Wales inspection	1 September 2022
Does this service provide the Welsh Language active offer?	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

An unannounced focused inspection took place to consider a Priority Action Notice issued at the last inspection. This relates to the theme of care and support around the frequency of reviewing personal plans. We did not consider the theme of leadership and management during this inspection. We found improvements have been made and personal plans are being reviewed at least every 3 months. More generally, people were happy overall with the service provided by Everycare.

#### Well-being

As this is a focused inspection, we have not explored this theme in full. We will consider those areas raised as a Priority Action Notice, as well as feedback from people.

People are supported to have control over their day-to-day lives. We saw evidence that people are generally happy with the care and support provided to them, supporting them to maintain their independence. We read that support from the service helps people's carers in their caring role and takes some pressure off them, and it can help people to carry on living independently in the community.

#### **Care and Support**

As this is a focused inspection, we have not explored this theme in full. We will consider those areas raised as a Priority Action Notice, as well as feedback from people.

Reviews of people's care and support is undertaken in a timely manner. The service has invested in a dedicated reviewing officer to ensure people's plans are reviewed at least every three months, and we saw significant efforts have been made to achieve this. This is an improvement acted upon following the previous inspection. We saw reviews more generally consider the extent to which people have achieved their outcomes, people's opinions and views about their support are sought, and they show how people or their representatives are involved in reviews of plans.

#### **Environment**

The quality of environment is not a theme we explore for domiciliary support services. However, it is noted the service has secure facilities for record keeping, and rooms available for meetings, private conversations, training, and supervision. People using the service and staff employed can have confidence their personal information is stored securely.

### **Leadership and Management**

As this is a focused inspection, we have not explored this theme. We will consider those areas raised as a Priority Action Notice, as well as feedback from people.

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	
16	Personal plans are not reviewed at least every three months.	Achieved	

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	
42	The service provider does not offer domiciliary care workers the choice of contractual employment where the conditions are met.	Reviewed	
58	Medication Administration Records are missing entries. The medication policy has not been reviewed nor updated to reflect current practice.	Reviewed	

#### **Date Published** 23/03/2023