



Inspection Report on

Michael Phillips Care Agency Ltd

**MICHAEL PHILLIPS CARE AGENCY LTD
30-32
KINMEL STREET
RHYL
LL18 1AN**

Date Inspection Completed

11/07/2019

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Description of the service

Michael Phillips Care Agency Ltd is registered with Care Inspectorate Wales (CIW) to provide a domiciliary support service in the North Wales regional partnership area and has an office in Rhyl. They have nominated Lydia Hughes to be the Responsible Individual (RI) and there is a manager in post who is registered with Social Care Wales (SCW).

Summary of our findings

1. Overall assessment

We found that people receive a good service from Michael Phillips Care Agency. People using the service and their relatives told us they were happy with the support provided by a consistent staff team. Personal plans were being followed by staff and we observed interactions which were positive and dignified. Appropriate actions were taken to safeguard people from abuse and risks. There is good oversight of the service by the responsible individual and the manager and staff are committed, trained and supported to fulfil their roles and responsibilities to enhance people's quality of life

2. Improvements

This was the first registration inspection since the service was re-registered under the Regulation and Inspection of Social Care (Wales) Act 2016 (RISCA).

3. Requirements and recommendations

Section 5 of this report sets out the requirements and recommendations to improve the service. These include the following:

- Ensure personal plans are reviewed every three months and contain all details of how a person is supported.
- Evidence that monitoring systems are in place.
- Develop the quality of care review.

1. Well-being

People have control over their day-to-day lives. Individuals and their relatives knew what to expect from the service, had been involved in assessments and contributed to their personal plans. People were able to explain exactly how they would like to be supported and this was well communicated to a consistent team of care staff so people can feel assured their needs are known by those who support them. Care staff were encouraged to recognise people's strengths and ability to make choices. People's views about their service were sought in a meaningful way, so they can feel assured that they are listened to. People know and understand what care and support is available to them, they are listened to and contribute to decisions affecting their lives.

People's needs relating to their physical and mental health and emotional well-being are well met. The agency worked with individuals and social services where necessary to ensure people got a service at the time of their choice. People were supported to maintain their health, including oral care, and were supported to enjoy meals of their choice. People get the right care and support.

People are supported to be safe and protected from abuse and neglect. Care staff understood safeguarding procedures, and they also checked at reviews if people's care line, supportive technology to help people get support in an emergency, and falls bracelet were working. People and relatives were clear about how to raise concerns, felt confident they would be listened to and appropriate actions would be taken. People know how to raise concerns, are safeguarded from abuse and supported to be safe within their homes.

2. Care and Development

People have detailed personal plans to help care staff support them in the way they want. We viewed seven personal plans which were all outcome focussed, describing what people wanted to achieve from having support, and were consistently highly detailed so that care staff could provide support in the way the person wanted. However, through discussion, we saw that one person's care plan needed revising to show all the support the agency provided for them; the manager agreed to address this. People we spoke with told us they had been consulted on how they would like to be supported, and copies of the personal plans were in their homes. We saw in people's homes we visited that the personal plan was present, and care records evidenced care was being provided as described. Care staff told us that they had opportunities to look at the care plan before providing care. If they were to support someone they had not supported before they could also discuss the person's care with senior staff. We did not see evidence that personal plans were being reviewed every three months as required; we saw they were being reviewed every six months. We discussed this with the service provider, and they immediately took action to rectify this. People can be confident that care staff have access to accurate and up to date plans for how their care is to be provided to meet their needs.

People are provided with support which meets their wishes. We saw the service promote a positive ethos of dignity and respect. On the first day of employment they ensure care staff know the service's ethos/culture with a 'Primary Values and Rights' statement. They also have a good policy on dignity in domiciliary care, which all staff read as part of their induction. People we spoke to told us they felt they were treated with dignity and respect. We observed care staff supporting people as the personal plan described and in a dignified manner, also using humour, which was appreciated by the person and their family receiving support. Care plans emphasised that care staff should promote independence and choice and when supervisions were carried out, the supervisor checked to see if this was carried out. We saw that during the initial assessment for care, consideration of the safety of their home was considered, and if a person agreed, a referral was made to the Fire and Rescue service to have a fire safety check carried out. People are provided with the quality of care and support they need in line with their personal wishes.

People are protected from abuse. There were policies and procedures in place for safeguarding and complaints. Staff told us they were aware of these, received safeguarding training on their first day of employment with the agency and knew what to do if they had any concerns. Training records evidenced that safeguarding was provided and updated regularly. Staff also said the management team were approachable and listened. Where there had been safeguarding issues, we saw that the agency had taken appropriate actions in reporting concerns and making changes to policy to reduce risks. One relative we spoke with of a person receiving care and they told us they felt their relative was safe when with care staff. The provider has systems in place to safeguard vulnerable people from abuse.

