



Inspection Report on

Castell Care and Support - Powys

**Wales & West Housing
Ty Draig
Clos Dewi Sant
Deeside
CH5 3DT**

Date Inspection Completed

21/02/2022

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About Castell Care and Support - Powys

Type of care provided	Domiciliary Support Service
Registered Provider	Castell Ventures LTD
Registered places	0
Language of the service	English
Previous Care Inspectorate Wales inspection	12 July 2021
Does this service provide the Welsh Language active offer?	Working Towards. The service is working towards providing an 'Active Offer' of the Welsh language and intends to become a bilingual service or demonstrates a significant effort to promoting the use of the Welsh language and culture.

Summary

This was a focused inspection and, on this occasion, we did not consider care and support or leadership and management in detail. We inspected one of the services Castell Care and Support provides in Powys. People are satisfied with the support they receive, care workers are trained in areas appropriate to the care they undertake, and staffing levels are adequate. People's personal plans are detailed and give staff instruction how to undertake care and support for the person. Personal plans are reviewed in a timely manner with the involvement of the individual. Effective management oversight of the service is in place.

Well-being

People have control of their day to day lives. People or their representatives participate in the care and support they receive. People's personal plans are detailed and show pre-admission assessments have been undertaken prior to the person receiving support. Supporting professionals' documentation is also sought where appropriate and is also evident on people's files. Personal plans reflect the information gathered in pre-admission documentation and professional documents.

People are protected from potential abuse, harm or neglect. Reviews are undertaken with the individual in a timely manner, mirror information contained in professional documentation on file, and are an accurate reflection of what the person wants or needs. Training records show care workers are trained in areas appropriate to the work they undertake and there is a comprehensive management audit system in place.

People receive support with their physical and mental well-being. We spoke with people receiving care and support who confirmed support is provided in a timely manner and calls are not missed.

Care and Support

As this was a focused inspection, we have not considered this theme in full.

The provider ensures the service is suitable to meet the needs of individuals. Assessments are completed by appropriate members of staff prior to people receiving a service. This information is shared with staff prior to the service commencing. Care staff whom we spoke with confirmed this and that they see these assessments before they start supporting individuals. We saw documentation from health care professionals was requested and received prior to someone receiving support. Meetings between managers and professionals also take place before someone is supported at the service.

People's personal plans are accurate, in place and up to date. We viewed personal plans which were detailed, outcomes focused and gave staff instruction on how to support the person. Risk assessments are in place and personal plans reflect the needs outlined in both the pre-assessment and health care professionals' documents on file. Personal plans are kept and used electronically, however there is a robust back-up system in place if the provider experiences issues with their Information Technology. Care staff we spoke with confirmed care plans were detailed and gave them the information they required to undertake support. People we spoke with who received a service were satisfied with the service they received.

People participate in the support they receive, and personal plans are reviewed regularly. We saw people are involved in reviewing their personal plans and both people receiving support and care staff whom we spoke with confirmed this. We also viewed people's personal plans which had been reviewed in line with regulations.

The service has measures in place to ensure medication is administered safely. The provider has a comprehensive series of measures in place, such as regular and detailed management audits and regular staff training. These help to ensure medicines are administered correctly.

Leadership and Management

As this was a focused inspection, we have not considered this theme in full.

The service has effective management arrangements in place in regards the running of the service and to monitor, review and improve the quality of care and support provided by the service. We saw a comprehensive set of managers audits in place, which are undertaken on a regular basis and cover areas such as staff training, medication errors, and safeguarding. An officer has been recruited who completes regular quality and compliance audits of the service and drafts reports on their findings which are forwarded to senior managers. We saw the Responsible Individual visits the service in line with regulations and writes a report to support the visit

We viewed documentation which showed staffing levels are adequate. We were informed new staff had been recruited and are awaiting the providers induction before starting in their role. Care staff we spoke with confirmed staffing levels are adequate to support people. They told us they aren't rushed or distracted when undertaking support with people and no agency staff are currently being employed. People receiving support told us they are happy with the service they receive; care workers are on time and never miss a call.

Records reflect care staff receive an induction before starting work for the organisation and receive a wide range of training, including training around specialist health conditions. Care workers we spoke with confirmed they receive an induction before working with people, they receive training which was adequate for the role they perform, that they underwent training for specific health conditions and had just received specialist training prior to someone with a specialist health condition receiving support.

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
8	The service provider must ensure that there are effective arrangements in place for monitoring, reviewing and improving the quality of care and support provided by the service. Regulation 8 (1).	Achieved
14	The service provider must not provide care and support for an individual unless the service provider has determined that the service is suitable to meet the individual's care and support needs and to support the individual to achieve their personal outcomes. Regulation 14 (1)	Achieved
16	The personal plan must be reviewed as and when required but at least every three months Regulation 16 (1) When carrying out a review under this regulation, the service provider must involve the individual, the placing authority (if applicable) and any	Achieved

	representative Regulation 16 (4)	
34	The service provider must ensure that at all times a sufficient number of suitably qualified, trained skilled, competent and experienced staff are deployed at the service having regard to – (b) the care and support needs of individuals; (c) supporting individuals to achieve their personal outcomes Regulation 34 (1) (b) (c)	Achieved
36	The Service provider must ensure that any person working at the service (including a person allowed to work as a volunteer) (Regulation 36 (2)) (e) receives specialist training as appropriate.	Achieved
58	The service provider must have arrangements in place to ensure that medicines are stored and administered safely Regulation 58 (1) These arrangements must include the arrangements for – The effective ordering, re-ordering, recording, handling and disposal of medication. Regulation 58 (2) (b)	Achieved

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
N/A	No non-compliance of this type was identified at this inspection	N/A
15	The service provider must prepare a plan for the individual which sets out- (a) how on a day to day basis the individuals care and support needs will be met, (b) how the individual will be supported to achieve their personal outcomes (c) the steps which will be taken to mitigate any identified risks to the individuals well-being, and (d) the steps which will be taken to support positive risk taking and independence where it has been determined this is appropriate. Regulation 15 (1) (a) (b) (c) (d)	Achieved

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