



Inspection Report on

ND Care and Support

**NEW DIRECTION CARE & SUPPORT
39-47
SOMERSET STREET
ABERTILLERY
NP13 1DL**

Date Inspection Completed

02/12/2019

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Description of the service

New Directions (ND) Care and Support Limited is registered with Care Inspectorate Wales (CIW). The service provides personal care and support to older people, people with complex care needs and people living with a learning disability.

ND Care and Support Limited has a nominated responsible individual (RI) to represent the company. The manager is registered with Social Care Wales. The service premises are located in Abertillery, Blaenau Gwent.

Summary of our findings

1. Overall assessment

People are positive overall about the quality of support they receive and feel they have continuity of care and choice. Documentation is regularly reviewed and people's feedback is sought. There are improvements being implemented to the electronic call monitoring system to improve efficiency. There is clear oversight of the service by the management team and responsible individual (RI)

2. Improvements

This was the first inspection in accordance with the Registration and Inspection of Social Care (Wales) Act 2016. Any improvements will be considered at the next routine inspection.

3. Requirements and recommendations

Section five of this report sets out where any legal requirements are not being met and any recommendations. At this inspection it was identified improvements were needed in relation to people's personal plans upon the commencement of care.

Recommendations were made in relation to feedback forms, recruitment files, notifications to CIW, and induction processes for new staff.

Well-being

Our findings

People are happy overall with the standard of care received. We spoke to four people receiving support and two relatives. People told us they “*Couldn’t fault the regular carers*”. People told us there had been some difficulties in the past with continuity of staff, but had found this had significantly improved and there was overall a good level of communication with the office staff if any delays or issues arose. One person commented that this was an area that had improved recently. People told us care staff had a good understanding of their needs. We were told carers stayed for the duration of the calls and told us their carers “*Will go the extra mile if needed*”. We looked at feedback forms on people’s files and saw the feedback given was consistent with people’s opinions. We find people overall are satisfied with their support and people’s emotional and physical well-being is maintained.

People are given choice in their daily routines. People told us their carers would ask them before undertaking any tasks, and would respect their wishes. We were also told in some instances care staff would carry out additional tasks if it was necessary. We were informed care staff treated people with dignity and respect. We were told carers generally arrived on time and in most cases they would be consulted if there were any delays. We noted where people had expressed a preference for a particular carer, this was accommodated wherever possible. We are assured people are given control over all aspects of their support.

People are safeguarded from harm or abuse. CIW had been made aware of a concern prior to this inspection which was considered during our visit. We looked at safeguarding files and saw concerns were documented and reported whenever necessary. We saw copies of email exchanges attached to safeguarding records, which evidenced investigations and actions had been undertaken promptly when any issues had occurred. The management team were clearly familiar with all the safeguarding issues that had occurred. We conclude the service works to protect people and maintain their well-being.

Care and Development

People receive a consistent standard of care and support from staff who receive adequate support and training to carry out their roles. We looked at staff and supervision records and saw people received regular supervision and training, including training in specific medical conditions if this was required. Staff told us they enjoyed their work and felt supported, telling us they felt able to raise any issues with confidence these would be resolved. We saw staff received an induction before delivering care alone, although we found some of the forms which seniors completed when training new staff lacked detail or oversight, and recommended this needed to be addressed to ensure the forms were fully completed and any training needs clearly identified before new staff were signed off. We saw that care staff were responsive to people's changing needs and saw examples in files where care staff had identified and reported when changes in people's care had become necessary. We also saw when people had asked for changes in their care plan, this had been considered. We saw one example where a person had requested an additional carer in the evenings. A referral had been promptly made to the local authority occupational therapy team and a second carer provided as a result. People told us they had trust in their regular carers. We conclude people's care and support is appropriate for their needs.

People's care plans are detailed and monitored. We looked at five people's files during our visit. We saw personal plans were amended when changes occurred and here was evidence files were regularly reviewed and audited. However, we found in some instances, assessments and personal plans were not being completed within seven days of the commencement of care, in accordance with regulatory requirements. We discussed this with the RI and manager who explained there were difficulties in meeting with the service user and family in one instance but agreed this was an area that needed to be addressed. They gave us assurances improvements would be made to ensure provider assessments and personal plans were consistently completed at the commencement of people's care. We find the documentation is of a good standard but need to be completed in a timely manner in all instances.

