



## Inspection Report on

**Complete Care Amegreen - Cwm Taf Morgannwg**

**Unit 2 (Ground Floor)  
Waterton Industrial Estate  
Bridgend  
CF31 3PH**

## **Date Inspection Completed**

**23 March 2022**

23/03/2022

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## About Complete Care Amegreen - Cwm Taf Morgannwg

Type of care provided	Domiciliary Support Service
Registered Provider	Complete Care Holdings Limited
Registered places	0
Language of the service	English
Previous Care Inspectorate Wales inspection	This is the first inspection post registration under Regulation and Inspection of Social Care (Wales) Act 2016.
Does this service provide the Welsh Language active offer?	No. This is a service that does not provide an 'Active Offer' of the Welsh language. It does not anticipate, identify or meet the Welsh language needs of people /children who use, or intend to use their service.

### Summary

Complete Care Amegreen is a domiciliary support service. This report is for the Cwm Taff and North Wales areas, due to both supporting 20 or less people. The responsible individual (RI) is Tara Penn. There is a manager who covers both areas and is registered with Social Care Wales.

Overall people receive a good service from Complete Care Amegreen with a team of care workers who are dedicated to their work. Feedback from staff, people using the service and other professionals involved is positive. The management team are visible in the running of the service and keen to ensure that care provision is of the highest standard. There are systems in place to ensure there is oversight of the quality of care and support delivered. However, improvements are needed to ensure the service fully meets all regulatory requirements in relation to medication, quality of care reports, staff supervision, training and policies and procedures.

## Well-being

There are systems in place to safeguard people from harm. The service has appropriate infection control measures in place and care workers have access to relevant personal protective equipment (PPE) to reduce the risk of infection. The recruitment process is robust and ensures care workers suitability for the role. They receive training to meet the needs of the people they support. However, not all are compliant with the service's core training requirements and improvements are required in this area.

People have control over their day-to-day lives. People access activities that are individually tailored, promote social interaction and community presence. The service provided is flexible and people are able to choose when they receive support. Care workers and people using the service know each other well. Care workers are familiar with people's needs, wants and routines and know how best to support people to achieve their personal outcomes.

The service promotes people's physical and mental well-being. Personal plans and risk assessments generally have key information within and are person centred. Care documentation is individualised, detailed and informative. Reviews are undertaken regularly. People remain as healthy as they can be due to timely referrals and good communication with external professionals. Care staff promote choice and have a very good knowledge of the people they support and are therefore able to notice any changes quickly and respond promptly.

People have positive relationships with care staff who treat them with kindness and respect. Feedback from people and their family/relatives indicates they have good relationships with care staff. People are able to make choices about how they spend their day. Care staff appear confident and enthusiastic in their roles and know people's needs well.

## Care and Support

The service provides a good standard of person-centred care and support. This means that people receive a service that is specifically designed to meet their needs. People's personal plans set out their care and support needs and provide care workers with clear instructions. Risk assessments highlight people's vulnerabilities and contain information on how to keep people safe. We examined several people's personal plans and found they are developed in conjunction with the person and their representatives and are reviewed periodically to ensure information is up to date. Care workers told us personal plans are easy to follow and contain all the information they need to support the person effectively. Care workers have access to people's personal plans via the Care Planner System. This is an online system the service uses to record people's care and support needs. It is a live system, which means any amendments to people's care documentation is communicated instantly to care workers. The system also allows care workers to document care and support they have provided to people on each call they attend.

Systems for medicines management are in place however they require strengthening. Not all people who receive support have a medication administration record (MAR) chart in place. We saw one MAR chart that had not been fully completed. The manager and clinical lead are currently addressing concerns around medication management and all staff will receive up to date training and their competencies will be assessed. We expect the provider to take action to address this and we will follow this up at the next inspection.

The service strives to provide continuity of care to people they support. They are currently undergoing a recruitment drive to recruit new staff, particularly in the North Wales area. Overall, care staff know the people they support well and are able to anticipate their needs and wants. New staff have the time they need to meet people and read care documentation. Care staff are supportive of each other and complimentary of the support peers and members of the management team provide.

### Cwm Taf

People or their representatives receiving support told us:

*"I am happy with the carers"*

*"We are pretty much like family"*

*"They are knowledgeable and experienced"*

*"Carers are polite and respectful and I have a consistent team"*

Staff were happy in their roles and felt valued by management. We were told:

*"All care plans risk assessment are up-to-date and easy to follow"*

*"Gives 100% to their clients from their Staff"*

## **North Wales**

People or their representatives receiving support told us:

*“I am very happy with the care I receive”*

*“I find the carers to be proficient and professional”*

*“they respect my dignity”*

*“The agency has given information fully on aspects of their approach and protocols and my care plan”*

*“The agency has almost always provided continuity of care with a team of staff and obviously strives to do so at all times, but Covid positive staff cause difficulties in this regard, as does the current shortage of care staff”*

Staff were happy in their roles and felt valued by management. We were told:

*“I love being part of the company”*

*“I like how clinical the job is and how well the company trains you for the role”.*

## **Environment**

We do not consider this domain as part of a domiciliary support inspection.

## Leadership and Management

The human resources (HR) department confirm that the staff recruitment process meets all regulatory requirements. New care staff receive an induction in line with Social Care Wales's requirements. Improvements are required to ensure care workers are compliant with the service's core training requirements. Care workers speak positively about their training and say they feel competent and comfortable in their roles. However, records show not all care workers are up to date with their core training and require refresher training in some areas. We discussed this with the management who agreed with our findings and told us that training has been booked for the coming weeks. Individual supervision gives care workers the opportunity to reflect on their performance and discuss any issues they may have. We looked at records relating to supervision and found care workers are not always receiving the required amount of formal support. These are areas for improvement, and we would expect the service to address these matters by the next time we inspect.

Written information documented in the Statement of Purpose and information leaflet outlines the services aims, values and service provision. They are available for people who use the service which contains practical information including how to make a complaint and contact telephone numbers for agencies such as Care Inspectorate Wales and Social Care Wales.

Auditing systems in place but some require some improvement. Oversight of medication is required to ensure safe practice is followed. Care workers feel confident in who they should approach depending on the nature of their query or concern. Internal systems and processes are in place to ensure the service delivers its aims and objectives effectively. However, policies and procedures that help support the delivery of the service must be reviewed to ensure they contain the relevant legislation and local guidance. RI quarterly visits are undertaken but the 6 monthly quality of care report was not available. These are areas for improvement, and we would expect the service to address these matters by the next time we inspect.

### Summary of Non-Compliance

Status	What each means
<b>New</b>	This non-compliance was identified at this inspection.
<b>Reviewed</b>	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.
<b>Not Achieved</b>	Compliance was tested at this inspection and was not achieved.
<b>Achieved</b>	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
80	No regulation 80 report completed	New
36	The service provider has not ensured that any person working at the service receives appropriate training to	New



	undertake their role.	
12	Policies and Procedure are not up-to-date and therefore do not effectively guide staff.	New
58	Improvements in the recording of controlled drugs is required and no gaps are to be on the MAR charts	New

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