

Inspection Report on

AKC Home Support Services

A K C Home Support Services
Penrhos Manor
Oak Drive
Colwyn Bay
LL29 7YW

Date Inspection Completed

28/08/2019



Description of the service

AKC Home Support Services is a domiciliary support service; the office is based in Colwyn Bay. The service provides support to people with learning disabilities, physical disabilities, sensory impairment, acquired brain injury, dementia, end of life care and to people aged 65 and over. The service provider is also named AKC Home Support Services; the responsible individual is Sharon Jones. The manager is registered with Social Care Wales.

Summary of our findings

1. Overall assessment

We received positive feedback from people and their relatives who were happy with the service and the support provided. People are involved in formulating their personal plan of care and receive regular reviews to ensure that their needs and preferences on how they would like to be supported are reflected and respected. People are supported by trained and motivated care workers and benefit from a service which is well led. Care workers, people receiving a service and their relatives found the manager and care coordinators to be approachable. Improvements are required to fully meet regulatory requirements in relation to notification of incidents to CIW and offering care workers on non-guaranteed hours contracts the choice of alternative contractual arrangements.

2. Improvements

The service has re-registered under the new Registration and Inspection of Social Care Wales Act 2016 (RISCA) and this was their first inspection under the new legislation.

3. Requirements and recommendations

Section five of this report sets out our recommendations to improve the service. The registered persons are not meeting regulatory requirements in relation to:

- Notifications
- Contractual arrangements for care workers.

Recommendations to improve the service include:

- Care documentation
- Quality of care review and policies
- Safeguarding records and supervision for care staff
- Statement of purpose and service user guide

1. Well-being

Our findings

People have control over their day-to-day lives and have good relationships with staff who show warmth, kindness and understanding. Individuals and their relatives knew what to expect from the service and told us that they had been involved in assessments and contributed to their personal plans. We saw people were treated with courtesy, kindness and offered choice by care workers who have a good understanding of their needs. When we spoke to people using the service and their representatives, they stated they are listened to and contribute to decisions affecting their lives. They were also complimentary of the staff team and the quality of care provided. People are able to make choices and decision about their daily routines.

People are supported with their physical, mental health, emotional and social wellbeing needs. We spoke to people about the activities they participate in with the support of care workers. People stated they are happy with the support they received in the activities, which include shopping, cooking healthy meals, baking cakes, swimming, visiting places of interest and attending medical appointments. We saw evidence that staff seek advice and support from health professionals when needed, and were aware of people's health needs and how to support them. However, information about people's health diagnosis and history requires more detail in people's personal plans. Overall, people are supported to be healthy and do the things that make them happy.

People can be assured the service provider has mechanisms in place to safeguard the individuals they provide care and support for. Risk assessments are in place to ensure people are safe from harm based on the assessment of their needs. There is a safeguarding policy and procedure in place. We saw evidence that care workers are trained to keep individuals safe from harm and staff told us they knew what to do if they had any concerns. The record of safeguarding referrals would benefit from improvement to ensure the outcomes of safeguarding referrals are clearly recorded; we discussed safeguarding referrals with the manager and found that appropriate actions had been taken. People are protected from abuse and neglect.

People receive a service which is working towards the 'Active Offer' in relation to the Welsh language. The 'Active Offer' is a Welsh Government initiative, which promotes people to receive a service in Welsh if they wish, without having to request it. The statement of purpose states that the service aims to match Welsh speaking care workers to Welsh speaking people receiving a service and documentation such as the statement of purpose, service user guide and service delivery plans are available in Welsh. People cannot receive a service through the Welsh language without requesting it.

2. Care and Development

Our findings

People can be assured there is an assessment process in place to measure if the service is able to meet their needs. We found an assessment of needs had been carried out prior to people receiving a service and the service had received a copy of assessments from the referring local authority prior to completing an initial assessment. The manager told us about the assessment process and the statement of purpose contained information about referrals and initial assessments. There is a commencement of service policy and procedure in place; however, this would benefit from review to ensure it meets the regulatory requirements for the policy. We spoke with people receiving a service and relatives who confirmed they had been asked for their views and had felt included in the assessment process. People benefit from a service which considers all available information to confirm if they are able to meet their needs.

