

Inspection Report on

Llesiant Delta Wellbeing CONNECT

Carmarthenshire County Council
3 Eastgate
Llanelli
SA15 3YF

Date Inspection Completed

10/02/2022



About Llesiant Delta Wellbeing CONNECT

| Type of care provided | Domiciliary Support Service |
|--|---|
| Registered Provider | Llesiant Delta Wellbeing |
| Registered places | 0 |
| Language of the service | English |
| Previous Care Inspectorate Wales inspection | This is a post registration inspection. |
| Does this service provide the Welsh Language active offer? | Yes. The service provides an 'Active Offer' of the Welsh language. It anticipates, identifies and meets the Welsh language and cultural needs of people who use, or may use, the service. |

Summary

A dedicated and enthusiastic manager and Responsible Individual (RI) lead this unique service. People, their relatives and care workers respect the manager and the value of the service to them. Whilst there is good oversight by the RI, consultation with care workers as part of her Regulation 73 visits needs to be strengthened.

People and their relatives speak positively about the time-limited care and support they receive through Llesiant Delta Wellbeing and the ongoing support and reassurance provided through CONNECT, the non-regulated part of the service. Care staff demonstrate a good knowledge of the needs of the people they support and an enthusiasm for working for Llesiant Delta Wellbeing. Additional details should be included around care plans, the involvement of people in their care planning and recording of care calls.

Well-being

People receive care and support that meets their needs. Staff are knowledgeable, caring and take pride in the care and support they provide. Personal plans provide some information about the person but additional details are required. People remain as healthy as possible as the service actively works alongside health and social care professionals.

People and/or their representatives contribute to decisions, which affect them; however, this needs to be better documented. The RI involves people in quality assurance processes including her Regulation 73 responsibilities. Governance practices focus on developing the service by using information from surveys and audits. Care staff have access to policies and procedures, which are reviewed regularly. The manager and RI have a clear vision and provide good leadership and management of the service.

People are supported for a time-limited period that has a positive impact on them and their family; "it has really helped me in a time when I was at my lowest". The service provides an 'Active Offer' of the Welsh language. Many of the staff are Welsh speakers, which means people are able to communicate in Welsh or English as they choose. Recruitment and training ensures people get the right care and support, from skilled and knowledgeable workers.

Staff protect people from abuse and neglect and are fully aware of their responsibilities to raise concerns. People know how to make a complaint if needed and have confidence in the manager and the service.

Care and Support

People receive a time-limited service through Llesiant Delta Wellbeing. Initial assessments are undertaken and care plans produced from these. The plans provide an overview of the needs of the person; however, further information is required on how the care and support is to be delivered by care workers. This will ensure continuity of care and support for the individual whilst they are receiving the service. Risk assessments are in place and reviewed during the period of the service. People are involved in the planning of their care; "I met with a social worker and a representative from Delta Wellbeing before being discharged from hospital to plan the help I needed". Details of these discussions should be documented in the person's care records. There also needs to be evidence to confirm the person has received their planned care and support after each call. The manager and RI have taken on board our comments and are working to address the points raised.

People's health and care needs are supported. Whilst the service is time limited, care workers have a good understanding of the needs of individuals and have built up good relationships with them. Care workers gave an example where they were concerned about an individual's declining health. Support was sought from health services where an underlying medical condition was identified. In addition, Llesiant Delta Wellbeing is able to utilise the Intermediate Care MDT, an on line service with access to a range of health and social care professionals for advice, guidance and direction. The people and their relatives we spoke to are very clear on the value of the service provided and the benefit to them including; "the services are excellent, they provided my husband with support when I came out of hospital", "the care staff are amazing, it really took the pressure off me". "They supported me when I first came out of hospital – the carers are very good" and "it was such a relief to know mum and dad were being cared for. "It really is a weight off my mind and added security knowing the CONNECT service was in place after the initial package of care had ended".

People feel safe and protected from harm. Care workers we spoke to understand their role in protecting people and are aware of how to report any concerns. Care workers are also aware of their responsibilities to protect people from COVID-19. They are clear on the correct use of personal protective equipment (PPE) and infection, prevention and control measures. Policies and procedures, training and support are in place to ensure care staff maintain people's safety and well-being. One person told us "I feel very safe with the carers; they wear masks, gloves and aprons. They are very professional".

People and relatives told us they would have no hesitation in reporting any concerns they might have to care workers or "the office" and feel their concerns would be listened to and dealt with.

Leadership and Management

A dedicated manager who is well supported by the RI leads the service. The manager demonstrates a very good knowledge of the people who use the service and the care workers she employs. A comprehensive I.T monitoring system supports their day-to-day operational management responsibilities. The RI is readily available to support the manager and together they make a strong leadership team to drive the vision of the service. The manager has undertaken a detailed induction and receives regular documented supervision from the RI.

The RI seeks feedback from people and relatives who are or have used the Llesiant Delta Wellbeing service. However, feedback from staff should be improved to better inform the quarterly Regulation 73 visits and the six monthly Quality of Care reports. Staff spoken to are unclear who the RI is for the service. Plans are in progress to address this shortfall.

As Llesiant Delta Wellbeing is the regulated part of the service, the RI and manager need to be mindful of the distinction between this service and the unregulated CONNECT service.

A staff team that are motivated, valued and well-trained support people. All care workers we spoke to and those who have completed an inspection questionnaire tell us they are very well supported by the manager and the organisation. They say; "It's the most welcoming place I have ever worked at", I genuinely enjoy coming into work", "I feel Delta is a great service to be part of" and "(manager) is available around the clock to help us with anything we need".

Staff are appointed following a rigorous recruitment process and all records looked at contain the necessary recruitment documentation. Staff receive a range of mandatory and specific training to support them in their role. Training records corroborate this. In addition, training and support is provided for staff who are lone working, sometimes in isolated locations and possibly late at night. Feedback from some staff indicates this type of working scenario do raise anxieties and should be explored further by the manager and RI.

There are induction, probation and supervision measures in place. Care workers told us they have regular supervision and support and in the main, these are reflected in the staff records. The manager is ensuring care staff receive supervision every three months as is required under the Regulations by addressing the reorganisation of probation meetings. A care worker told us about their induction to the service; "My induction was *intensive*, I had lots of training and it lasted 8 weeks. I did all the mandatory training and 4 x 4 training to know how to operate the car. I felt ready and eager to get started after the 8 weeks".

| 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 | N/A | |

| inspection | |
|------------|--|

Date Published 18/03/2022