



Inspection Report on

Thistle Care (Cardiff)

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Cardiff
CF23 9AF**

Date Inspection Completed

30/07/2024

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About Thistle Care (Cardiff)

Type of care provided	Domiciliary Support Service
Registered Provider	Thistle Care Ltd
Language of the service	English
Previous Care Inspectorate Wales inspection	[27 June 2023]
Does this service promote Welsh language and culture?	This service is working towards providing an 'Active Offer' of the Welsh language and demonstrates a significant effort to promoting the use of the Welsh language and culture.

Summary

There is clear documentation in place to inform people about the services provided by Thistle Care. The service has gone through a period of organisational change, and the whole staff team are clear in their goals for the service. Care workers are happy and enjoy their job roles. They speak highly of the training they receive and the support they receive from management. Staff told us they are keen to continue to learn and develop their skills and career within the service.

People are supported to be as independent as possible, and they are supported to make some choices in their daily lives. People told us care workers are “Nice” and that they try their best.

The Responsible Individual (RI) has arrangements in place to ensure governance and oversight of the service.

Well-being

People undergo an initial assessment which is completed to ensure the service can fully meet their needs prior to the commencement of receiving support. This initial assessment sets out what care the person requires, and how to deliver this.

During the inspection we saw some evidence of people being offered choice. These choices included choices of meals and choices of what clothes to wear. This practice ensures people have control and a voice over their daily lives. People are invited to participate in reviews of their personal plans. Family members are also invited to participate if they wish. This provides people with the opportunity to discuss the care they receive and make any changes as needed. It is an opportunity to people using the service to feedback their thoughts and views to the service to ensure they continue to receive care in the way they are happy with and that continues to make their needs. People told us they are not always happy with the way they receive their care, and this impacts their wellbeing.

There are new staffing structures within the service which aim to strengthen and improve the care delivery. There are managers and senior care workers available for each area of operation and they oversee their areas of operation. This maintains the efficient running of the service.

The Service is working towards the Active Offer by supporting staff to access Welsh courses and promoting using simple Welsh greetings when possible.

There are robust safeguarding policies and procedures in place within the service. Policies reflect current legislation and set out what procedures should be followed by care workers if a safeguarding issue is identified. The investigation documentation reviewed during inspection was of a good quality, and set out clearly what lessons can be learnt to bring improvements to the service when needed.

Care and Support

There are risk assessments in place for each person using the service, and these are reviewed when required. The service refers to external agencies when required to promote the health and wellbeing of people using the service. Medication Administration Record (MAR) charts are in place to ensure the safe administration of medication. These MAR records are reviewed regularly which maintains people's safety, ensuring any medication errors are identified promptly and appropriate actions taken when needed. The service tries to obtain feedback from people in the form of surveys. This is to try and gauge feedback so the service can make any required changes and improvements.

Personal plans include people's preferred call times, and these are adhered to as much as possible. There is some social history recorded in people's personal plans, and limited personalised information is contained in some assessments. People told us care workers are "*Polite*" and "*Hard working*", however people also told us they are not always happy with the way they receive their care and support. People's personal plans are not detailed and do not contain sufficient personalised information about people receiving support. The plans set out only basic instructions of what is to be completed at each care call, and there is no specific detail provided about how to complete each task. Personal plans do not always reflect people's current situations, and information in other assessments is not reflected in people's personal plans. This is placing people's health and wellbeing at risk, and we have therefore issued a priority action notice. The provider must take immediate action to address this issue.

There are systems in place to maintain oversight of the daily care visits. These systems will be strengthened because there will be a dedicated person assigned to complete this task. This will ensure that there is a dedicated person to oversee this, as well as analyse trends of call times, meaning they are able to address issues as they arise. Senior care workers also review the quality of the notes recorded by care workers ensuring high standards of recording to promote high quality care delivery.

There are plentiful supplies of Personal Protective Equipment (PPE) available within the staff offices. Care workers attend when they need to collect more supplies. Care workers wear appropriate PPE when completing their work.

Leadership and Management

Since the last inspection there have been changes within the staff team at the service. The RI now acts as the registered manager and is involved in the day to day running of the service. The RI has good oversight and there are systems in place to ensure all aspects of the service operate smoothly. The RI completes their regulatory visits to people to obtain people's views of the service they receive, and also completes the required reports as set out in the regulations.

Care staff told us they feel supported and described managers as "*Lovely*" and "*Wonderful*". Care staff said they receive regular supervision sessions, and they are also able to discuss any issues with a manager as they arise. Care staff told us they find their training helpful to support them in their job role, and care staff feel listened to by management at the service. There are good levels of training compliance within the staff team. This includes the mandatory core training as well as additional more specialist training. There are plenty of staff available to meet the needs of the service, and travel time also is considered when planning and organising times of care calls. Most staff are registered with Social Care Wales, the work force regulator, and all staff have either completed, or working towards the completion of qualifications suitable to their role.

Recruitment checks are completed, and references sought for new employees. There is an induction programme in place for new staff to complete prior to starting to work independently.

There are systems in place to review any compliments or complaints received. This involves an analysis of the information provided to be able to identify any learning points that can improve the service. There are also systems to investigate any incidents or accidents that occur to ensure and again learning points taken on board. The Statement of Purpose, and Service User Guide are updated regularly to reflect operational changes within the service.

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
21	People's personal plans are simplistic, task focussed and do not contain sufficient personal information. There are no wellbeing goals within people's personal plans. There is only limited reference to people's likes and preferences. Task breakdowns within personal plans do not give detailed information to care workers as how to complete each task. People are not happy with the care and support they receive. Two out of five people spoken to raised issues around manual handling. Two out of five people raised unusual behaviour from care staff regarding food preparation. One person said they had raised issues with management which didn't result in a lasting change for their relative, and not they feel unable to raise further issues with the service provider. One person said they were unhappy with how they received their care and support but felt unable to share this with the	New

	service provider.	
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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.

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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