



## Inspection Report on

**Mirus Supported Living and Community Support Services - Gwent Region**

**Cleeve House  
Lambourne Crescent  
Cardiff  
CF14 5GP**

**Mae'r adroddiad hwn hefyd ar gael yn Gymraeg**

**This report is also available in Welsh**

## **Date Inspection Completed**

02 November 2020

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## About Mirus Supported Living and Community Support Services - Gwent Region

Type of care provided	Domiciliary Support Service
Registered Provider	Mirus Wales
Registered places	This is a domiciliary support service
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 provides an 'Active Offer' of the Welsh language. It anticipates and sets out its intention for meeting the Welsh language and cultural needs of people who may wish to use the service.

### Summary

Mirus Supported Living and Community Support Services Gwent is a domiciliary support service operating in the Gwent region. The service is owned by Mirus Wales. The Responsible Individual (RI) is Christopher Paul, who oversees the service's strategic operations. A manager is in place to oversee the day-to-day running of the service.

People receive a good standard of care and support. They are enabled to achieve their personal goals within a service that values them as individuals. People's progress is evaluated and care workers have written guidance on how to deliver care and support. Some documentation needs to be more robust. There are measures for promoting safe practices. Management monitor incidents and care workers' practice, taking action, where appropriate, to improve people's safety. The provider needs to ensure Care Inspectorate Wales (CIW) is notified promptly of relevant incidents. The service is delivered in line with the statement of purpose, supported by policies and audits. The service recruits, supervises and trains its staff appropriately overall. A quality assurance process helps the service evaluate, learn and develop, but engagement with all people connected with the service should be evidenced more clearly.

## Well-being

People receive a good standard of care and support. Feedback from people using the service and representatives about the care workers is positive. People's independence is promoted within a service that actively monitors and evaluates their progress. Personal plans contain relevant information and guidance for care workers to follow, but one particular aspect needs improving. The provider is addressing this. Relevant written information is available for people using the service, but it needs updating.

Measures are in place for promoting safe working practices These are supported by relevant policies. There are records of medicines administered to people which are audited. The completeness of medication records and daily care records could be more consistent. Care workers have access to personal protective equipment (PPE) and staff receive relevant training. People using and working at the service know who to report concerns to. Care workers know their safeguarding responsibilities.

The service is appropriately run, supported by a management structure, policies, auditing and quality assurance systems. We discussed one aspect relating to the management arrangements with the RI, which they assured us they are reviewing. A thorough recruitment process ensures the people employed are suitable to work with vulnerable individuals. This is supported by a programme of induction, training and supervision, overseen by management. Most care workers receive support and supervision appropriate to their role. This could be more consistent for some, considering their individual circumstances.

The RI engages with people using the service, representatives and care workers for quality assurance purposes. This engagement should be evidenced more frequently. Quality of care reviews demonstrate effective oversight of the performance of the service which includes identifying areas for development. Quality assurance arrangements are comprehensive overall, but the provider should ensure there is clear evidence of engagement with stakeholders.

## Care and Development

People are enabled to achieve their personal outcomes. People using the service and representatives we spoke with gave us good feedback about the standard of care and support. It indicates people are happy and experience good progress. People feel safe and that they matter. They can exercise choice and control in their day-to-day lives.

Communication between care workers and representatives is good. The service demonstrates a commitment to supporting people to meet their Welsh language needs. The service's written information outlines how they may achieve this. The service works collaboratively with health and social care professionals to promote good outcomes for people.

Care and support is mostly delivered in line with people's personal plans. Care workers told us personal plans are accessible and clear. People's wishes and personal preferences are sought and well-documented. This shows they contribute to how they want their service delivered. The support focuses on enabling people to live safely and independently, whilst experiencing a reduction in behaviours that may harm themselves and/or others. Care workers receive training in relation to supporting people to manage their behaviours. This is supported by a relevant policy. We considered it would be helpful for people if this was summarised in the statement of purpose. Staff are knowledgeable about the people they support. Daily records indicate people's care and support needs are met; but they should be completed more consistently.

There is evidence of engagement with people and their representatives when reviewing their progress; but documentation could be better organised. This is to ensure personal plans, and associated documents (like risk assessments), are reviewed together, with the right people. There is a finance policy and regular audits are carried out regarding people who receive help to manage their money. Documentation in relation to this needs to be more robust, to ensure professional boundaries are clear and personal plans are consistent with placing authority care plans.

There are measures for reducing risks regarding medicines and cross-infection. Medication and infection control policies are present. A record of medicines administered is maintained and daily stock checks are completed. The reason PRN (as and when required) medicines are administered should be recorded more consistently. Guidance for care workers about using PRN medicines is mostly in place; but, again, this should be more consistent. The provider assures us this has been addressed. The service takes appropriate action in response to incidents, demonstrating a commitment to learning and improving its practices. Care workers receive guidance regarding the safe use of personal protective equipment (PPE). This helps ensure they keep themselves and the people they support safe. Appropriate infection control measures were in place at a visit we undertook. Care workers told us they have a sufficient supply of PPE.

There are measures for safeguarding vulnerable people. Policies are in place for

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safeguarding, complaints and whistleblowing. Care workers, people using the service and representatives know who to contact to make a complaint. There is evidence safeguarding concerns and unsatisfactory care worker practice are reported and acted upon appropriately. Safeguarding training is provided to care workers, which helps ensure they have appropriate skills and knowledge.

## Leadership and Management

The service's aims and objectives are clear. Some of the service's written information needs reviewing to ensure it is current. We discussed management arrangements with the RI, following feedback from care workers. They assured us they are reviewing this and measures are in place to manage any potential conflicts of interest. Records relating to staff disciplinary matters are maintained and overseen by management. Aspects of the service, such as turnover of workers, recruitment, incidents, complaints and compliments, are also overseen. The provider needs to ensure relevant incidents are notified to CIW promptly. Key policies and procedures are present to support the operation of the service.

People are safeguarded by a thorough recruitment system. Documentation in respect of people working at the service is in order and satisfactory. We discussed ensuring continuous employment histories are documented for all staff. Overall, the service ensures its staff are suitably vetted, to ensure they are safe to deliver care and support to vulnerable people.

Measures are in place for supporting and developing care workers. A training and development policy is present. Most staff receive appropriate supervision and feel well supported in their role. This should be more consistent for some and the provider should be mindful of circumstances where care workers may require additional support and/or supervision. There is evidence of appropriate staff induction and relevant training provided, including supporting care workers with their professional registration. Training is up to date for most care workers, which management oversee. Care workers told us the training is sufficient for their role. Care workers receive further support through team meetings.

Quality monitoring arrangements help the service ensure it is safe and well run. There is evidence of RI engagement with individuals and care workers. Evidence of more frequent engagement should be recorded. Comprehensive overall quality monitoring arrangements demonstrate good oversight of the service's performance and improvement goals. There is evidence of engagement with individuals and care workers, but the provider should ensure input from stakeholders (for example, local council commissioners) is clearly evidenced.

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**Areas for improvement and action at the previous inspection**

This was the first inspection under the Regulation and Inspection of Social Care (Wales) Act 2016.		
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**Areas where immediate action is required**

None	
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**Areas where improvement is required**

(1) Reportable occurrences must be notified to CIW without delay.	Regulation 60
(2) The provider's personal plan should be consistent with the Local Authority Care & Support plan, and any relevant professional assessments.	Regulation 15(7)(a) & (c)

We have not issued a priority action (non-compliance) notice on this occasion. This is because there is no immediate or significant risk to or poor outcomes for people using the service. We expect the registered provider to take action to rectify these areas and we will follow them up at the next inspection

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