



Care Inspectorate Wales

Care Standards Act 2000

Inspection Report

Carelink Homecare Services Ltd

LLANGEFNI

Type of Inspection – Full

Date(s) of inspection – 24 October 2018

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Summary

About the service

Carelink Homecare Services Ltd is registered with Care Inspectorate Wales (CIW) to provide domiciliary care for adults living with dementia, and adults with a physical disability. This service is provided within the counties of Conwy, Gwynedd and Ynys Môn. The company has appointed a responsible individual and manager for the service. The agency has recently relocated its principal office to Ynys Môn, retaining the Colwyn Bay premises as a satellite office.

What type of inspection was carried out?

This was a full inspection undertaken as part of our inspection programme.

The following methods were used:

We (Care Inspectorate Wales) made an unannounced visit to the agency office on 24 October 2018 between 9:45 am and 4:30 pm.

We spoke with four people receiving a service and a relative of one other person.

We spoke with the manager of the service, a care supervisor and three care workers.

We looked at a sample of records and documents. We focused on staff recruitment, training and supervision, the statement of purpose, quality of care reviews and four people's care records.

What does the service do well?

People benefit from receiving continuous care. The service ensures there are small teams allocated to the same people receiving care. People and care workers reported positive feedback about their experience of the agency; people and family members receiving the care spoke highly of their care workers. All comments we received were positive.

What has improved since the last inspection?

The service has a plan for supervision of all staff on a regular basis; although this may have been delayed due to the recent increase in staff.

What needs to be done to improve the service?

There were no issues of non compliance to report.

Quality Of Life

People relate well and have good relationships with the staff that care for them. We spoke with four people who receive the service. One person told us “mae'r gwasanaeth yn dda ofnadwy” (the service is very good”) They told us they “*would not change anything about the service*” and the “*same carers call most of the time*” Another person told us “*the service is always quick to sort any niggles*”.

The manager informed us; the service was in the process of assisting one person to move to independence, where they were moving to their own property; the manager told us the service was keen to ensure consistency in care for them during and following their transition to a new home. To ensure this the service had requested they provide them with a list of preferred carers, with the aim to ensure consistency in their care. We were shown their list of preferred carers, which they had returned to the service. . We contacted them by telephone on the day we inspected; they told us they were looking forward to their move. They told us “Mae'r gofal yn really dda” (the care is really good”). We were informed the service aims to increase the amount of permanent rotas provided to people receiving the service. People are able to express their views and opinions.

People feel and are safe and protected, due to preventative measures taken by the service to ensure people are safe. The service had recently gained a contract to care for a large portion of people receiving care in Gwynedd, Ynys Mon and Conwy; therefore, several care workers who were previously employed by other services had transferred to Carelink. The manager informed us the service was keen to ensure the new care workers were safely vetted. Care workers who transferred from other agencies, were required to undertake an induction program. We were shown a copy of the induction training, where staff were requested by the service, to complete a ‘Level two Award’ in Social Care Induction and Safeguarding Awareness. Five members of staff did not want to complete the full award. To ensure the service was in line with regulatory requirements, these care staff attended four full day workshops and four half-day support sessions. We contacted two care workers who had transferred to Carelink; they confirmed they had recently undertaken the induction provided by Carelink, completed a job application and provided two references. We viewed two files of staff who had transferred from other services; these contained the required documentation in line with safe recruitment of care workers. We spoke with professionals from the health service and local authority, who told us, the service was efficient in informing them of important and relevant information about incidents, concerns and safeguarding. We spoke with two care workers and the manager about the processes they would follow if a safeguarding issue should arise; their explanation was consistent with each other and the services existing safeguarding policy, which we reviewed following the inspection date. People are safe and protected from abuse.

