



Care Inspectorate Wales

Care Standards Act 2000

Inspection Report

**Mae'r adroddiad hwn hefyd ar gael yn Gymraeg / This report is also available in
Welsh**

Tereen Ltd

CONWY

Type of Inspection – Full

Date(s) of inspection – Tuesday, 7 May 2019

Date of publication – Monday, 1 July 2019

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Summary

About the service

This service is a domiciliary care agency, which provides personal care and support for people with disabilities, older people and people with dementia care needs. Tereen's office is based in the centre of Conwy and operate in North Wales Partnership area. The service has a registered manager and a nominated responsible individual.

What type of inspection was carried out?

We, Care Inspectorate Wales (CIW) undertook an unannounced full inspection on Tuesday 7th May 2018 between the hours of 9.15-4.30 hours. We reviewed all aspects of the service within the domiciliary care agency themes, namely Quality of Life, Quality of Staffing, Leadership and Management.

We reviewed:-

Statement of Purpose

Quality Report 2019

Six peoples' care files

Four staff files

Feedback questionnaires

Compliments and Complaints records

Electronic records of care support records system

A selection of service policies.

We spoke with:-

Two people who receive a service

One relative of whom a person receiving the service

Two care workers, the allocations manager, deputy manager, service manager and responsible individual.

What does the service do well?

The service is open and transparent and respond positively to recommendations for improvement.

What has improved since the last inspection?

This is the first inspection undertaken under RISCA

What needs to be done to improve the service?

CIW recommend the service introduce the following;

The service establish arrangements to ensure staff are informed about developments of

the service. For example, regular meetings

Quality Of Life

People who need it are able to receive a service in Welsh. The responsible individual informed us there were five Welsh-speaking people who were currently receiving care. We were informed the service aims to ensure they receive their care by a Welsh speaking carer, in particular the people whose first language is Welsh. There were nine Welsh speaking staff listed by the company, including management. We met and spoke with four managers on the day of inspection who were able to offer the service through the medium of Welsh. We were informed, documentation can be given in Welsh and English depending on peoples' preference, and found evidence of this within service records, for example feedback documentation. The responsible individual showed us the website and identified areas which were in the process of being developed, these included being available. We saw correspondence, to and from the service, was bilingual. We also viewed the 'flash cards' which were statements written in Welsh, which could be used by non Welsh speaking staff. People can receive a service in Welsh.

People are happy with the care they receive. We spoke with two people who told us they were very happy with the care they were receiving. We viewed a range of feedback questionnaires, which had been returned to the service since January 2019, by people using the service and their families; all of this feedback was positive. People had described the service as 'Excellent' (16), 'Very Good' (18) and 'Good' (10). We viewed a variety of cards by people and their relatives, thanking and complementing the service. People are happy and content.

People feel safe and protected from avoidable harm. The documentation we reviewed, included staff and care files. These showed evidence, the service had established safe procedures for the recruitment of staff; we found evidence the service was ensuring enhanced DBS checks were undertaken when recruiting staff. Staff were provided with a full and consistent induction program, prior to caring for people. All people receiving the service had a full initial assessment by the service, to ascertain their individual needs and acquire the necessary information to provide adequate and safe care. The service ensures people are safe and protected.

People's needs are understood and catered for. One person we spoke with told us they were very happy and the carers were supportive. *"They are very helpful".... some days I need more help.* The responsible individual told us, the carers assist them to go shopping, attend appointments and assist people to prepare meals. The documentation we viewed evidenced people were assisted to undertake daily tasks with assistance, depending on their care needs. The manager and responsible individual informed us the service aims to provide care to assist people to be independent and to continue to live in their own homes. Peoples' independence is maximised

Quality Of Staffing

People receive timely, appropriate, person centred care. All people we spoke with told us their carers arrive on time most of the time and let them know if they are going to be late or if there is a change of carer. The responsible individual told us they encourage staff to contact people and each other by phone rather than text to ensure effective and timely communications. They said *" We find because we let people know, people are happier. If people are late, we just let everyone know and keep them in the loop."* They told us staff aim to keep to the allocated times. We viewed the call log, which showed evidence care staff are usually on time in line with the planned care times, but if late, make up the time during the end of the care slot. We compared the allocated time slots to the call log; we saw, during one call, the carer had arrived five minutes late, but stayed five minutes later to make the time up. Although the manager told us appropriate travel times were planned into care staff rotas, staff indicated they feel rushed, during busy times, when travelling between calls; more travel time allocated during the busy times of the day, would be beneficial to the service. People receive the right care at the right time, although the allocation of more travel time would be beneficial, in order to ensure staff can provide the allocated care time to people receiving care during the busy periods.

People are actively engaged in making decisions about the service they receive and the way they spend their time. All people we spoke with told us they or their families were involved in planning their care. The responsible individual and the manager told us reviews took place with people and or their families. We were informed on the day we inspected, the service was in the process of introducing a new system called 'PASS'; this was an outcome focused system which identified goals which could be achieved with individuals. For example peoples' assessments of needs would be tailored to peoples' choices about what care they receive and how they would like to receive it. We were shown the app, which is linked to the PASS system which people, and their families can have access to if they choose to. We saw evidence the assessment and care planning documentation was recorded in the first person using words they have said rather than jargon. The manager told us *" This is a useful tool and it is important we keep in touch with families; ..so they will know their family they are being looked after."* People are involved in making decisions that affect their lives.

