



# Inspection Report on

**Zion community care**

**The Catering Warehouse  
63 Courtney Street Manselton  
Swansea  
SA5 9NR**

## **Date Inspection Completed**

05/07/2024

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## About Zion community care

Type of care provided	Domiciliary Support Service
Registered Provider	Zion Community Care Limited
Registered places	0
Language of the service	English
Previous Care Inspectorate Wales inspection	<a href="#">[First Full Inspection]</a>
Does this service promote Welsh language and culture?	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

People are very happy with the service they receive from Zion Community Care. Those spoken with were very complimentary of the service and appreciative of the support received. The Responsible Individual (RI) is compassionate and well respected. They have a strong presence in the service and are continually striving to develop and improve the quality of the support offered. The management team are experienced and committed. Care staff feel confident in their roles and are supported through formal and informal discussion. Care staff can support people the way they want to be supported and do not feel rushed. They told us they find the RI and management team approachable and enjoy working at the service.

Care staff are keen to learn and develop within their roles. The RI and management team are committed to supporting them to achieve this. There are plans in place to develop an in-house trainer and improve the training offered to staff. The RI has secured Qualifications and Credit Framework (QCF) places for staff and will support them through this. This will ensure staff have the necessary skills and qualifications to continue to provide a high standard of care and support to people as the company grows.

## Well-being

People are treated with dignity and respect and make decisions regarding their care. People are involved in the development of their personal plan and have a copy of this in their home. In addition, they have a copy of the provider's Statement of Purpose (SoP) and a written guide to the service. This helps them to understand what to expect from the service. During our visit, we spoke to people about their experience of the service. They told us *"at first, we were very apprehensive, but they are all brilliant and we enjoy seeing them every day"* and *"all the staff are friendly, they're a good bunch"*.

People feel they are listened to, and their views are considered. People are supported to make decisions affecting their daily lives and are fully involved in their care. People told us *"they always listen to me and if there's anything I want to do differently they take it on board"*. People's individual circumstances are considered, and the service actively seeks to accommodate these. Personal plans show that people are regularly consulted about their care and their views and preferences are respected. This is reflected in care logs where people's individual choices are documented.

People are protected from abuse and neglect. Care staff receive safeguarding training and those spoken with had good understanding of their responsibilities. People are provided with the complaints procedure and know how to report something they are not happy with. The RI is very involved in the service and regularly attends calls alongside staff to provide support and training, as well as asking people for their thoughts on the service. The RI told us that any issues arising are dealt with promptly and people's wellbeing is at the heart of the service. People told us they are confident the provider would deal with any concerns they may have.

People's wellbeing is promoted by the service. The RI demonstrates a values-based approach to care and support and is focused on promoting this ethos throughout the staff team. All care staff receive an induction at the start of their employment where a range of mandatory and service specific topics are covered. These include communication, dementia awareness and equality and diversity. Care staff spoken with told us that people's wellbeing and dignity is their main priority. People spoken with told us *"they go over and above to make sure we are happy with the service"*.

## Care and Support

The service has an accurate and up to date plan to meet people's care needs. We viewed four care files which include people's personal plans, health information, reviews and record keeping. These are detailed and reflect current care needs. Before care is provided, an initial assessment is completed with the person or their family. This information is then used to develop the personal plan. People have a copy of their personal plan and told us they are regularly contacted by the service provider and asked for feedback about their care. They told us they are involved in reviews of their personal plan, and we saw detailed documentation to confirm this.

People are provided with the care and support they need through a service designed in consultation with them and meets their needs. People told us they are fully involved in their care and their decisions are fully respected by the service. People told us care staff are respectful and understanding of their needs. Daily recordings seen show that staff are flexible in their approach and people's preferences with regards to their care are respected. Care staff told us they have adequate time to spend with people and do not feel rushed. Staff rotas show flexibility around care times and duration. People confirmed this and told us *"they change plans at short notice to suit us"* and *"they always have plenty of time to spend with us and are never rushed"*.

There are systems in place to safeguard people using the service. Care staff receive safeguarding training and those spoken with have a good knowledge of their responsibilities and how to report concerns they may have about people they support. Care staff told us they are confident that management would follow up on any concerns they may have. People we spoke with said there are regular staff visiting daily and they have developed a good rapport with them. There is a safeguarding policy in place which is reviewed as required. People told us they feel safe with care staff visiting them.

The service promotes hygienic practices and manages the risk of infection. Care staff were seen wearing Personal Protective Equipment (PPE) appropriately and told us they had adequate supplies. Staff spoken with demonstrated a good knowledge of infection prevention and control. People told us staff always wear PPE appropriately. Care staff receive infection prevention and control training as part of their induction and the service has recently secured additional infection control training. There is an up to date, comprehensive infection control policy in place.

## Leadership and Management

The provider has strong governance arrangements in place to ensure the smooth operation of the service. The RI works in the service daily and is supported by a committed management team. Together they work to drive improvements. They work closely with people, their families, and care staff to gather feedback about the service. This informs any required improvements and is detailed in the quality-of-care reviews. These reviews are completed within regulatory timeframes and show a high standard of oversight and governance. The management team complete regular audits and address any actions raised promptly.

People receive care and support from a competent staff team who have appropriate knowledge and skills. We saw a training matrix which shows training offered to care staff. Training is up to date and includes mandatory online and face to face courses. All care staff had received induction training which covers a range of service specific topics such as dementia care and person-centred approaches. The service is currently strengthening its training offer and is investing in a “train the trainer” course to develop their own in-house trainer. Care staff spoken with are keen to attend extra training to further develop their skills and knowledge. Care staff spoken with demonstrated a good understanding and knowledge of their roles and responsibilities. The provider has recently secured QCF places for care staff and is committed to supporting them through this qualification.

People are supported by a staff team who are recruited and vetted appropriately. There are suitable recruitment and background checks in place to ensure staff fitness to work in social care. All care staff have a Disclosure and Barring Service (DBS) check in place which is up to date. Care staff are registered with Social Care Wales (SCW), the workforce regulator, or are working towards this.

The service has a highly committed staff team who feel supported in their roles. Care staff receive regular supervision, and these are detailed and focus on staff development. Team meetings are frequently held and meeting minutes show that there is a strong emphasis on effective teamwork. Conversations are two way and there is an open and honest culture within the team. We spoke with care staff about their experience of working for the service. They told us *“I feel very valued, and I can approach management anytime”* and *“it’s a new company, and I am looking forward to growing with it”*.

### Summary of Non-Compliance

Status	What each means
<b>New</b>	This non-compliance was identified at this inspection.
<b>Reviewed</b>	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.
<b>Not Achieved</b>	Compliance was tested at this inspection and was not achieved.
<b>Achieved</b>	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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