



Inspection Report on

Radis Community Care (Gwent Region)

**Radis Community Care
Raglan House 6-8
William Brown Close
Cwmbran
NP44 3AB**

Date Inspection Completed

26/05/2022

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About Radis Community Care (Gwent Region)

Type of care provided	Domiciliary Support Service
Registered Provider	GP Homecare Limited
Registered places	0
Language of the service	English
Previous Care Inspectorate Wales inspection	Click or tap here to enter text. 03/09/2019
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

We found people overall receive a reliable service from care workers they know and who care about the support they give.

Most staff say they are supported by colleagues and managers. There are established processes in place to get to know people's needs, deliver the service and review the care provided. The service provider continuously monitors the service provided. Managers and the Responsible Individual (RI) have contact with people and their relatives.

Action is however, required to ensure all processes are consistently used in all the services provided by the agency.

Well-being

Individuals receive the support they need and want most of the time. Care staff build relationships with people, get to know them and seek their views and preferences. People speak positively about the care staff. We were told “*staff are really nice*” and “*nothing is too much trouble*”. One person told us they receive support from a regular care worker and they always have a good laugh with them. People said they know the care workers and spoke of regular staff they know well. They also mentioned some staff changing frequently. People all told us they receive the care and support they need.

People are supported to remain as healthy as possible. We noted they receive support to ensure their physical and mental health is as good as it can be. Feedback from people and records show the care and support they receive from care workers enables them to eat and drink well, to look after their personal care needs and to take their medication. We also saw that staff liaise with external health professionals when required.

There are measures in place to safeguard people from the risk of harm. There are risk assessments in people’s care records which show that the service provider reviews potential risks. There are care plans in place which tell care workers how a person needs and wants to be supported. However, we found three people did not have a care plan in place. Care staff are trained in safeguarding and know what to look out for and how to raise concerns if they suspect someone’s well-being is compromised. We saw the service provider investigates concerns brought to their attention and takes action when necessary.

Care and Support

Most people are satisfied with the service they receive. They speak positively about care workers and told us they know them. One person said if care staff are a bit late, they will let them know. People also spoke of understanding the pressure care workers are under. One person said “*they do their best*” and they are as “*caring as they can be*” in the allocated time. Another spoke about problems with traffic and said “*you have to put up with a certain number of things, they have a job to do*”. One person told us the agency keeps swapping care workers around. All the people we spoke to told us carers are mostly on time and they receive the care they need. Care workers told us on the whole they have sufficient time to travel from one person to another.

The provider considers a range of information before providing care and support. This includes information from people who are due to receive the service and, where relevant, their relatives and external professionals. People have a set of care plans and risk assessments which reflect all this information. This documentation includes life histories, likes, dislikes and needs. When people’s needs change and/or when people make choices which may not be in their best interests, the provider consults with relevant external agencies. We noted the plans reviewed were comprehensive and the tasks care workers must carry out are clearly detailed. However, we found care plans were not available for three people. This is placing people’s health and well-being at risk and we have therefore issued a priority action notice. The provider must take immediate action to address the issue.

Each person has a daily diary, in which care workers record the care and support they deliver. Senior staff review these diaries to check whether the planned care and support was delivered. They also visit people and/or ring people to get direct feedback, they review people’s care plans and medication records. We noted care plans are not always reviewed every three months as required. While no immediate action is required, this is an area for improvement and we expect the provider to take action. We also found when recommendations are made following an audit there is not an established system in place to follow these up and to check they have been implemented..

The service provider has systems in place to record and monitor the timing of the services provided. There is an electronic care monitoring system in place; care workers must log in and out each time they provide care and support. They must also manually record the time they arrive and leave in people’s daily diaries. Senior staff review the electronic logs generated and people’s daily diaries. The records we reviewed show, on the whole, people receive the service they expect. This confirms what people told us. However, we saw care workers do not always record in the daily diaries when they arrive and when they leave. In addition, the electronic logs show care workers do not always log in and out. We noted the service provider has identified these issues. The RI told us they are piloting a new bar code

system in another area. The new system is due to be introduced in Gwent and should address the issues they identified.

Leadership and Management

The service provider has an established management structure and systems in place to support the smooth operation of the service. The RI oversees the services provided by the agency. They oversee progress and development. They ensure checks are carried out and collate the views of people who use the service, their relatives and staff. The agency has a team of managers and other senior staff in post with defined areas of responsibility. They are responsible for the day-to-day operation of the service. All play a part in checking the quality of care provided. We saw evidence of ongoing audits which take place; these include the RI's quarterly visits to the service. The agency's statement of purpose was not up to date at the time of the inspection, but an updated copy was submitted before this report was written. There was no overall quality of care review report available. While no immediate action is required, this is an area for improvement and we expect the provider to take action.

People are supported by staff who are vetted and trained. The records we examined show the provider carries out checks when recruiting staff. New staff receive an induction and all staff receive training relevant to their roles. Care workers hold zero hours contracts. They told us they have not been offered alternative contracts. We discussed this with the RI. The legislation requires service providers to offer domiciliary care workers on non-guaranteed hours contracts the choice of alternative contractual arrangements. They told us this is currently being looked at. While no immediate action is required, this is an area for improvement and we expect the provider to take action.

Most of the staff feel supported. They told us "*there is always somebody available*", "*it is a good company*", they work with "*a very good group of people*" and they are supported by the managers. They said they receive the training they need. One senior staff member told us they are supported by their manager but this is limited because the manager is busy themselves. A care worker told us their manager oversees two teams and they do not see them often. Feedback from people and records show there is ongoing contact between care workers and senior staff. However, we found formal supervision sessions have not taken place at least every three months and staff have not had annual appraisals. We saw the manager had identified the lack of supervision sessions prior to the inspection and is in the process of carrying out new supervisions. While no immediate action is required, these are areas for improvement, and we expect the provider to take action.

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
15	The service provider must ensure there is a care plan in place for each of the individuals they provide a service to.	New

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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42	Domiciliary care workers hold zero hours contract, they must be given the choice to opt for a different contract.	New
36	The service provider must ensure all staff receive appropriate supervision and an annual appraisal.	New
16	The service provider must ensure personal plans are reviewed as and when required but at least every three months.	New
80	The responsible individual must prepare a report to the service provider when they review the quality of care and support.	New

Date Published 20/09/2022