3. Leadership and Management

People are supported by appropriate numbers of staff who have a range of skills and qualifications to meet individual's needs. The Statement of Purpose included information on the numbers of staff employed, their roles and qualifications. We saw evidence that staff were safely recruited, including Disclosure and Barring Scheme (DBS) checks, and receipt of two references, prior to commencement of employment. From rotas and discussions with people, relatives and staff we found that individuals benefitted from being supported by a consistent staff team. Care staff received a thorough induction via classroom based courses, based on the Social Care Wales induction framework, which the provider has developed to meet the needs of the service. This is carried out within the recommended timescale, and also included a minimum of 15 hours shadowing with experience care workers. We saw training records that evidenced care staff received regular training and refresher courses on a range of topics, including medication, dignity in care, dementia, food safety, health and safety and pressure area care. We saw that staff were supported to carry out nationally recognised care qualifications. The company's policy on training has been incorporated into a staff training and development policy as we recommended. The manager told us they were already considering how they can support staff to register with Social Care Wales, a requirement that will come into effect from April 2020.

Care staff have their practice observed every two months, as part of their supervision and we saw records that documented this. We were advised that this was also an opportunity to discuss performance and any issues, however the examples we saw did not evidence that these discussions were taking place. We have advised the provider that this needs to be addressed. Care staff we spoke with told us they felt well supported by the management team, and that an on call system was in operation. We were told that care staff call in to the office weekly to pick up their rota, and were encouraged to use this time to discuss any concerns and read care plans. Whilst the service provider does not conduct staff team meetings, care staff were encouraged to discuss any concerns/issues at these weekly visits to the office or after training sessions. People are supported by staff who are suitably fit and have the knowledge, skills and qualifications to carry out their roles.

Care staff are allocated some travel time in between calls, but this is not consistent. People told us that generally calls were on time and that care staff had enough time to support them with their needs. The daily notes we saw supported this. Some people we spoke with felt that sometimes care staff appeared rushed, although they did not think it affected the care provided. Care staff also noted that there were times they felt rushed, for travel between calls, as there was not travel time allocated between all calls. The manager advised that it is explained to people that the times on their schedules may vary by up to half an hour, and that time can be made up in gaps in the care workers rota, or at the end of the shift. Travel time and care time are sometimes separated, but consideration should be given to allowing more travel time.

People receive care from a service that ensures there are systems in place to support the smooth running of operation. There is a strong management team structure in place to oversee the day-to-day operation of the service. The RI is present five days a week and works alongside the manager. The manager was trained to deliver training, as well as two other members of the management team. There is a quality representative to ensure

peoples' voice could be heard in meaningful way. They visited people every six months and as well as reviewing personal plans they completed a quality of care questionnaire. A senior manager coordinated the care calls and ensured that people receive their calls at the time of their choice. We were told there are systems in place to check timesheets to ensure that call times were adhered to and calls were not missed. We recommend that whoever carries out the checks should sign to evidence that this was done. The manager described improvements they have made to how they work to ensure they are in line with changes in legislation, for example their website, which has been designed so that potential new employees can apply online, is also compliant with General Data Protection Regulations, 2018 (GDPR) guidance. The service provider has produced an annual quality of care review dated 2018/2019, which describes very well the service provided. We have advised that this should be done every six months, should evidence the views of people about the service and describe improvements to be made based on this. There is effective oversight of the service; however, this could be better evidenced by improving audit processes and improving the quality of care review to ensure it meets new regulations and guidance.

4. Environment

This theme is not applicable to domiciliary support services.

5. Improvements required and recommended following this inspection

5.1 Areas of non compliance from previous inspections

None

5.2 Recommendations for improvement

- Ensure personal plans are reviewed every three months and contain all details of how a person is supported to ensure support provided is in line with current needs.
- Develop ways of evidencing that monitoring systems are in place.
- Give further consideration to providing allocated travel time, to prevent people feeling their carers are rushed.
- Develop the quality of care review in line with new CIW guidance and regulations.
- Improve the recording of supervision with care staff.

6. How we undertook this inspection

This was the first inspection of the service following re-registration under The Regulation and Inspection of Social Care (Wales) Act (RISCA) 2016. A full inspection was undertaken as part of our inspection programme. We made an announced visit to the service on the 3 July 2019 between 9:30 a.m. to 3 p.m. We also visited on the 9 July 2019 between 9:30 a.m. and 1:30 p.m. The following methods were used:

- We visited two people receiving a service and observed care being provided.
- We spoke with three people receiving a service and two relatives of people who receive a service.
- We spoke with four support staff.
- We held discussions with the responsible individual, manager/proprietor, senior care manager and quality representative.
- We looked at a wide range of records. We focused on six personal plans and daily notes, two staff files, training and supervisions records. We reviewed a number of policies and procedures. We considered the Statement of Purpose (SoP) and compared it with the service we inspected. This sets out the vision for the service and demonstrates how, particularly through the levels and training of staff, etc., the service will promote the best possible outcomes for the people they care for.

CIW is committed to promoting and upholding the rights of people who use care and support services. In undertaking this inspection, we actively sought to uphold people's legal human rights.

<https://careinspectorate.wales/sites/default/files/2018-04/180409humanrightsen.pdf>

Further information about what we do can be found on our website:

www.careinspectorate.wales

About the service

Type of care provided	Domiciliary Support Service
Service Provider	Michael Phillips Care Agency Ltd
Manager	There is an appointed manager in post who is registered with SCW.
Date of previous Care Inspectorate Wales inspection	This was the first inspection under RISCA
Dates of this Inspection visit(s)	03/07/2019 and 9/7/2019
Operating Language of the service	English
Does this service provide the Welsh Language active offer?	The service is working towards this.
Additional Information:	

Date Published 16/09/2019