People are supported by staff who are committed to enabling and empowering people, so that they have as much choice. All people we spoke with told us they were given choice; including their daily care, for example, what they ate and wore. One person told us, *"the staff are very good, they give me choice about how much they assist me, and check whether I need help or assistance."* We viewed the compliments and complaints file. There were several cards and letters of appreciation which highlighted people and their families were happy with the service they received; the messages within the compliments included;

"they had nothing but praise for your carers",

"care compassion and kindness extended to us all",

"the dignity, humour, and kindness with which they delivered their care was exemplary"

"Care staff are wonderful and helpful". The staff we spoke with told us *"we aim to help*

people, to assistance them but also to encourage them to stay independent". We observed two people who used the service as if their allocated care time could be altered to suit their needs and these were agreed. The responsible individual and allocations manager informed us the service aimed to ensure ongoing consistency of care provided by carers who knew the people they cared for. We were shown the electronic rota, which evidenced the times had been changed as requested and the usual carer had been at the amended times, which meant people received care by the same carers. People are treated with dignity and respect and have good relationships with staff.

Quality Of Leadership and Management

The vision values and purpose of the service are clear and actively implemented. The responsible individual explained the service has a variety of approaches to the reviewing and monitoring the quality of care. The statement of purpose and service advertisement state, the service offers *“the best possible care”*. The responsible individual told us, peoples’ care was regularly reviewed; however, if peoples’ care needs change, the service takes steps to accommodate this. We spoke with two people who said, the service is *“very good and very helpful”*. We spoke with a ‘community manager’, who was responsible for ensuring care is of a high quality. They told us, the service were very good and aims to *‘accommodate peoples’ needs and requests’*. The content of the service feedback questionnaires was highly positive and consistent with the information highlighted within the service quality report January 2019. As part of the quality assurance mechanisms for the improvement of the service, we recommended the introduction of regular, formal and recorded team meetings; the responsible individual explained this had been an area, which had also been identified by Local Authority for improvement. People receive high quality care and support from a service, which sets high standards for itself and committed to quality assurance and constant improvement.

Staff are valued and supported. The care staff we spoke with told us they were well supported and management are *“always there to help”* and had regular supervision which is *“enjoyable and useful”*. One care staff told us the service provide supervision every six weeks or more frequently if required. The manager told us, *“if any issues arise we speak to staff”* The supervision records we reviewed demonstrated care staff receive regular supervision. These records highlighted discussions about care of individuals, training, and any issues arising. We found these records were of a positive nature, and staff were provided with positive feedback where appropriate. People benefit from a service where the wellbeing of staff is given priority and staff are well lead and supported, although people, staff and the service would benefit with additional time allocated between calls.

There is a willingness to be accountable. This approach to openness and transparency, gives people and their families a sense of confidence in the organisation, which reinforces a culture of learning by experience. We reviewed concerns, and found the service were proactive in undertaking necessary amendments when issues of concern were identified; the responsible individual explained, in response to concerns, they adjust relevant policies and training, and aimed to reinforce the reviewed processes via people’s care plans and individual staff supervision. They told us *‘we do a good job because if we are not doing it properly, then you are letting people down. I know we look after people well. When issues of concern arise, we use as a training tool so we can improve’*. We reviewed the service complaints procedure and safeguarding procedure and found evidence these were consistent to what the responsible individual had told us. We found evidence risk assessments had been undertaken and these were reviewed, , amended and monitored in a timely manner. Furthermore, the associated risk assessments were person centred and appropriate to individual needs, these included clear step by step guidance for care staff when peoples’ needs changed, or they required a review of care. People are able to express their concerns.

The service has a proactive approach to the learning and development of staff and ensures that training is relevant to the individual needs of the people for whom they cared. The statement of purpose highlights the training offered to new staff. These included a variety of mandatory subjects including Safeguarding and Infection control. This is provided in house to all staff by the responsible individual, who is a qualified teacher with "train the trainer" certification in the relevant subjects. The responsible individual told us, the service also offered specific training for carers who were providing specialised care for individuals; these include, 'stoma care', 'epilepsy' and 'diabetes' training. Staff receive refresher training after a year in post. We were shown how the electronic system, 'Carefree' used by Tereen, to book staff into refresher training, with alerts highlighted three weeks before the training is due. The staff we spoke with told us the training they have received was *"really good; 'The training gave me everything I needed to be able to do the job without being thrown in the deep end"*. Management had relevant qualifications; three service managers and responsible individual have achieved level three to five in QCF, in management. The other managers had achieved level three in this qualification and were working towards their level five. The service had recently linked with Llandrillo college; this would enable all staff to work towards achieving a QCF qualification. People benefit from a service, where best use is made of resources.

Quality Of The Environment

CIW does not fully consider the environment for care agencies. However, we found the offices to be accessible for people using the service with adequate parking and access to the office floor. We found records of people and staff to be well organised and stored confidentially. There was access to training and meeting rooms within the office and rooms available for confidential meetings or discussions. There were posters throughout the office, which promoted positive approaches by the service, towards people and staff.

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.