People have personal plans in place which inform care staff on how to meet individuals' care and support needs. Health information was included in personal plans however; this needed to be more detailed. We saw two people's personal plans which lacked detail about people's health diagnosis and medical history. The service is currently in the process of transferring all care documentation from paper files to an electronic care management application, paper files and electronic files alone did not always evidence the most up-todate and relevant care and support documentation. The service requires to ensure that both electronic files and paper files contain relevant and up-to-date information whilst the service is transferring from paper files to the sole use of an electronic care management application. We saw that people's personal plans had been developed based on their individual assessment of needs and had been reviewed regularly to ensure they remained appropriate. The risk assessments and personal plans we viewed reflected people's current needs and had been updated following any changes. People and relatives told us they had contributed to personal plans. We spoke with the manager, care coordinators and care workers who were aware of people needs and the support they required. A care coordinator told us they contact the local authority to arrange reviews when people's needs have changed; we also saw evidence of this. People have an accurate and up-to-date plan of how their care and support is to be provided, which takes into account their personal preferences and is kept under review.

People receive the care and support they need. People told us they receive support from a staff team, which was stable overall, and relatives told us their relatives received support calls on time, for the length of the required time and their care and support needs are met. We found that people's care and support was being provided in line with the timetables of care produced by the local authority that had arranged their package of care. Care workers told us their rotas were well organised and allowed enough travel time for them to carry out

people's calls as planned. People, relatives and care workers confirmed that office staff communicated changes to support calls or staff shifts well. The manager told us that people and their relatives could view daily notes and send messages to the service through secure access on the electronic care management application. People and relatives we spoke with had not used this system, however stated they were able to easily communicate with care staff face-to-face or through telephone conversation. People told us they were happy with the service they received.

People are protected from abuse. There were policies and procedures in place for safeguarding, whistleblowing and complaints. Care workers told us they were aware of these policies and had received training in safeguarding people and knew what to do if they had any concerns. We saw evidence that care workers were trained to keep individuals safe from harm. Care workers told us the coordinators and the manager were approachable, would listen and took appropriate action. We found that the service took appropriate actions in relation to safeguarding people; however the record of safeguarding referrals requires improvement to ensure the outcomes of safeguarding referrals are clearly recorded. People and their relatives told us that they knew how to highlight a complaint or concern. We saw records were kept of complaints and the outcomes. The complaints policy would benefit from review to ensure that the policy fully meets the requirements of Regulation 64. People can be assured that the service has measures in place to safeguard vulnerable individuals receiving a service.

3. Leadership and Management

Our findings

People are supported by staff who have been recruited safely to ensure people are protected. We looked at a sample of care workers files and found all necessary recruitment and Disclosure and Barring Service (DBS) checks had been completed in accordance with the required regulations. Care workers had not started working with people until all preemployment checks had been completed. People can be assured that the services recruitment procedures are robust to safeguard people care workers are suitably fit to provide care and support for them.

People are supported by knowledgeable and competent staff. We looked at a timetable of staff shifts, held discussions with people, relatives, care workers, and found that individuals benefit from being supported by a consistent staff team. We spoke with staff who stated that they felt sufficiently trained to perform their role as a care worker. Staff training records evidenced that care workers received all the core training and over 50% of staff were suitably qualified for their role to a QCF Level 2, 3 or above. Overall, care workers received regular opportunities to meet for supervision; however increasing the occurrence of formal staff supervision to no less than on a quarterly basis would improve this further. We evidenced that staff teams for home care and community projects had an opportunity to meet collectively, to share information and their views to help shape the service. People benefit from being supported by care workers who are sufficiently trained and overall supported in their role.

People cannot be fully assured that there are arrangements in place in accordance with the domiciliary support services regulations, for staff employed at the service. Staff files we looked at were seen to contain contracts of employment however had not been reviewed since their initial appointment to their current role. We discussed with the manager that under the RISCA 2016, the provider is required to offer employed care workers a choice of continuing employment of a contractual agreement following a period of three months. The service is non complaint with Regulation 42; a non compliance notice has not been issued on this occasion. The manager stated they would discuss the recent regulatory changes with the responsible individual and will be having further discussions with staff to consider their options in accordance with regulation 42. People are not currently supported by care workers who are offered a choice of contractual agreement.

Overall, people receive a service where the provider has systems in place to monitor and review the quality of care and support for people. There was a clear management structure in place; the responsible individual was supported by a responsible individual assistant who supports the responsible individual with regulatory duties the responsible individual is able to delegate, the manager and three coordinators. We spoke with care workers who stated

they felt supported by the management team. We discussed the quality of care review with the manager, who told us that this year's quality of care is in the process of been completed and the responsible individual was currently compiling the information into a report. We saw that last year's quality of care review had been completed, however the service provider is currently not meeting requirements for a quality of care review to be completed six monthly. We saw evidence that people and their relatives are offered an opportunity to feedback on the quality of the service they received after the first six weeks of receiving a service. The manager also stated that people are able to feedback about the service at the end of receiving a service. We saw that a security policy and procedure was in place to ensure that people's information was kept confidential and secure. The service provider ensured that policies and procedures were reviewed; however the commencement of service and complaints policy for people and staff requires review to ensure they fully meet regulatory requirements. There are arrangements in place for the responsible individual to have oversight of the service; however the service should ensure that all policies meet regulatory requirements and the quality of care review is completed six monthly.

