



Inspection Report on

Just ONE Recruitment and training Limited

**Just One Health And Social Care
7 – 9 The Mall,
Ambrose Lloyd Centre
Mold
CH7 1NP**

Date Inspection Completed

22/04/2024

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About Just ONE Recruitment and training Limited

Type of care provided	Domiciliary Support Service
Registered Provider	Just ONE Health and Social Care Limited
Registered places	0
Language of the service	English
Previous Care Inspectorate Wales inspection	8 February 2022
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 are happy with the care and support they receive from care workers. They are knowledgeable, respectful, caring and meet people's needs. The majority of people told us care staff are never late and calls are never missed. Support is provided in an un-hurried and dignified manner by a friendly staff team. There is good continuity of care, with people supported by small numbers of care staff. People's care documentation is detailed, giving staff appropriate instruction on how to support each person. Personal plan documentation is reviewed regularly.

People receive good support from a well-managed service. An enthusiastic staff team are recruited safely, supervised regularly, and trained to meet individuals' support needs. Managers undertake detailed audits of the service on a regular basis, quality assurance processes are in place and the views of those receiving a service are actively sought. The Responsible Individual (RI) has good oversight of the service provided.

Well-being

People told us they are treated well, with dignity and respect. They are happy with the support they receive. People said care staff are friendly and care workers told us they viewed people's personal plans before providing care and support. People's care and support documentation is of a high quality, detailed, reviewed regularly, and gives staff detailed instruction on how to support individuals. Care staff told us this documentation gives an accurate reflection of the individual and their needs. People are supported by small teams of staff who develop good, appropriate relationships with them. The service supports people to achieve their goals and outcomes. People have many opportunities to contribute to decisions about their life. This includes regular reviews of personal plans, house meetings and surveys about the service.

The service has good measures in place to ensure people receiving a service are protected from harm and takes safeguarding individuals seriously. Recruitment practices are robust and care staff are trained in areas such as safeguarding. There is a comprehensive range of policies and procedures in place for staff to follow. Care plan documentation mirror the requirements set out in accompanying documentation provided by health care professionals. Risk assessments are detailed and reviewed regularly.

Care and Support

The service provider considers a range of views and information about prospective clients. People are consulted regarding their care needs and preferences prior to the service commencing to ensure the service can meet their needs. Care staff we spoke with said they view personal plans, prior to the service commencing to ensure they are familiar with the requirements of the person. Pre-admission paperwork is detailed, and person centred. We saw personal plans are written with the individual, recorded in an easy-to-read format, and are kept under review. Personal plans are of a high standard, detailed, person centred, and goals and outcomes focused. People using the service confirmed they are consulted about what care and support they require and how they prefer to be supported. They told us the care and support is provided in their preferred way. We spoke with someone who told their support worker they would like to be employed by someone, Just One facilitated this by giving the person a role with them.

People are provided with good quality care and support which is tailored to the needs of the individual. Detailed personal care plans are in place and give comprehensive instruction to care staff on how to support people. They are reviewed in line with regulations and care staff told us they are made aware of any changes to people's personal plans. Care plans mirror information contained in the service's own pre-admission assessment documentation and information provided by professionals on how to support the individual. People told us they receive the care and support they require. We saw evidence of people living in the shared supported living properties engaged in a lot of different activities. People we spoke with told us staff discuss their support with them. One person told us: *"Staff listen to me and give me what support I want."* Another person said, *"Staff talk with me about the support I get...support workers know how to support me and support me appropriately."* Care workers we spoke with confirmed care plans are detailed and give them the information and instruction they needed to undertake their role. They also confirm care plans are updated with any changes to the care and support people may require and they are informed of any changes. We also saw risk assessments are detailed, comprehensive and reviewed when required.

Leadership and Management

Comprehensive management arrangements ensure effective oversight of the service, and the required policies and procedures are in place. We saw evidence of regular and comprehensive audits of all aspects of the service. The RI has good oversight of the service and has regular meetings with managers. Senior managers participate in Continuous Improvement meetings with other members of the service. The RI undertakes the three-monthly formal visits to the service and a detailed report of their outcomes is available. Robust quality assurance processes are in place which shows the provider actively seeks the views of people who use the service. Care staff told us managers are approachable and supportive. Policies and procedures in areas such as positive behaviour support, safeguarding, and medication are in place, are comprehensive and reviewed regularly.

We saw several staff files which evidenced robust recruitment processes are in place and in which people using the service can be involved if they wish. Knowledgeable staff are provided in appropriate numbers to support people. Care staff told us they receive a lot of training which is regular and appropriate for the people they support. We saw training records which confirm this, with training in areas such as safeguarding, medication and dementia being undertaken. We saw evidence of regular staff supervision, appraisals, and team meetings, which care staff confirm took place. Meetings between senior managers and family members also take place. Care workers are registered with appropriate professional bodies. One person told us care staff had missed calls in the past, but *“at the moment it is OK... which had knocked my confidence in the service,”*. All the other people we spoke with confirmed care staff were never late or missed calls, which we saw evidence for. Staff rotas, care workers and people confirm people receive good continuity of support from small teams of care staff.

The provider takes safeguarding seriously and has good mechanisms in place to safeguard the individuals they support. The safeguarding policy reflects current national guidelines and regular safeguarding audits take place. There are safe systems for medicines management being followed with policies in place for staff to follow. The provider has comprehensive infection control policies and procedures and manages the risk of infection well.

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
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N/A	No non-compliance of this type was identified at this inspection	N/A
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Date Published 31/05/2024