



Inspection Report on

I-Care Cwmbran

**1-3 Victoria House
Victoria Street
Cwmbran
NP44 3JS**

Date Inspection Completed

09/07/2024

Welsh Government © Crown copyright 2024.

You may use and re-use the information featured in this publication (not including logos) free of charge in any format or medium, under the terms of the Open Government License. You can view the Open Government License, on the National Archives website or you can write to the Information Policy Team, The National Archives, Kew, London TW9 4DU, or email: psi@nationalarchives.gsi.gov.uk
You must reproduce our material accurately and not use it in a misleading context.

About I-Care Cwmbran

Type of care provided	Domiciliary Support Service
Registered Provider	I-Care Dom Care Ltd
Registered places	0
Language of the service	English
Previous Care Inspectorate Wales inspection	26 th October 2022
Does this service promote Welsh language and culture?	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

I Care Cwmbran provides a domiciliary service to people in their own homes which covers Torfaen, Newport and Cwmbran. People are complimentary about the service they receive with regular carers who support them, and they have built up good relationships with. People are involved in decisions about their care and support. The manager of the agency is experienced in the role. They are supported by a team of care staff who are trained, dedicated and safely recruited. The responsible individual (RI) has good oversight of the service with systems in place which support the running of the agency. The RI regularly visits the service and seeks opinions of people who both receive and supply care and support.

Well-being

People have a voice and are treated with dignity and respect. People's care plans are person centred and set out how they prefer to be supported to meet their needs. People are engaged in compiling their care plans and reviewing them. Staff are familiar with people and their needs as the agency recognises and encourages consistency. People can access information they need about the service, and they know how to make a complaint. People's views and opinions about the service are regularly sought with information provided used to drive improvements. People's response when asked if they would recommend the service to a friend was 100% positive. One person said, *"staff are good as gold, it's a hard job"*. A relative told us, *"My mother is always treated with respect and has a great relationship with the carers who attend her call"*.

People receive a reliable service. We saw and heard evidence that people are satisfied with the service they receive which meets their needs and allows them to live independently. People receive visits within agreed timeframes. The service can be flexible to allow people to attend healthcare and social appointments. People can raise concerns about the service if they need to do so. People who use the service told us, *"The carers I receive are very helpful and I couldn't ask for a better service. I get regular carers who know my routine and it does make my calls go smoothly."* *"X wanted to thank staff for doing his shopping and supporting him so much". They've all been brilliant."*

People are safeguarded. Individual risk assessments support people to maintain their safety and independence. Staff are trained to perform their role and report concerns. The agency conducts regular spot checks on staff to ensure they carry out their roles effectively. We found robust recruitment practices are taking place during appointment of new staff. People told us they have regular staff visiting them who are respectful of their needs.

The provider can offer a service to people in Welsh but would have to plan how to facilitate a service if this is needed. The agency does employ Welsh speaking staff who work in this area. Information can be provided in the Welsh language if requested.

Care and Support

People's plans direct care staff to deliver care and support in a consistent way. People's personal plans are clearly written, include their preferences, risk assessments and overall contain the required information. People and their representatives are consulted on the care they receive. Personal plans are reviewed in a timely manner and when necessary identified changes result in personal plans and risk assessments being updated. We found for people displaying aggressive behaviours towards staff, greater direction could be included in their risk assessments to reflect measures already in place. This would promote a more consistent approach for junior and less experienced staff. Care staff can access all details of people's care plans and tasks required at the call via an app on their mobile phones which also allow for the recording of daily records and incidents. Staff want to provide a good standard of care and support, and this allows them to be responsive. One staff member said, *"I like having the app, being able to see what's done in calls or who I'm working with"*. A person receiving a service told us, *"The care workers are very professional, polite and compassionate"*. Staff describe themselves as *"competent and caring"*.

People have developed positive relationships with staff who support them. Staff are knowledgeable about people in their care. The service understands people's health conditions, the support they require and can identify changes in the usual presentation of people they support promptly. We saw examples of staff carrying out additional tasks to support individuals to meet their healthcare needs. Arrangements are in place for the safe management of medication within the service. Staff receive medication training to be able to support people according to their needs.

People are protected from harm and abuse. All care staff receive appropriate safeguarding training, with access to a staff handbook which gives detailed information on the service's policies and procedures to keep people safe. Care staff have a clear understanding of how to report matters of a safeguarding nature. People know all issues can be directed to the agency office and report they have confidence in staff to deal with matters. Infection prevention and control procedures are good. We saw staff are directed to wash their hands regularly and wear appropriate personal protective equipment (PPE) during visits.

Leadership and Management

Effective oversight of the service and supervision of management ensures a good quality service, focussed on meeting the needs of individuals and promoting their wellbeing. The agency uses an electronic management system which is monitored by a dedicated call monitoring team at the company's head office. The system provides an alert after 15 mins of a call going over the scheduled time at which time the team will alert the designated carer. If the carer fails to respond the team will then contact the agency office or on-call if it is out of hours. People told us staff leave calls once duties have been performed. A monthly review is held between the manager and RI to look at missed, late or clipped calls.

The RI conducts regular visits to the service and gathers feedback from people who receive and provide services. The most recent quality assurance survey evidenced how satisfied people are with the service they receive. We spoke with people and received responses which endorsed the opinion that the service meets people's current needs. Complaints are investigated and managed in line with the agency's protocols. Policies and procedures are updated on an annual basis or as needed. The Statement of Purpose (SoP) describes how the service will be provided. We found the service provision is reflective of information contained within the SoP.

Vetting processes are sufficiently robust to demonstrate staff's fitness to work with vulnerable adults. The agency carries out pre employment checks in the form of Disclosure and Barring (DBS) and seeking former employer references. The necessary forms of identification are retained for staff. All staff are registered with Social Care Wales the workforce regulator.

Staff are trained and developed to conduct their roles. Newly appointed staff complete a recognised induction programme and are expected to complete a recognised care qualification. Staff can update their skills and knowledge via a mixture of online and face to face training. Certain staff members have been trained to take on an additional manual handling training role. This means staff are routinely spot checked on their manual handling practices and receive refresher training. Staff have regular supervision. In addition to providing staff with an opportunity to discuss their individual training and practice issues, a review of employment contracts takes place. The manager has attended training to be able to support staff with their mental health. Staff told us they felt supported by management.

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 inspection	N/A
42	The sample of personnel files viewed. Showed staff contracts did not reflect the hours they worked.	Achieved

Was this report helpful?

We want to hear your views and experiences of reading our inspection reports. This will help us understand whether our reports provide clear and valuable information to you.

To share your views on our reports please visit the following link to complete a short survey:

- [Inspection report survey](#)

If you wish to provide general feedback about a service, please visit our [Feedback surveys page](#).

Date Published 31/07/2024