



Inspection Report on

Cherish Cymru

**Cherish Cymru
2 Eastgate
Cowbridge
CF71 7DG**

Date Inspection Completed

27 and 28 October 2022

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About Cherish Cymru

Type of care provided	Domiciliary Support Service
Registered Provider	Cherish Cymru LTD
Language of the service	English
Previous Care Inspectorate Wales inspection	
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

Cherish Cymru provides care and support to people in their own homes within Barry, Llantwit Major and Cowbridge areas. The service is reliable and people like their care workers who are described as “*Brilliant.*” Care plans are detailed and people receive the care and support they need in a timely manner. The service is highly recommended by people and their families who confirm that there is good communication and the service listens. People “*Trust*” the provider and say “*We are so lucky to have Cherish,*” acknowledging the difference the service makes to people’s lives.

The ethos and ethics of the service are strong, with people and staff recognising the quality of service the provider delivers. A Responsible Individual (RI) who is also the manager, has very good oversight of the service and care delivery. The management team ensure staff are recruited safely and are suitably trained and supervised. Some improvement is required in keeping policies up to date and ensuring medication records are fully completed, but there is no impact on people and the provider is addressing this.

Well-being

People know and understand what care and support is available and how this will help them to achieve their well-being. Information is available about the service. People can speak for themselves or have help from social workers and family members when making decisions about their care. Care plans are in place and developed as people identify what is important to them, or when their needs change. These are reviewed regularly and people can comment on the care and service they receive, and can be confident that any issues raised will be listened to. People have copies of their care plans and records are available in people's own homes. Some people like a paper copy of the rota so they know who is going to be carrying out their care and support, and this is provided. People are complimentary about the communication and know that if they need to speak to someone in the service about their care, they will be able to. Care workers are thoughtful and often give good suggestions about what would help someone or their family, and this is appreciated. People confirm that care workers do all that they are needed to do to help achieve the identified outcomes.

The service provider ensures that people are treated with dignity and respect. The management team set the example and standard of care and support. Care workers are trained and understand their role. People and their families confirm that care is delivered in a dignified way and care workers show respect at all times. We are told how care workers encourage independence, and people like this. People describe how they are embarrassed by the level of personal care they need at times, but confirm that care workers reassure them and put them at their ease, while dealing with the matter in hand. People's wishes are respected. Visits are carried out at the agreed times and people are never left without care.

Systems are in place to protect people from abuse. All staff are recruited safely with checks carried out to make sure they are fit to work with vulnerable people. Training around the 'Safeguarding' of vulnerable adults is provided, and staff have core training around 'Food Hygiene', 'Medication,' 'Infection Control,' and 'Moving and Handling.' Staff are supervised and competencies checked. Gaps in medication recording needs to be addressed but medication is given safely. Policies need to include up to date information, but care workers demonstrate their knowledge and understanding of care and support. Risk assessments are in place on personal plans to show how these are considered, and how the service mitigates risks as far as possible. The service supports people to access the right healthcare and makes referrals to the right services to get appropriate equipment to help them stay as independence as possible.

Care and Support

People appreciate the 'Very good' service they receive from Cherish Cymru. People or their representatives tell us how the service "*Doesn't just give the bare minimum*" but "*Goes above and beyond,*" to give a personalised service. People feel safe and relaxed when receiving care as the care workers support and encourage with kindness. People tell us how compassionate and thoughtful the care workers are. One person told us how care workers stayed with them while they waited for an ambulance, and another person explained the difference a care worker made when they arranged for a trip to the seaside, remembering to take some binoculars, so they could do something they really enjoyed. There is consistency of care workers so people mostly know who is going to be visiting them, and if there are changes, this is communicated as far as possible in advance. People receive their visits in a timely manner, and care workers always turn up. The service is ensuring positive outcomes for people but also families. One family member told us that they trust the service so much they have been able to take a holiday and really relax knowing their loved one had the support they needed.

Assessments are carried out so the service knows it can provide the care as required, considering any risks involved. Local authority care plans are also considered. Personal plans are developed that include person-centred care plans, giving step by step instructions to staff on the best way to help a person. People's likes and dislikes are reflected in the plans. People are regularly consulted about the service they receive and are asked if the current care plan is working for them. The service addresses any changes in need and updates plans as required. Daily records are completed to show the care provided. When people need additional monitoring, for example, with recording how much they are eating as they are at risk of losing weight, these records are complete. Medication administration records are not completed fully, with some gaps in information. This is an area for improvement, and we expect the service provider to address this. We will test this at the next inspection.

Health professionals such as doctors and district nurses are involved in people's care and when a person needs support to contact them, they are provided with this. The service follows the guidance provided by specialist health professionals such as the Speech and Language team who advise on supporting people to eat if they need a specialist diet. Care workers demonstrate competence in managing people's care needs. We are also told by people that care workers do everything they need them to, with details such as making sure skin creams are applied, cleaning and tidying up thoroughly, and supporting to go into the community when this has been identified as part of the care plan.

Leadership and Management

A Responsible Individual (RI) has oversight of the service and carries out their duty with due diligence. The provider has a 'Statement of Purpose' which outlines what people can expect from the service but the regulator needs to be kept informed of changes. Policies are in place but these are not up to date. We expect the provider to take action to address this and we will follow this up at the next inspection. The RI consults people and staff about the service and completes required reports. The RI is continually considering how the service can improve and makes every effort to personalise the service, with many people reporting that they have been listened to.

The RI is also the manager and has responsibility for the day-to-day smooth running of the service. They are respected by the staff team who describe them as "*Fair*," many acknowledging, "*They really look after their staff.*" People who use the service tell us the manager is approachable, with one person saying, "*They are brilliant, you can pick up the phone to them at anytime.*" Lines of communication are good, and even people who become anxious about their visit times tell us that they can always get in touch with manager. A social worker has recorded how proactive the service is, managing the well-being of individuals by working in partnership, and making sure people feel heard.

Personnel files are complete and contain all relevant information, with improvements made to ensure checks on staff through the 'Disclosure and Barring System' are up to date, evidencing that staff are suitable to work with vulnerable adults. Supervision and appraisal meetings take place, and while these have been conducted over the telephone at times due to the recent pandemic, they evidence that staff have opportunities to discuss aspects of their role and any professional development needs. Induction, shadowing and training opportunities take place. During the pandemic, face-to-face training has been difficult to access, so alternatives have been provided. More experienced members of staff support other to understand the high standards of care expected. The manager is aware that some specialist training, such as 'Catheter Care', is required and is arranging this. Care workers demonstrate good care and understanding, including how to report concerns around the safeguarding of an individual. One family member told us that she had learnt so much from the care team, as she herself had been inexperienced in providing care for her loved one.

Care workers like the flexibility of working within a zero hour contract. While staff are asked if they are happy with their hours of work, this is not always formally recorded; the manager is going to ensure this is done. More formal recording of minutes of staff meetings also needs to be completed. Suitable offices offer opportunities for the staff team to meet in a central location and provides secure storage for confidential documents.

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
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12	The provider is not ensuring that policies and procedures are reviewed and kept up to date to reflect current legislation and detail of information required.	New
58	The provider is not ensuring that medication administration records are fully completed.	New
35	Staffing – The Regulated Services (Service Providers and Responsible Individuals) (Wales) Regulations 2017 – Part 10 Regulation 35(6): We found that the service did not ensure that there is a current DBS certificate for every staff member. Regulation 35 Schedule 1 Part 1 (1): Proof of identity of staff members has to be available.	Achieved

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