



Inspection Report on

Caring Companions Limited

**Caring Companions Ltd
Unit 31
Enterprise Centre Bryn Road
Bridgend
CF32 9BS**

Date Inspection Completed

15/08/2024

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About Caring Companions Limited

| | |
|---|---|
| Type of care provided | Domiciliary Support Service |
| Registered Provider | CARING COMPANIONS LIMITED |
| Registered places | 0 |
| Language of the service | English |
| Previous Care Inspectorate Wales inspection | 23 February 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

People receiving a service from Caring Companions receive care from staff who are happy in their roles and feel well supported. They receive regular one to one/individual supervision, attend team meetings, and have appropriate training. Staff have the skills and knowledge to carry out their roles effectively and the opportunity to raise any concerns. Appropriate and up to date policies ensure staff have the information and guidance they need.

People have accurate and up to date personal plans which detail their individual outcomes. People, and their families, are complimentary about the positive relationships they have with staff and are very happy with the service provided. Care staff arrive for calls promptly and provide support people need and in the way they want. There are medication management policies and procedures in place to support people to remain well.

There are quality assurance and monitoring processes in place, and the responsible individual (RI) along with the management team have good oversight of the service.

Well-being

People have choice about the care and support they receive. Staff develop clear and detailed plans with the individual and their representative, using appropriate assessment tools. People provide feedback during reviews and through satisfaction surveys, which contribute to the quality assurance of the service. People's language and communication needs are considered during pre-assessments. The service is currently working towards the Welsh language active offer. The service has some Welsh speaking service users, but currently no staff. There is a Welsh language policy in place and the service told us they would explore Welsh language training for staff if requested.

Staff document people's needs and risks to their physical, mental health and emotional well-being, in personalised risk assessments. The service is responsive to changes in people's care needs and reviews are carried out. Rotas are sent out in advance and staff told us they are informed of any changes. Staff arrive promptly for calls and carry out tasks on care plans as people like. Call times are logged both electronically and in daily diaries in people's homes. There are medication policies and procedures in place to ensure this is administered as prescribed and supports people to remain well.

Staff help protect people from potential harm or abuse. Staff receive safeguarding and whistleblowing training and have knowledge of the procedures to report any concerns they have. Up to date safeguarding and whistleblowing policies are in place to provide guidance and support to staff. There are also robust recruitment processes in place to ensure staff are fit to carry out their roles.

Care and Support

People and their families have positive relationships with staff who know them well. People told us communication is very good and they can contact the office at any time. We saw a service guide people are given and a statement of purpose, which are generally consistent with the service provided. Staff use a care monitoring application on their phones to access rotas, log calls and make daily notes. Times of calls and daily notes are also recorded in files at people's homes. Feedback from people and their families is very positive. One person described the staff as *'Excellent...marvellous...all lovely girls.'* Another said *'They are outstanding...It's the small things they do that matter...The carers are of a very very high standard.'* A relative said *'They have a laugh with him...they know him and his needs.'*

Care plans consider people's personal outcomes, as well as the practical care and support they require. These are reviewed regularly to ensure they remain accurate, and people or their families told us they were involved in these. The service has good communication with other professionals such as social workers and health care workers. People told us carers arrive when expected, support them with the things they want and need, and do not feel rushed.

There are measures in place for assisting people with their medication, if needed, which supports them to remain well. A medication policy is in place to provide guidance. Staff have medication training, and the management team check their competence through spot checks. Staff complete MAR (Medication Administration Records) which are monitored by the management team. We found no gaps in charts sampled or records of any incidents involving medication errors during our inspection.

The service aims to protect people from potential harm and abuse. Staff receive safeguarding training and there are policies in place informing them how to report abuse. Staff told us they feel confident they would know what to do if they were concerned about someone at risk of harm and could approach management with these issues.

There are infection control measures in place to reduce the risk of cross contamination. During our office visit, we saw there were good supplies of Personal Protective Equipment (PPE) such as masks, gloves, and hand sanitiser. People receiving care and support told us staff use this when in their homes. Staff receive training in this area and there is a policy and procedure in place, to ensure they know how to use PPE appropriately.

Leadership and Management

Staff are knowledgeable in their roles and responsibilities and feel well supported by the management team. Staff told us they have time to gain the knowledge and experience they need before visiting people on their own. There is an induction process in place, which includes training and shadowing with more experienced staff. They have regular supervision that includes one-to-one discussions with the management team regarding their wellbeing and professional development, 'spot checks', and regular team meetings. Staff receive training, which includes a mix of online e-learning and some face-to-face training to ensure they have the knowledge and skills to carry out their roles effectively and safely.

Staff told us they receive rotas via a care monitoring application and the office advises them of any changes. Management ensures they inform staff of everything they need to know to provide good daily care and offer channels to feedback any concerns or queries. Staff told us they feel happy and confident in their roles. One staff member said of the manager '*I get on well with management, they listen to any problems or concerns you have.*' One person using the service described the management as '*Excellent.*'

The service has a small core team of long-standing staff who work in small groups in each geographical area, which provides consistency for people. Recruitment is ongoing which has seen some turnover in recent months. Recruitment and vetting processes are in place and are robust to ensure staff have the experience, skills required, and are of good character. All staff have up to date Disclosure and Barring Service (DBS) checks and are registered or in the process of registering with Social Care Wales (SCW).

There are monitoring and auditing processes in place to maintain the quality of the service and ensure people receive a good standard of care and support. The management team carry out supervision, appraisal and spot checks with staff. People and relatives provide feedback on the service during visits and through satisfaction surveys, and told us they can call the office with any issues or queries. A log of complaints, incidents, and safeguarding events is kept at the service, although it was noted these were very few since our last inspection. A number of policies are in place to provide guidance to staff which are reviewed regularly. The RI completes six monthly quality reports to evaluate the service and support improvements, and engages with people who use 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 |
|------------|--|--------|
| 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.

Area(s) for Improvement

| Regulation | Summary | Status |
|------------|---|--------|
| N/A | No non-compliance of this type was identified at this | N/A |

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| | inspection | |
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