People can be assured there is information available to them about AKC Home Support Services which they can read and consider prior to receiving a service. The aims and purpose of the service were made clear to people through its statement of purpose. We examined the service's statement of purpose and found that it met legal requirements. However, we recommend that the detail in relation to how often personal plans are reviewed is in line with regulations. The service user guide was available pictorially but lacks information about the availability of advocacy services. We find that people have access to information about the service, but the statement of purpose and service user guide requires further revision.

People cannot be fully assured that Care Inspectorate Wales (CIW), as the regulatory body, are always notified where there are concerns and significant events. The service has failed to notify CIW of two occurrences of allegation of staff misconduct within 24 hours of the event occurring. Improvements are needed in relation to notifying CIW of events under Regulation 60. A non-compliance notice has not been issued on this occasion, as the responsible individual responded appropriately to the incidents. People cannot be fully assured that there are appropriate arrangements in place to ensure the notification of the events under Regulation 60, are made to CIW without delay.

4. Improvements required and recommended following this inspection

4.1 Areas of non compliance from previous inspections

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

4.2 Recommendations for improvement

The registered persons are not meeting regulatory requirements in relation to:

- **Regulation 60**: Notifications: The service needs to ensure that all incidents or events which meet the requirements under Regulation 60 should be sent to CIW as an online notification.
- Regulation 42: The service provider must offer staff the choice of continuing to be
 employed under a contract of employment where the number of hours required to be
 worked per week are (a) at least the average number of hours they have worked; or
 (b) less than those worked, during the preceding three months.

Non-compliance notices have not been issued on this occasion as we received assurances of the measures the provider were taking to address care workers contracts of employment and there was no immediate or significant impact on people using the service in relation to the failure to notify CIW of a regulation 60 notification. Regulatory requirements and recommendations for improvement will be looked at the service's next inspection.

The following are recommended areas of improvement to promote positive outcomes for people:

- Care documentation: Personal plans require improvement by including more
 detail in relation to people's health conditions and health history. The service
 provider should ensure that both electronic files and paper files contain relevant
 and up-to-date information whilst the service is transferring from paper files to the
 sole use of an electronic care management application.
- Quality of Care Review: The service provider must make provision for the quality
 of care and support to be reviewed as often as required but at least every six
 months.
- Policies: Ensure the commencement of service policy and complaints policy for people and staff fully meet regulatory requirements.

- Safeguarding records: Ensure that the record of safeguarding referrals and outcomes are clearly recorded.
- Supervision for care staff: Ensure care workers receive formal supervision at least three monthly.
- Statement of purpose: Ensure the detail within the statement of purpose in relation to personal plans outline that they must be reviewed as and when required but at least every three months.
- Service user guide: Ensure that the service user guide includes information about the availability of advocacy services.

5. 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 8 August 2019 between 9:50 a.m. to 17:45 p.m. We also visited on the 22 August 2019 between 9:30 a.m. and 17:15 p.m. The following methods were used:

- We visited three people receiving a service and spoke to one person receiving a service through a telephone conversation.
- We spoke with two relatives.
- We spoke with six staff members.
- We sent out 10 questionnaires to people receiving a service, 10 Staff, 10 Relatives and five to professionals. We received completed questionnaires from four members of staff, two completed questionnaires from people receiving a service and one questionnaire completed from a relative.
- We held discussions with the responsible individual, manager and three coordinators.
- We looked at a wide range of records. We focused on assessments and admission documentation, four personal plans, four staff files, training and supervisions records. We examined the Statement of Purpose (SoP) and compared it with the service we inspected. This sets out the vision for the service and demonstrates how the service will promote the best possible outcomes for the people they support and 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	AKC Home Support Services
Manager	Registered with Social Care Wales
Date of previous Care Inspectorate Wales inspection	31/08/2017
Dates of this Inspection visit(s)	08/08/2019
Operating Language of the service	English
Does this service provide the Welsh Language active offer?	Working towards the Welsh language active offer

Additional Information:

People cannot receive a service through the Welsh language without requesting it.

The service is working towards the 'Active Offer' in relation to the Welsh language.

The statement of purpose states that the service aims to match Welsh speaking care workers to Welsh speaking people receiving a service and documentation such as the statement of purpose, service user guide and service delivery plans are available in Welsh.

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