



Inspection Report on

3D care (Cardiff) Ltd

**Alexandra Gate Business Centre Ltd
2 Alexandra Gate
Ffordd Pengam
Cardiff
CF24 2SA**

Date Inspection Completed

12 and 20 September 2022

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About 3D care (Cardiff) Ltd

Type of care provided	Domiciliary Support Service
Registered Provider	3D Care (Cardiff) Ltd
Language of the service	English
Previous Care Inspectorate Wales inspection	
Does this service provide the Welsh Language active offer?	The service provides an 'Active Offer' of the Welsh language. It anticipates, identifies the Welsh language and cultural needs of people who use, or may use, the service, but indicates that it would struggle to provide the staff with Welsh linguistic ability to fulfil the offer at present.

Summary

3D care Cardiff offers a personalised care service in people's own homes that is described as "*flexible*" and "*amazing*." Care is delivered in a dignified way by trained respectful care workers who make a difference to people's lives and family situation. The service often goes "*above and beyond*" to deliver care and support, sometimes outside of the contracted service required.

Care workers know people well and deliver appropriate care, but 'Service Delivery Plans' and associated risk assessments do not reflect the level of support provided. Care is delivered in a safe manner, appropriate to the needs of the person.

There is a responsible individual (RI) who oversees the quality of care delivery. They are integral to the smooth running of the service but are not fully undertaking their role in overseeing the management of the service. The service provider needs to make improvements to understand regulatory requirements and ensure these are met.

Well-being

3D care Cardiff considers the individual's circumstances and mostly ensures people understand what the service can provide. Assessments are undertaken by an appropriate person from the service before people are provided with a package of care. A 'Statement of Purpose' and 'Service User Guide' form part of the information the service gives to people so they know what to expect from the provider, but information around call times, complaints and advocacy is missing. There are good communication systems and people are informed about any changes such as slightly late calls. When people want to change a call time to suit their needs, the service listens and is flexible, providing care at an alternative time. People are regularly asked what they think of the care workers and service as part of consultations, they are also involved in reviews of their 'Service Delivery Plan.'

People are safe and mostly protected from harm. The service has robust recruitment processes to ensure the care workers are fit to work with vulnerable adults. Care workers receive training and are registered with the workforce regulator. Risk assessments and 'Service Delivery Plans' are in place though they need additional detail. When care plans state that two care workers are required, this is always provided, and moving and handling plans identify the equipment required to support safe practice. Information is available for people and staff so they know how to raise a concern or safeguarding issue, but some of this information needs updating. Care workers receive training around keeping vulnerable people safe, though the policy for safeguarding needs to be reviewed. Care workers are introduced to people by the RI so they know who is coming into their home. Care workers wear appropriate uniform and personal protective equipment when undertaking their role to help prevent spread of infection.

The service takes measures to support the well-being of people and protect the people that matter to them, such as their immediate family. Relatives of people receiving the service tell us how the RI has supported them in addition to their loved one, helping them to cope with the demands of providing 24 hour care. The service often goes above and beyond that required and stated in contracts, such as sourcing a TV when one had broken; people and their families appreciate this.

Care is delivered with dignity and respect. People are offered choice and consulted about the day-to-day tasks that they need support with. Care workers are kind and we are told that they make a difference to the well-being of people as they are always "*smiling*" and "*make a fuss*" of people. We are told that there are times where care workers eat their lunch with a person to encourage that person to eat and maintain weight.

Care and Support

People are happy with the care workers and the service they receive. People we consulted told us that the service couldn't do anything better and appreciate the care workers who are described as "*brilliant*" and "*lovely*." One person told us the care workers are "*so thoughtful, I wouldn't swap them*." Another person told us how "*things would be more difficult without the flexibility 3D offers*," and explained that the service helps them by moving call times to suit hospital appointments or day centre visits. We were told of many examples where the service and individual care workers 'go above and beyond' to make a difference to the lives of people and the family members who live with them, often in their own time and without being asked.

The provider meets with people before a package of care is started to capture important information about the person. They also carry out a risk assessment to consider how the service can be delivered safely. The provider needs to improve the detail within risk assessments to indicate levels of risk and the steps taken to mitigate these. A 'Service Delivery Plan' is in place to guide staff how best to support the individual. These give basic information but lack details such as the ability of the person to understand, or details around specific tasks, such as catheter care. This is an area for improvement and we expect the provider to take action. This will be tested at the next inspection. Quality surveys are conducted at the same time as care plan reviews, with documents evidencing that people take part in these. From the surveys, people rate all aspects of the service 'Good' or above.

People are contacted to let them know if the care worker is going to be late for a visit. People told us that they are informed and mostly understand if calls are running late, but care workers we spoke to told us that calls are often late as there is no time allowed between visits to get from one place to the other. The service does not keep audits of such information, and though there are no logged complaints or concerns, this could compromise the quality of care delivered. Daily records show that the appropriate number of care workers attend the call, that they deliver the care required, including any prompts or provision of medication.