People are regularly consulted about the standard of their care. We saw care plans were signed by either people receiving services or a family member. We also saw quality of care reviews were regularly completed with people and this was generally done in a face-to-face visit. We saw feedback given was positive overall. However, in three instances we saw people had raised an issue about an aspect of their care and it was not always clearly documented what action had been taken as a result of people's comments. We recommended that any actions should always be clearly recorded on feedback forms and if possible signed off by the manager or RI to confirm this. We are assured people's views are considered in the planning and delivery of their care.

Environment

Our findings

Environmental issues were not considered as part of this inspection. However it was noted that all documentation was stored securely on the service premises and all information technology was password protected.

Leadership and Management

Our findings

There is good oversight of the service. We spoke with the RI and manager throughout our visit, who spoke knowledgeably about all aspects of the service. We were shown a new statement of purpose which was being updated, which was reflective of the care and support provided. We saw accidents and incidents were recorded and monitored. We saw recruitment processes were generally robust. We looked at three staff files and saw gaps in employment histories had been explored and references were obtained. We did see one file where it showed the references had been requested but nothing on file; however, we were informed the references had been received but had not been filed. We recommended files needed to contain all appropriate information. The manager assured us this would be immediately rectified. We were informed a new recruitment officer had been appointed for the service and systems had been implemented to ensure screening of prospective employees was robust. We also saw there was one instance where CIW had not been specifically notified about the suspension of three staff members, although there had been a detailed notification about the incident which led to this eventual action. We recommended that a separate notification should have been submitted in these circumstances and were advised this would be taken forward. We find, overall there is a robust oversight of all aspects of the service.

There is attention to quality assurance. We had already viewed quality of care review forms which were regularly completed with people receiving services. We also saw regular team meetings were held with staff and managers and maintaining quality was routinely discussed, with feedback from staff welcomed. We saw a new electronic system was being implemented with the aim of improving call monitoring and improve care delivery for people by ensuring care plans would be immediately accessible and medication administration records (MARs) were completed electronically. We were told staff were being actively encouraged to register with Social Care Wales and financial incentives were offered to staff who completed this process. We saw audits by commissioning authorities were positive and saw one external agency had commented on the "*impressive standard of care*". We conclude consideration is given to maintaining quality within the service.

Improvements required and recommended following this inspection

Areas of non compliance from previous inspections

This was the first inspection in accordance with the Registration and Inspection of Social Care (Wales) Act 2016 (RISCA). Any improvements will be considered at the next routine inspection.

Recommendations for improvement

The registered persons were advised they were not meeting legal requirements in relation to Regulation 18(1) of RISCA. This is because provider assessments were not consistently completed within seven days of care commencing.

A notice of non-compliance was not issued on this occasion because there were no adverse outcomes for people receiving services and the registered persons assured us this would be immediately addressed.

We expect the registered persons to take appropriate action to address any legal requirements. This will be tested at the next inspection.

The following recommendations were also made:

- Recruitment files need to be fully updated with completed references.
- Notifications to CIW need to detail all notifiable events in full.
- Feedback forms need to record any actions taken as a result of issues raised.
- “Shadowing” forms for new employees need to be fully completed to ensure any learning needs are indicated.

How we undertook this inspection

This was a full inspection undertaken as part of our inspection programme and brought forward in relation to a concern raised with CIW. One inspector made an unannounced visit to the service on 6 November 2019 between 09.30 and 14.30 and an announced visit on 2 December between 10.00 and 13.30.

The following regulations were considered as part of this inspection;

The Regulated Services (Services Providers and Responsible Individuals) (Wales) Regulations 2017

The following methods were used:

- Discussions with three people receiving care and two relatives.
- Discussions with three care staff.
- Discussions with the manager of the service.
- Discussions with the RI.
- Discussions with external organisations working closely with the service.
- Examination of four people's care documentation.
- Examination of three staff personnel files.
- Examination of supervision and training records. Examination of other relevant documentation, where available, including accidents/ incidents and complaints records.
- Consideration of the service's policies and procedures, including the Statement of Purpose.
- Questionnaires were sent to people receiving services, relatives and staff. At the time of writing, none had been received.

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	ND Care and Support Limited
Manager	The manager is registered with Social Care Wales
Date of previous Care Inspectorate Wales inspection	This was the first inspection in accordance with the Registration and Inspection of Social Care (Wales) Act 2016. Any improvements will be considered at the next routine inspection.
Dates of this Inspection visit(s)	06/11/2019
Operating Language of the service	English
Does this service provide the Welsh Language active offer?	The service is working towards implementation of the Welsh Language active offer. Documentation and support can be provided bilingually, if requested.
Additional Information:	

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