



## Inspection Report on

**Homecare Matters**

**Healthcare House  
High Street  
Pentre Broughton  
Wrexham  
LL11 6AG**

## **Date Inspection Completed**

28 September 2022 & 6 October 2022

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## About Homecare Matters

Type of care provided	Domiciliary Support Service
Registered Provider	SLC Care Agency Ltd
Registered places	0
Language of the service	English
Previous Care Inspectorate Wales inspection	<a href="#">This is the first inspection of the service since it was registered under the Registration and Inspection of Social Care (Wales) Act 2016</a>
Does this service provide the Welsh Language active offer?	The service provides an 'Active Offer' of the Welsh language. It anticipates, identifies and meets the Welsh language and cultural needs of people who use, or may use, the service.

### Summary

People who are supported by Homecare Matters receive good quality care and support. People feel they are respected as individuals and are involved in the development of their own care and support. Care is provided from a consistent staff team, who understand people's support needs and treat people with dignity and respect. The care and support provided is delivered in a person-centred manner with a clear focus on people's personal goals.

Care staff are enthusiastic about working for the service and are keen to provide the best possible support to people. Care staff feel well supported and valued, they receive regular training and are able to seek support from management when necessary. The Responsible Individual (RI) has good oversight of the service and is committed to providing a service to improve the outcomes for people who use the service.

## Well-being

People have control over their day-to-day lives. People who use the service told us they feel listened to, and they have a say in how their care and support is to be provided. Personal plans are signed by the service user, evidencing their involvement in the planning of the support being provided.

The service supports people with their physical health, mental health and emotional well-being. People told us they feel supported to achieve their personal goals and they are encouraged to maintain their independence. Staff support people to access health services and keep a clear record of any correspondence with health professionals.

Care staff are friendly, caring and approachable. People told us they feel safe with the care staff and staff always treat them with dignity and respect. People told us they feel able to contact the management team if they have any issues.

The service has measures in place to identify, report and record any safeguarding concerns. People are supported by staff who receive regular safeguarding training and are familiar with the service's own policies and procedures.

## Care and Support

People are provided with the quality of care and support they need, through a service which is designed in consultation with the person. The service provider ensures people's wishes, aspirations and outcomes are considered. People told us they are happy with the care and support provided and they feel involved in the development of their personal plans.

The service has a strong focus on outcomes for people, and this is reflected in the personal plans. The service provides people with a 'This is me' document which emphasises what is important to the person, including their family, friends, interests and personal goals.

Personal plans are detailed and person centred, they clearly inform the care staff about the support the person requires at each visit. We found care plans promote independence and positive risk taking, by encouraging people to do as much as they can. The service's daily records illustrate the care being provided is in line with the personal plans. Personal plans and risk assessments are updated when changes are required to the person's care and support. We saw management approach people on a regular basis for their opinions on how well the service is meeting their needs.

The provider ensures people have continuity of care and support. Most people have the same team of staff who visit each week at around the same time. People told us they are introduced to new members of staff before the new staff member provides the support. Some of the people we spoke with said they would like to receive a weekly list of who is due to attend and at what time.

People told us care staff and management are very friendly and approachable. One person told CIW the carers "*are like family*" and "*they are a great bunch*". Feedback gathered from surveys included "*the staff are always polite, caring, considerate and professional whilst carrying out their duties*". And "*the staff are friendly, compassionate and kind, importantly, know my relative really well. My family member adores the staff and feels safe and valued with them, always looking forward to the visits*". Most people said they have not had a reason to complain, but would feel comfortable approaching staff or management if they did have an issue.

The service provider has effective mechanisms in place to safeguard vulnerable adults to whom they provide care and support. The service engages with the appropriate bodies when required and records are kept of safeguarding incidents, including what action was taken and the outcomes. Staff have regular safeguarding training and are aware of the service's safeguarding and whistleblowing policies and procedures.

The provider promotes hygienic practices and has effective measures in place to manage the risk of infection. The provider ensures staff have sufficient personal protective equipment (PPE) available to them. Care workers told us throughout the pandemic, the

provider had a continuous supply of PPE. The majority of staff have received up-to-date infection control training.

## Environment

The provider ensures that the service has the appropriate facilities to store relevant records and documentation securely. There are sufficient facilities in place to enable training sessions, team meetings and one-to-one supervisions.

## Leadership and Management

The provider has good governance arrangements in place to support the smooth operation of the service. The RI visits the service regularly, as part of their regulatory visits. We saw evidence they actively seek the views of the people who use the service and staff employed at the service. Care staff told us the RI is approachable, accessible and often seeks their views. The service gathers feedback from people who use the service, as well as capturing success stories which highlight the positive impact the service has on people.

People are supported by a service that provides appropriate numbers of staff. Staff employed at the service are suitably fit and have the knowledge, competency, skills and qualifications to provide the care and support. People are supported by staff who enable them to achieve their personal outcomes. We saw there are robust recruitment checks in place, the service actively seeks the appropriate references. Relevant identification checks are completed prior to the staff member commencing employment. Staff told us they are offered a guaranteed hours contract by the provider, but have chosen to remain on a zero hours contract as it provides more flexibility.

Staff we spoke with spoke positively about the support provided by the management team. Feedback from care staff included "*the management don't feel like management, it feels like a family*". Staff feel supported by the provider and are encouraged to speak to management if they have any concerns, the service operates with an 'open door' culture. However, the service has not been consistently completing the formal staff supervisions in line with the regulations. The provider assures us supervisions are scheduled for at least every three months, we will follow this up at the next inspection.

The service has policies and procedures in place which meet current national guidance and legislation and support people to meet their outcomes. The Statement of Purpose (SOP) accurately describes the service provided; it clearly states how and where the service is provided and the arrangements in place to support the delivery of the service.

The provider ensures appropriate travel time and care time is allocated. Care staff told us they usually have sufficient travel time between visits, and the duration of the visits are appropriate to meet the needs of the people who use the service. The care staff we spoke with told us, if the duration of a visit requires amending, this is arranged in a timely manner. One staff member told us "*I only have to have a word and things are done*". Some staff said they would like to receive their rota more in advance.

People are supported to be safe and achieve their personal outcomes, the provider has oversight of financial arrangements to ensure it is financially sustainable. The service has the appropriate insurance in place.



### Summary of Non-Compliance

Status	What each means
<b>New</b>	This non-compliance was identified at this inspection.
<b>Reviewed</b>	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.
<b>Not Achieved</b>	Compliance was tested at this inspection and was not achieved.
<b>Achieved</b>	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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N/A	No non-compliance of this type was identified at this inspection	N/A
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