We saw good communication between care workers and people, with care taken to ensure the individual could hear and understand. Though the service provider indicates they can make the 'Welsh Active Offer' to provide a service in Welsh, the RI explained they would find this difficult as not all care workers speak Welsh. We saw people treated with dignity, and offered choice around their support. People told us that they can communicate easily with "*the boss*," who will accommodate requests and is known to work on their day off to ensure service and satisfaction.

Leadership and Management

3D care Cardiff is a smaller service where one of the owners is the nominated responsible individual (RI); they also form part of the care team. The RI has made improvements to meet their regulatory duties, providing reports to evidence they have considered the views of people and other stakeholders when reviewing the quality of care offered, but these lack information about plans to maintain and develop the service. The RI has appointed a manager to oversee the day to day running of the service. The manager has been absent from the service for several months, and intends to be absent until the end of the year, conducting some work towards the running of the service while out of the country. The RI has failed to notify the regulator of the absence of the manager and the plans in place to cover their absence during this period. Some tasks, such as auditing, including medication, that would fall under the role of the manager have not been done. The RI is failing to monitor the effectiveness of the manager through formal meetings. Other regulatory requirements such as keeping policies up to date, including the 'Safeguarding' policy, is not fully met and the 'Service User Guide' doesn't include all necessary information. The provider has not ensured notifications have been submitted to the regulator as required. These are areas for improvement and we expect the provider to take action to address this. We will test this at the next inspection.

Personnel files are in place and contain relevant documentation. Pre-employment checks are carried out to ensure care workers are fit to work with vulnerable adults. The majority of records evidenced that the employer considers the full working history of an employee, investigating any gaps in employment as required, however, this could be more consistent. The RI carries out competency checks and supervision of staff. We saw the most recent copy of supervision meeting records but previous meeting records were not available. This is an area for improvement and we expect the provider to take action. This will be tested at the next inspection. Care worker have contracts with guaranteed hours of work, but tell us that other working conditions could be improved, such as allowing for travel time between calls and being paid for this.

The provider promotes development of staff, ensuring that they receive an induction and ongoing training. One care worker told us that they had only one day's induction, but worked alongside the RI and learnt a lot. The RI told us specialist care training is provided, such as catheter care, but this is not clear on the training records. Some care workers we spoke to considered that the service needs to provide better care training, especially around specialist care. The care workers are supported to register with Social Care Wales, the workforce regulator.

Summary of Non-Compliance

Status	What each means
New	This non-compliance was identified at this inspection.
Reviewed	Compliance was reviewed at this inspection and was not achieved. The target date for compliance is in the future and will be tested at next inspection.
Not Achieved	Compliance was tested at this inspection and was not achieved.
Achieved	Compliance was tested at this inspection and was achieved.

We respond to non-compliance with regulations where poor outcomes for people, and / or risk to people’s well-being are identified by issuing Priority Action Notice (s).

The provider must take immediate steps to address this and make improvements. Where providers fail to take priority action by the target date we may escalate the matter to an Improvement and Enforcement Panel.

Priority Action Notice(s)

Regulation	Summary	Status
N/A	No non-compliance of this type was identified at this inspection	N/A

Where we find non-compliance with regulations but no immediate or significant risk for people using the service is identified we highlight these as Areas for Improvement.

We expect the provider to take action to rectify this and we will follow this up at the next inspection. Where the provider has failed to make the necessary improvements we will escalate the matter by issuing a Priority Action Notice.

Area(s) for Improvement

Regulation	Summary	Status
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58	The provider does not have systems in place to audit the storage and administration of medication.	New
19	The provider is not ensuring that current and accurate information around complaints and advocacy is included in the information available about the service. This has been raised with the provider in the previous inspection and remains outstanding.	New
60	The provider is not always informing the regulator of events as required.	New
59	The provider is not keeping all documentation as required as outlined in the Regulations.	New
12	The provider is not ensuring that all policies are in line with current guidance, especially the policy around 'Safeguarding of Vulnerable Adults' in line with the All Wales Safeguarding procedures; and there is no clear evidence of when policies have been reviewed.	New
72	The provider has not informed the regulator of the manager's absence and arrangements in place to cover the smooth running of the service during this period.	New
66	The provider does not have systems in place to oversee the management of the service, including auditing and sampling of documents and records, and formal discussions with the manager.	New
15	The provider is not ensuring that Personal Plans contain sufficiently detailed Care Plans based on thorough Risk Assessment around people's need and safety.	New
6	The provider is not ensuring that the service is provided with sufficient care, competence and skill, having regard to the statement of purpose.	New
12	Provision of the service in accordance with policies and procedures (Regulation 12(5)): The service provider must ensure that all aspects of the service are provided in accordance with its policies and procedures.	Achieved
58	Arrangements for managing medication (Regulations 58(1) & 58(2)(c)): The service provider must have arrangements in place to ensure medicines are	Achieved

	administered safely and that they are regularly audited.	
74	Oversight of adequacy of resources (Regulation 74(1)): The responsible individual must report to the service provider on the adequacy of resources available to provide the service in accordance with Parts 3 to 15 of the Regulations.	Achieved

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