Inspection Report on

Evoo Healthcare Ltd

70 Countisbury Avenue
Llanrumney
Cardiff
CF3 5SN

Date Inspection Completed

08 June 2021
About Evoo Healthcare Ltd

<table>
<thead>
<tr>
<th>Type of care provided</th>
<th>Domiciliary Support Service</th>
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<tbody>
<tr>
<td>Registered Provider</td>
<td>Evoo Health Care Ltd</td>
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<tr>
<td>Language of the service</td>
<td>English</td>
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<tr>
<td>Previous Care Inspectorate Wales inspection</td>
<td>This is the first inspection since the service registered under RISCA regulations</td>
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<tr>
<td>Does this service provide the Welsh Language active offer?</td>
<td>The service provides an ‘Active Offer’ of the Welsh language. It anticipates, identifies and meets the Welsh language and cultural needs of people who use, or may use the service.</td>
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Summary
Bekezela Nsingo is the Responsible Individual (RI) and Manager who has overall accountability for the service. She is registered with Social Care Wales (SCW) and oversees the day-to-day running of the service. The RI is currently recruiting for a separate manager to support her as the business grows. Overall people are satisfied with the service they receive, although some improvements are required to ensure people receive support consistently at the planned times. The provider shows a commitment to address areas of improvement required that were identified at the inspection visit. People’s individual plans are detailed and focus on the things that are important to them. Reviews of personal plans need to be completed more frequently to ensure that they are up to date with any changes, which may have occurred. There are measures in place for keeping people safe and well, which includes consulting with relevant professionals when needed. Care staff need to improve in the completeness of their care records and these need to be effectively monitored. Care workers are motivated, they feel valued and well supported by the management team and office staff but improvements are required in their training and supervision.
Well-being
The service supports people to achieve their desired outcomes with a caring and compassionate staff team who treat people with dignity and respect. Although consistency in the delivery of calls needs to be better, continuity of care workers is generally good and people are complimentary of the service they receive. People’s individual circumstances are considered and they are listened to with regard to their support needs and preferences. People are supported to access their local communities to build and maintain community links. The service’s position as regards offering a service in the Welsh Language is reflected in its written information and relevant policies in place.

Evoo Healthcare has a safeguarding policy in place, which complies with current guidance and is regularly reviewed. Staff are aware of this policy and are confident in how to report any concerns they may have about someone being at risk of harm. The management team take any safeguarding matters seriously and work with other agencies to ensure people are kept safe from harm. People who are supported know how to raise a concern or complaint and feel confident that these will be dealt with by the service.

Measures are in place for promoting safe practices, which help to keep people using and working at the service safe. The service consults with relevant professionals when necessary, to help keep people safe and well.

Relevant written information about the service is present, which the RI updated during our inspection process to ensure it meets regulatory requirements. A range of policies and procedures help support the delivery of the service.
Care and Development

The service supports people to achieve their desired outcomes with a caring and compassionate staff team. Although consistency in the delivery of calls needs to be better, continuity of care workers is generally good and people are complimentary of the service overall. One person we spoke to said, “The staff are polite and respectful; they are kind to my wife and are very good.” another person said, “The staff are friendly and will do anything for me but are good at promoting my independence”.

People have clearly written individual plans to identify their care needs, these are detailed and inform the staff exactly how people would like to be supported and what they would like to achieve. Detail such as how people like their hot drinks made or specific routines they like to follow are clearly evidenced for staff to follow. These plans need to be reviewed more frequently to ensure that any changes in someone’s circumstances or care needs are kept up to date. Care staff have a system to log into support calls, which allows the management team to have oversight of peoples support hours and ensure that these are being delivered as agreed. Staff do not always log onto this system, which needs to be improved. People do not always receive support at the times agreed but people told us that they are usually informed of care staff are running late for a specific reason.

Care staff do not always complete notes on the support they have delivered which is required. We expect the provider to take action to address this and will follow tit up at the next inspection. This makes the effective review of people’s plans more difficult. Measures are in place for promoting safe practices, which help to keep people using and working at the service safe. The service consults with relevant professionals when necessary, to help keep people safe and well. Care staff wear the correct personal protective equipment (PPE) when supporting people and robust infection prevention and control procedures are followed in the office.

Relevant written information about the service is present, which the Responsible Individual (RI) updated during our inspection process to ensure it meets regulatory requirements. A range of policies and procedures help support the delivery of the service. Although some areas need improvement, the service shows a commitment to addressing them.
Leadership and Management

The RI is currently overseeing the day-to-day management of the service as they are in the process of recruiting a separate manager. The RI/Manager has a ‘hands on’ approach and has adequate oversight to ensure the smooth running of the service. The quality assurance reports do not sufficiently evidence the necessary requirements by current legislation. There is written information, which describes the service people can expect, the RI updated some of this information during our inspection process, which is now accurate and complies with requirements.

The Care workers feel confident in who they should approach depending on the nature of their query or concern. Internal systems and processes are in place to ensure the service delivers its aims and objectives effectively. The service notifies CIW of relevant incidents. There is consultation with relevant professionals and their views are considered to promote good outcomes for people. Internal investigations are thorough and detailed and the provider listens to people’s concerns and takes the appropriate action in a timely manner.

Some of the required recruitment information for staff is missing, such as a full employment history. The RI assured us that they will address this issue and will improve processes to ensure they obtain this important information prior to employing new staff. We expect the provider to take action to address this and will follow it up at the next inspection. Care workers have a choice of relevant employment contracts in line with the regulations.

Staff are not consistently trained for the role they perform due to gaps in core training areas. Care staff do not all regularly receive one to one supervisions with their line manager or an annual appraisal, which are required. We expect the provider to take action to address this and will follow it up at the next inspection. Care workers, however told us that they feel sufficiently supported and trained to do their jobs. Care workers told us that they feel valued by the provider. Staff appreciate that they receive regular positive feedback and the provider is able to accommodate flexible working arrangements wherever possible.
Areas for improvement and action at, or since, the previous inspection. Achieved

Areas for improvement and action at, or since, the previous inspection. Not Achieved
None

Areas where priority action is required
None

Areas where improvement is required

| Ensure that personal plans are reviewed as often as necessary and at least every three months | Regulation 16(1) |
| Ensure that care and support is provided at the times it is agreed | Regulation 21(2) |
| Ensure that care staff receive appropriate supervision and appraisal | Regulation 36(2)(c) |
| Ensure that care staff receive core training appropriate to their role | Regulation 36(2)(d) |
| Ensure that full and satisfactory information is kept for all care staff | Regulation 35(2)(d) |
| RI to ensure that logs are kept of their visits to individuals using the service and meetings with staff | Regulation 73(2)(b) |
| Ensure that suitable arrangements are in place to establish and maintain a system for monitoring, reviewing and improving the quality of care provided | Regulation 80(1) |

The area(s) identified above require improvement but we have not issued a priority action notice on this occasion. This is because there is no immediate or significant risk for people using the service. We expect the registered provider to take action to rectify this and we will follow this up at the next inspection.