



## Inspection Report on

**Premier Homecare North Wales Ltd**

**PREMIER HOMECARE NORTH WALES LTD  
PINFOLD HOUSE  
PINFOLD LANE  
MOLD  
CH7 6NZ**

**Date Inspection Completed**

18/11/2020

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## About Premier Homecare North Wales Ltd

Type of care provided	Domiciliary Support Service
Registered Provider	Premier Homecare North Wales Ltd
Registered places	0
Language of the service	English
Previous Care Inspectorate Wales inspection	21 September 2017
Does this service provide the Welsh Language active offer?	No

### Summary

People are happy with the care and support they receive from well-trained care workers. Care staff are knowledgeable, respectful and caring and are available in sufficient numbers to meet people's needs. People told us care staff are almost always on time and if they are late they are contacted by managers of the service. Support is provided in an un-hurried and dignified manner by a friendly staff team. People's care documentation is detailed, giving staff appropriate instruction how to deliver support and care plans are reviewed regularly.

People receive support from a well-managed service, from a staff team who are enthusiastic, recruited safely, supervised regularly and trained to meet the individuals support needs. Managers undertake detailed audits of the service on a regular basis and the views of those receiving a service are actively sought. The Responsible Individual (RI) has good oversight of the service, however the RI's 3 monthly formal visits to the service need to be formalised.

## Well-being

People's views are actively sought and individuals told us they were confident they were listened to. People told us they were treated well, with dignity and respect. They said staff are friendly and both staff and service users said the provider attempts to match people with staff before support commences. People's care and support documentation is detailed and gives staff adequate instruction on how to support individuals, and we were told by care staff, gave an accurate reflection of the individual receiving support. People are supported by small teams of staff who develop good appropriate relationships with the people they are supporting. The service supports people to achieve their outcomes.

The service has good measures in place to ensure people receiving a service are protected from harm. Recruitment practices are robust and care staff are trained in regards safeguarding. Infection control measures are detailed and staff are trained in their implementation. Staff follow care plans closely and these plans reflect the needs of the individual accurately and also the requirements set out in accompanying documentation provided by health care professionals. Risk assessments are detailed and reviewed regularly.

## Care and Development

The service provider considers a range of views and information about prospective clients. People and/or their relatives are consulted regarding their care needs and preferences prior to service commencing to ensure the service can meet their needs. Care staff also meet the individual they are to support, prior to the service commencing to ensure the person is comfortable with the staff member who is to undertake support. Care plans were detailed and written in conjunction with the individual. People using the service and family members confirmed they were consulted about what care and support was required and this was undertaken in the way in which the person wanted their support delivered.

People are provided with a good quality of care and support which is tailored to the needs of the individual which care staff are aware of. Detailed personal care plans are in place and give comprehensive instruction to staff on how to support people and these were reviewed at least 3 monthly with the individual. We saw a number of different documents were being used to record the care plan reviews. It has been agreed by the provider that they will standardise the form being used. The care plans mirror information contained in assessment documentation on how to support the individual and reflect the wishes of the service user on how they want to be supported. We spoke with professionals who confirmed that the provider and their staff were good at following instruction from them and professionals and people using the service said the support people received was good. We saw We also found risk plans to be detailed, comprehensive and reviewed at appropriate intervals. People and their relatives confirmed that they are treated with dignity and respect. One person told us *"I am treated with kindness"*.

The provider has good mechanisms in place to safeguard the vulnerable individuals they support. The safeguarding policy reflects current national guidelines. Staff are aware of the policy and have received training in regards the new safeguarding guidelines. People we spoke with told us they felt safe with their care workers.

There are safe systems for medicines management in place. Policies are in place for staff to follow. Medication records are audited by managers and we were advised that senior staff undertake "spot checks" to ensure good practice is being followed.

The provider has comprehensive infection control policies and procedures in place and manages the risk of infection well. Since the coronavirus pandemic, the service has implemented additional procedures around this which are detailed. Care staff confirmed that they have enough stocks of appropriate PPE and people receiving a service told us they felt safe.

## Leadership and Management

The service is provided in accordance with the statement of purpose which explains in detail who the service is provided for and how the service will be delivered. People using the service confirmed they had a copy of their service user guide provided to them when their care and support commenced.

There are comprehensive management arrangements in place to ensure effective oversight of the service and we saw a comprehensive range of required policies and procedures in place. We saw evidence of regular audits of all aspects of the service. The Responsible Individual (RI) has oversight of the service, visits the service and has regular meetings with managers and actively seeks the views of people who use the service. These views are reported on in both the providers annual and 6 monthly quality assurance reports. We found the RI's 3 monthly visits are not being undertaken as stipulated in the regulations. We expect the provider to take action to address this and we will follow this up at the next inspection. Care staff told us managers were approachable and supportive. We also saw correspondence from and spoke with professionals who were very complimentary about the effectiveness of the services managers and staff.

We saw evidence of robust recruitment procedures and knowledgeable and suitably trained staff are provided in appropriate numbers to support people. Staff told us they received regular and appropriate training for the people they support and we saw training records which confirmed this. Staff told us they received regular supervision and appraisal and we saw evidence of this. We saw meetings are being held with an individual's support team, but team meetings in regards the whole staff team are not taking place. We expect the provider to take action to address this and we will follow this up at the next inspection.

Care workers told us they have enough time to undertake their calls. People who receive the service and their relatives told us that care staff spend their allotted time undertaking support, some do more, on occasion and were rarely late. Staff rotas confirmed that people received support from small teams of around 7 care staff. People receiving support and their relatives also confirmed this was correct. We were told by individual's that there was consistency in the care staff who provided support. One person told us *"I know the carers who come to see me and they come regularly"*. Another said *"I don't have loads of different carers"*. Individual's also told us calls were never missed. One person said of staff *"they never let me down"*.

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

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<b>Areas where immediate action is required</b>	
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None	
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<b>Areas where improvement is required</b>	
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None	
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