Peoples' individual identities and cultures are recognised and valued. The service ensured people received consistent care and are cared for in their language of choice. i.e. English or Welsh. We spoke with two people who told us they were cared for in their language of choice; one of whom spoke Welsh as their first language. The manager told us the service aimed to provide care through people's language of choice; “*Some people receive Welsh carers only*”. They told us, “*The Social Services and well being act is*

person centred and that is the way forward; the individual is centre to everything we do”

The service statement of purpose states, the service aims to increase the availability of Welsh Language Services within Carelink, who were taking *‘practical steps to implement the ‘active offer’*. The service is working towards ensuring people can receive a service in Welsh.

Quality Of Staffing

People receive timely, appropriate and person centred care. We spoke with four people who told us they were happy with the care they were given and the care was provided in a timely manner; one person told us *"everything is ok, we don't have any problems with times"*. We spoke with three care workers, who told us they aimed to arrive within ten minutes of the allocated care time, and their rota allowed for travel time, for which they were paid. The service manager confirmed this during our discussions with them. We reviewed eight care workers records, which demonstrated planned and actual times of care provided. We compared the duration of calls to three care plans. These were consistent with the allocated care plans recorded within the care files. People receive the right care at the right time.

People are treated with kindness, and compassion in their day to day care. One person who received care on a daily basis told us, *"mae'r staff yn gret"* (*"The staff are great"*). Another person told us, *"I am quite happy with the care and the staff, I don't want it to change"*. A member of staff told us *"I love the work, it is the best thing I have ever done"*. We heard several telephone conversations while we visited the office; we heard management support staff and respond to people who receive a care service from them. It was evident they knew people well. People have a good relationship with staff

People are actively involved in making decisions about the service they receive. Four people told us they had been involved in their care planning. We reviewed four people's care plans which were detailed and demonstrated people had been involved in the initial care planning, including the review of their care. We spoke with three professionals who told us the service was proactive in ensuring people were involved in making decisions about their care and families were also encouraged to be involved in this process. Four care staff told us people's views were considered to be important by the service. People and their families, where applicable, were included in the review of their care. Staff were clear in regard to their responsibility to report any changes in care needs to the manager; the manager showed us care plans which were reviewed prior to people receiving care by Carelink; these demonstrated, Carelink had ensured the care assessments undertaken by Local Authority had been checked with individual people and the specific details of care needs documented appropriately in line with people's needs. People are involved in making decisions which affect their lives

People are encouraged to have ambition and control and to be independent. One family member told us staff assisted them to be as independent as possible. One person told us the care worker assisted their husband to go for days out to the beach or shopping and to attend physiotherapy. The care worker was present when we phoned; they told us *"I enjoy the work and couldn't imagine doing anything else now"*. We viewed four care files; where we found evidence within care plans and assessments, people's needs and wishes were a priority for the service. The documents had been recorded in a person centred manner.

Quality Of Leadership and Management

Staff training has provided them with the knowledge, skills and understanding required to effectively support people's well-being. Staff were provided with a wide variety of relevant, mandatory training including Safeguarding and moving and handling; moving and handling training was taking place on the day we inspected; staff attended a room onsite, which contained the apparatus so they could practically learn how to manoeuvre people safely. The service also provided specialist training which includes; for example, "Dementia and other conditions" and "End of life care". One care staff member told us the quality of the training provided by the service was *"good and an opportunity for staff to get together."* We were shown the 2017-18 training program for Carelink, which highlighted which level of staff, should have attended the listed training, the required frequency of the training, and which dates these were available. The program also highlighted further opportunities for staff development, including National Vocational Qualification levels two, three, four and five. The manager told us they are keen to provide incentives for all staff; they told us;

" it is important all staff are provided with opportunities to take pride in the work and have the opportunity for incentives, in particular when promotion is not always possible." They told us, staff training and developmental needs were assessed via supervision and annual appraisals. Staff were also provided with a self assessment questionnaire (a document introduced by Social Care Wales, in line with the Social Services and Well Being Act 2014)) which assisted staff and service management to assess learning needs. We spoke to three care staff; one carer told us they receive good training and felt this equips them "to help care for people". They also told us they are provided with extra training for certain people including end of life training. Staff knows and understand the care, support and opportunities which are available to them.

