



Inspection Report on

Danygraig domiciliary care agency

**GLAMORGAN CARE LTD
DANYGRAIG
PORTHCAWL
CF36 5SR**

Date Inspection Completed

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About Danygraig domiciliary care agency

Type of care provided	Domiciliary Support Service
Registered Provider	Glamorgan Care Limited
Registered places	N/A
Language of the service	English
Previous Care Inspectorate Wales inspection	This was the first inspection under the Regulation and Inspection of Social Care (Wales) Act 2016.
Does this service provide the Welsh Language active offer?	This is a service that does not provide an 'Active Offer' of the Welsh language because it does not intend to become a bilingual service.

Summary

Danygraig domiciliary care agency provides personal care and support to people in their own homes, in the Western Bay area. The service provider, Glamorgan Care Ltd, have nominated a Responsible Individual (RI) named Jennifer Aplin, who has oversight of the running of the service. There is also a manager employed, who is suitably qualified and registered with Social Care Wales as required.

People receiving care from Danygraig domiciliary care receive care from staff who are suitably trained and supported, and have accurate and up to date personal plans that detail their individual care needs. Day to day issues are effectively communicated via an electronic care monitoring system. People, and their representatives, are complimentary about the positive relationship they have with care workers and office staff. Care workers report they feel well supported and are happy in their roles.

Well-being

People are consulted about the care and support they receive. Personal plans are created with the people they are for, and people and their representatives are included in regular reviews of their care packages. Feedback is gathered via questionnaires and telephone monitoring, which contribute to the quality assurance of the service. The manager also completes a number of audits of care practices and call logs, to make sure people are receiving a consistent, and good quality, service.

People's needs, and risks to safety and well-being, are thoroughly documented and regularly reviewed. This means staff are aware of long-term changes. Risk assessments should include thresholds for care workers to intervene. Short term changes to care are implemented in a timely manner. The service uses an electronic care monitoring system, which allows care workers to communicate any queries or issues with office staff and for any changes to rotas or care tasks to be communicated quickly back to care workers.

Carers help protect people from potential harm or abuse. They receive safeguarding training and have knowledge of the procedure to report any concerns they have. The manager logs safeguarding issues and reports them to the appropriate agencies for further investigation if needed.

Care and Development

People receiving care, and their families, foster positive relationships with care workers and office staff. People told us that the communication between themselves and the office staff is comprehensive and as frequent as they need. Care workers said they feel they are told everything they need to know to provide good daily care, as well as having channels to feed any concerns or queries back to the office. Daily notes are consistently completed and any issues highlighted, although some of the notes are not fully legible and therefore difficult to understand. The service provided additional support to people during the recent full COVID 19 lockdown, particularly if the usual care package had been suspended due to shielding concerns. A newsletter is also sent out to people on a regular basis, which can include photographs of new carers in the area so people are familiar with them before they arrive.

Care plans and reviews consider people's personal outcomes, as well as the practical care and support they require. Plans are detailed, and are reviewed at regular intervals with the person and their representative. The reviews are holistic, considering the person's needs and circumstances as well as the care package they receive. During lockdown, these reviews were conducted by telephone and focused on worries or additional needs due to COVID 19. When a risk is identified in a person's care plan, there should also be an instruction to staff as to when to intervene and minimise that risk.

There are measures in place for assisting people with their medication should they so need. People's care plans state if they need help with medication, and if so whether it is to just remind people to take their medication or assisting them to remove it from blister packs. There is a medication policy in place, which tells carers what they can and cannot help with, and what to do if there is a problem or if they make a mistake. Care workers have up to date medication training, and supervisors check care workers' competence at helping with medication on a regular basis.

The service helps to protect people who receive care and support from potential harm and abuse. Care workers have training, and there are policies in place, to tell them what to do if they think someone they visit is at risk. Care workers told us they would have no problem reporting issues to their manager. Incidents are appropriately reported to the local safeguarding team, and information shared on a need to know basis.

There are appropriate infection control measures in place, which work to keep people safe from the transmission of COVID 19. Care workers are told, and understand, the requirements of Personal Protective Equipment (PPE) and people receiving care and support told us that they have confidence in care workers coming into their homes because they are so careful with hygiene practices.

Leadership and Management

Staff know their roles and responsibilities and feel supported by the staff structure, and the training and development programme that is in place. Care workers told us they are given the knowledge and time to gain the basic experience they need before visiting people on their own. There is an induction process in place, which includes office based training and field training, although this usual process has had to be amended during the COVID 19 pandemic. Care workers are regularly supervised, where they have a one to one discussion with their line managers regarding their professional conduct and development. Face to face training has been suspended during the COVID 19 lockdown, but it is due to resume when guidelines allow, in order for care workers to expand on their theoretical knowledge. They are also monitored via spot checks and competency assessments. The manager and RI attend care calls when needed to relieve stress on care workers and for people to receive their care in a timely way. Care workers report this boosts morale, and people receiving the service receive a more consistent care and support as a result. One care worker told us they *“had never felt so supported in a job”*.

Recruitment and vetting processes are in place, and are generally robust. However, there are gaps in staff employment history that are not currently accounted for by the recruiter. We have advised the registered persons that improvements are needed with employment records in order to fully meet the legal requirements. A notice has not been issued on this occasion, as there was no immediate or significant impact for people using the service. We expect the responsible person to take action to rectify this and it will be followed up at the next inspection.

There are monitoring and auditing processes in place to maintain the quality of the service being provided. The RI is very active in the running of the service and has good oversight of day to day occurrences with staff and people receiving care. The schedule of quality assurance monitoring and reports have not been interrupted during COVID 19 lockdown, and have focused on the additional requirements of Personal Protective Equipment (PPE) and infection control. We saw evidence of complaints raised with the manager to be responded to in a timely way, including detail of any investigations and what actions will be taken, if relevant. People receiving care told us that they get sent questionnaires to feedback their thoughts on the service, in addition to the care plan reviews that are held. They also commented that they are happy to call the office with any issues or queries, and have confidence in them being resolved even if it takes time.

Environment

As domiciliary support services provide care in people's own homes, we do not consider environment as part of this inspection.

Areas for improvement and action at the previous inspection

This is the first inspection following registration under Regulation and Inspection of Social Care (Wales) Act 2016

Areas where immediate action is required

None

Areas where improvement is required

A person is not fit to work at the service unless the person has provided full and satisfactory information (Schedule 1, Part 1, 8- a full employment history, together with a satisfactory written explanation of gaps in employment)

Regulation 35 (2) (d)

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