



Inspection Report on

Castell Care and Support - North

**WALES & WEST HOUSING
TY DRAIG
CLOS DEWI SANT
DEESIDE
CH5 3DT**

Date Inspection Completed

30/11/2020

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About Castell Care and Support - North

Type of care provided	Domiciliary Support Service
Registered Provider	Castell Ventures LTD
Registered places	0
Language of the service	English
Previous Care Inspectorate Wales inspection	
Does this service provide the Welsh Language active offer?	No

Summary

People are happy with the care and support they receive from competent support staff. Personal plans are person centred and in place to ensure peoples' outcomes are met by staff that are knowledgeable, respectful and caring. Quality assurance is good overall with some improvements required. The provider ensures staff receive regular, recorded one-to-one meetings and training relevant to their roles. The Responsible Individual (RI), registered manager and quality manager work well together to improve the service.

Well-being

People can access the right information, when they need it and in the way they want it. The statement of purpose describes the services available and provides information to ensure people know how to raise concerns. People told us they are treated with dignity and respect by a consistent team of staff that get to know them well. The provider ensures there is a culture of diversity and describes how they ensure the service is designed to “*fit around the person*”. People’s views are used as part of the quality assurance system in place, although this does require improvement to ensure it meets regulations.

People’s physical and mental health is promoted. There is good detail to guide staff in individual personal plans; those plans are updated regularly to reflect an individual’s outcomes and sets out how on a day-to-day basis the individual’s care and support needs will be met. There are positive relationships with support staff that helps to support people’s emotional health and well-being. Comments from people to support this were; *really kind and caring and really helped me to move on*; “*all good no issues*”. Staff commented on “*promoting independence*” being a priority.

People are protected from abuse and neglect as care staff know what to look out for and how to raise concerns if they suspect someone’s well-being is compromised. People told us they are listened to and communicated with, in a courteous and respectful manner with their care and support being the main focus of staff’s attention; “*Very nice staff; always.*” Support staff are trained in safeguarding people and have clear policies and procedures to guide them although they require more frequent evidence of reviews to ensure they are in line with changes to legislation and practices.

Care and Development

The service provider considers a wide range of views and information, to confirm that the service is able to meet individual's needs and support people to achieve their personal outcomes. A summary of the admission procedure is included in the statement of purpose. Before agreeing to provide a service, an assessment takes place that involves the individual, representatives, professionals and staff. The service provider ensures they can meet people's outcomes prior to offering support. One person told us they *"really liked it there, the staff were all really kind and caring and really helped me to move on, I couldn't have done what I have without them"*. There is an admissions policy in place and the compatibility of people living in supported living accommodation is considered prior to people moving in.

Individuals can feel confident that service providers have an accurate and up to date plan for how their care is to be provided in order to meet their needs. The plans are straightforward and therefore easy for staff to follow. Staff told us *"We have a simply health care plan. The resident's information and care plans are kept up to date. We do our daily notes, body charts, food etc. online so less paperwork"*. People, the placing authority (if applicable) and any representatives contribute and agree to the personal plans. The provider has sufficient policies to guide staff in place, although they require review. Staff told us they find it *"very rewarding working with the residents to be as independent as possible and making their own choices"*. People told us they have personal plans and the RI told us they have a system for people to sign in agreement using an online system. Personal plans contain a good level of information, they are updated regularly and set out how the individual's care and support needs will be met.

People are protected from abuse and neglect as care staff know what to look out for and how to raise concerns if they suspect someone's well-being is compromised. People and staff have the information they need to raise concerns. People we spoke with told us they felt safe and listened to. One person told us they *"feel happy to raise concerns but honestly no problems at all."* Staff have access to policies and procedures that are aligned with national guidance. Staff receive appropriate training. One member of staff told us; *"any concerns are immediately addressed"*, and the *"safeguarding policy and procedure is followed"*. There has been a high number of safeguarding reports made by the provider in relation to young people absconding; we found the missing person's policy requires review. The service is working with professionals to ensure people using the service are kept safe.

Medication is managed safely with some improvements to documentation completion required. We saw staff had recent medication competency assessments completed bi-monthly and had been provided with recent training. Staff have access to policies and procedures, although they require evidence of more frequent reviews to ensure they are in line with changes to legislation and practices. We saw documentation could be improved to ensure charts were completed accurately as some were hand written and incomplete. The

service has sufficient systems for medicines management.

Leadership and Management

Governance arrangements are in place to support the smooth operation of the service. This ensures there is a sound basis for providing high quality care and support for individuals using the service in order to support them to achieve their personal outcomes. RI visits that need to be completed in person, in accordance with the regulations, are not happening as required as this is delegated to the quality manager. This is to be addressed by the RI to ensure compliance with the regulation. We saw views of people and staff are obtained and used for the continued development and improvement of the service. There is a quality of care review available for the service which requires review to ensure it is in line with the regulations. The management team work well together to ensure staff have sufficient support.

There is a written guide; statement of purpose; that reflects the service provided. There is evidence of annual reviews. Improvements to ensure accuracy regarding staff training and quality assurance systems is required. The document describes the service as person centred as it states; we do not have a *'one size fits all'* approach and describes how they ensure the service *"fits around the person"*. People told us they receive the right care and support at the right time and in line with their expectations. The statement of purpose provides information to ensure people know how to raise concerns to the provider and local authority.

Well-trained care staff support people living in their own homes. Staff are recruited safely and are provided with a good induction and on-going training. One member of staff told us *"The training is the best training I have ever had"* another told us; *"High standard of training provided"*. One member of staff told us they *"need more staff"* but that the company are recruiting additional staffing. People told us there is consistency with staff *"same staff all the time"* and that staff are kind and caring. The manager told us that the RI *"is very responsive and we can approach the RI immediately over phone at any time"*. The statement of purpose that states, *"Each member of staff meets with their line manager at least once every other month for a formal supervision"*. We examined records that supported this and staff confirmed this. There are sufficient policies and procedures in place, although they need reviews that are more frequent.

Staff are supported to raise concerns about any aspect of the service through whistleblowing procedures. Staff told us they have *"weekly emails providing us with information"* and the service has *"wellbeing champions who are trained members of staff who can signpost staff to the support they need"*. Staff told us they have more than one manager to raise concerns to which allows them to approach the person they feel most comfortable with; Staff told us *"the managers are approachable"*. The quality manager told us there is planned further training for staff regarding whistleblowing to ensure there are no delays in reporting. Staff told us they feel confident they will be listened to and understand the procedure to raise concerns they may have.

Environment

Not considered as part of this inspection.

Areas for improvement and action at the previous inspection

None

Areas where immediate action is required

None

Areas where improvement is required

None

Date Published 31/12/2020

No noncompliance records found in Open status.