Staff is aware of the lines of accountability and leadership and the registered manager is visible and approachable. We spoke with one care staff who told us they are well supported by management and said *"I wouldn't change company for anything"*. We heard three phone calls by staff, while we inspected; we witnessed management providing guidance to staff in a supportive manner. The manager informed us supervisions and team meetings were temporarily delayed while the service were in the process of recruiting and welcoming the new staff following the increase in business and the newly acquired contract. They told us supervision of all staff took place on a quarterly basis from January 2019; team meetings would also be resumed on a monthly basis from January 2019. We viewed three staff files which showed evidence, supervisions were provided to staff on a quarterly basis prior to the service developments. They told us, while the service was re establishing business, staff would be supported by accessing the service training, via ongoing support as and when required by staff; staff was also updated via the service newsletter, which is distributed on a monthly basis. This provides information and updates for staff. We were provided with the April 2018 bilingual newsletter, which highlighted information in regard to a variety of topics including code of conduct, confidentiality, information in regard to award nomination and compliments submitted by people receiving the service. One care worker member told us they always read the newsletter and look forward to this each month. People benefit from a service where best use is made of resources.

There is a robust transparent system in place to assess the quality of the service in relation to outcomes for people which includes feedback from people using the service and their representatives. The manager informed us, all service policies were currently under review, and all staff would read and sign the completed versions; we saw evidence of this within staff files, supervision notes, where staff had signed and dated, and had acknowledged these had been explained to them. All staff was given copies of each individual policy, which is included within staff handbook; we were provided with a copy on the day of inspection. We saw the quality assurance report 2018. This was a review of the recent developments throughout the year and included information recorded by a quality assurance coordinator; quality reviews are carried out twice a year to supported individuals. Any issues arising were dealt with by the service as soon as possible. People receive high quality care from a service which sets high standards for itself, is committed to quality assurance and constant improvement.

There is evidence of driving continuous improvement. We received notifications for each of the two complaints received by the service, since the last inspection. These demonstrated the service responded appropriately and promptly to complaints and in line with their existing complaints policy. We viewed the complaints policy along with other service policies on the day we inspected. One professional told us, "the service were very trustworthy, open and transparent and they are very good at communicating any issues. People are able to express concerns.

Quality Of The Environment

The service is situated on the outskirts of Llangefni. The building is accessible, apart from being on the first floor, although there are meeting rooms available on the ground floor . There is adequate parking for people visiting and staff. The grounds contain porter cabins, where staff training is provided to them

How we inspect and report on services

We conduct two types of inspection; baseline and focused. Both consider the experience of people using services.

- **Baseline inspections** assess whether the registration of a service is justified and whether the conditions of registration are appropriate. For most services, we carry out these inspections every three years. Exceptions are registered child minders, out of school care, sessional care, crèches and open access provision, which are every four years.

At these inspections we check whether the service has a clear, effective Statement of Purpose and whether the service delivers on the commitments set out in its Statement of Purpose. In assessing whether registration is justified inspectors check that the service can demonstrate a history of compliance with regulations.

- **Focused inspections** consider the experience of people using services and we will look at compliance with regulations when poor outcomes for people using services are identified. We carry out these inspections in between baseline inspections. Focused inspections will always consider the quality of life of people using services and may look at other areas.

Baseline and focused inspections may be scheduled or carried out in response to concerns.

Inspectors use a variety of methods to gather information during inspections. These may include;

- Talking with people who use services and their representatives
- Talking to staff and the manager
- Looking at documentation
- Observation of staff interactions with people and of the environment
- Comments made within questionnaires returned from people who use services, staff and health and social care professionals

We inspect and report our findings under 'Quality Themes'. Those relevant to each type of service are referred to within our inspection reports.

Further information about what we do can be found in our leaflet 'Improving Care and Social Services in Wales'. You can download this from our website, [Improving Care and Social Services in Wales](#) or ask us to send you a copy by contacting us.