



Inspection Report on

Lenpat Limited

**14 Museum Place
Cardiff
CF10 3BH**

Date Inspection Completed

30/11/2022

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About Lenpat Limited

Type of care provided	Domiciliary Support Service
Registered Provider	Lenpat Limited
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?	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

Lenpat Limited is a domiciliary support service for adults, aged 18 and over. The service offers care and support to people in their own homes in the Cardiff & Vale areas. The organisation is in its infancy. The service was registered during the Covid-19 pandemic.

A small and consistent staff team deliver the care. We received some mixed feedback from people about how happy they are with the service. Some told us they were happy and were complimentary about individual care workers, whilst others felt the service could improve in relation to call times. Reviews of plans do not take place at the required intervals, and changes in people's outcomes are not comprehensively documented.

The responsible individual (RI) is not fully undertaking their role in overseeing the management of the service. They are not able to demonstrate a sufficient level of scrutiny or oversight of the service. This could lead to people using the service being placed at risk of harm. The service provider needs to make improvements to understand what is required of them by law. Care Inspectorate Wales (CIW) expect the service provider to take urgent action to address the regulatory breaches and these will be re-tested at the next inspection.

Well-being

People generally speak positively about care staff and most reported feeling safe and supported when they are with the carers. People know the responsible individual and the manager of the service well as they, also, provide some of the regular support people require. They are confident the service strives to support them as per their wishes. Care documentation is mostly completed correctly but improvements are required to ensure people's needs are fully captured and documents are reviewed. People told us formal reviews are not provided, but most are confident if any changes are required these would be addressed by the service provider.

Care is delivered with dignity and respect. People are offered choice and consulted about the day-to-day tasks that they need support with. Care workers are kind, and we are told that they make a difference to the well-being of people.

The safeguarding arrangements in place are not robust enough to ensure people are appropriately protected. This could impact on the safety and wellbeing of people. This is because not all issues of a safeguarding nature are reported to the appropriate safeguarding team or relevant authorities. Staff have told us that they have a good induction which includes training and some shadowing which will positively impact on the quality of direct care provided to people. However, safeguarding training had not been delivered to all care workers. The provider must ensure that referrals are made to the local safeguarding team when required and notifications are made to us (Care Inspectorate Wales) in line with regulatory requirements.

People are provided with information about the service. A 'Statement of Purpose' and 'Service User Guide' form part of the information the service gives to people, so they know what to expect from the provider, and we saw copies stored on people's care files in their homes. There are some policies and procedures in place to support staff to achieve the aims of the service and to support people; however, we found these needed to be embedded into practice. There is no clear cycle of quality assurance and review to be able to provide assurance that the service is supporting people appropriately and that their personal outcomes are being met.

Care and Support

There are inconsistencies with the quality of care people receive. Some people we spoke with told us they had problems with care workers not arriving at the planned times and are not always contacted to let them know if the care worker is going to be late for a visit.

People told us care workers treat them with dignity and respect. Care staff say they have positive relationships with the people they support. Care is delivered with respect, kindness and consideration by staff who understand the needs of the person. Staff continuity is good and enables people to have their care delivered in their preferred way. Daily records show that the appropriate number of care workers attend the call and they deliver the care required, including any prompts or provision of medication.

The provider meets with people before a package of care is started to capture important information about the person. They also carry out a risk assessment to consider how the service can be delivered safely. Personal plans are developed and are in place to guide staff how best to support the individual. Written reviews of personal plans do not take place at least every three months as required. This could be placing people's health and well-being at risk. There are no clear systems in place to ensure personal plans are regularly reviewed.

Improvements are required to ensure people are protected from abuse and harm. We noted that the service had failed to report at least one safeguarding matter to the Local Authority safeguarding team. The provider has also omitted to inform us of notifiable events. The RI is present at the service and engages well with staff and people who use the service, but oversight of the service operation on a day-to-day basis needs to be improved. Staff feel well supported and, mostly, competent to undertake their roles, but staff training needs to be recorded more robustly to make it clear what training is required and when. Staff recruitment is generally safe with pre-employment checks completed prior to employment, but the source of references should be checked. The provider must ensure that the workforce is able to register with Social Care Wales, (the workforce regulator), now that this is mandatory.

Leadership and Management

Lenpat Limited is a small service and benefits from an RI who is at the service daily and who also forms part of the care team. The RI and manager are company directors, and deliver care when there are staff shortages.

We identified some contradiction between information contained within the statement of purpose (SOP) regarding how care is provided. People need to be confident information contained within these documents are reflective of the service being provided. Information contained within the SOP about the management of the service, does not currently reflect what is provided to people. Although people have access to information about the service, this needs to be reflective of the support provided and the processes and policies and procedures in place. We have, therefore, issued a priority action notice for the service to be provided as outlined in the SOP. The provider must take immediate action to address this issue.

Improvements are needed to the oversight of the service. During the inspection, we found the provider was not keeping accurate records, as required. There was confusion over the number of people supported and number of staff delivering care. No quality of care systems are in place to monitor and develop the care delivered. Feedback from a Cardiff Local Authority visit undertaken in August 2022 had not been actioned. Clear and effective audit systems, which should identify and ensure the ongoing development and improvement of the service, are not in place. This has resulted in deficits in delivering care in line with the SOP. This could compromise the quality of care delivered and mislead people using the service or thinking about using the service, and other stakeholders.

People are supported by staff who feel valued and well supported.

Care staff we spoke with told us that they are happy working for Lenpat Limited and feel equipped to undertake their roles. We examined a selection of staff personnel files and found that recruitment is appropriate. Pre-employment checks including DBS certificates and references are applied for prior to employment commencing. We saw an occasion where a reference from the last employer had not been received. We saw no evidence that care workers are registered with the workforce regulator. There is no clear audit system for staff training, spot checks, competencies, supervision, and annual appraisals.

People do not receive support from care workers who have received sufficient training and supervision for their role. Supervision is important as it is an opportunity to discuss practice issue and needs and is recorded. Mandatory training relevant to the care worker role is available, but staff training is not sufficiently monitored. Most staff have not attended core training, including safeguarding, medication and first aid.

Safeguarding of people using the service is not sufficient. Although safeguarding training is available, we saw most care workers are yet to complete this training. Issues have arisen which should have been shared with the safeguarding team. The matters had also not been

appropriately recorded as a verbal or formal complaint. The RI agreed to source safeguarding training during their CIW fit person interview. There is no evidence this has been done. The lack of safeguarding training is placing people's health and well-being at risk.

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
6	The service is not being delivered in line with the Statement of Purpose or organisations policies and procedures. The service provider has failed to demonstrate sufficient governance and oversight of the service to ensure that people are protected from harm. Systems relating to auditing; Quality of care review; Care plan review; staff development, training and support are lacking.	New

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 inspection	N/A

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