

Inspection Report on

Active Care Group - North Wales

2nd Floor 1 Suffolk Way Sevenoaks Kent TN13 1YL

Date Inspection Completed

1 September 2023



About Active Care Group - North Wales

Type of care provided	Domiciliary Support Service
Registered Provider	Staff Management Limited
Registered places	0
Language of the service	English
Previous Care Inspectorate Wales inspection	This is the first inspection of the service since it was registered under the Registration and Inspection of Social Care (Wales) Act 2016
Does this service promote Welsh language and culture?	This service is working towards an 'Active Offer' of the Welsh language.

Summary

People and their families are happy with the care provided by Active Care Group. They are fully consulted when designing their plan of care and their preferences are recorded. They choose who supports them experience good continuity of care. They know the staff who support them well, so they feel safe and develop trusting, respectful relationships. Care planning is comprehensive, and the range of risk assessments together with staff training help make care delivery safe.

Professionals are happy with the service provided to people and the communication from staff and the manager. They praise the interaction they see between staff and people they support and confirm people are happy with their care. Staff are supported by team leaders who see them regularly to discuss their own wellbeing and reflect on practice. Staff and people's views are sought about the agency. Their views are collated so the service knows what works well and where it needs to improve.

Well-being

People have choice and control over their care. Their views are sought on what matters to them, what they want to achieve and how they prefer their care to be delivered. People said they always feel they have a choice and are encouraged to express this. We saw examples of people choosing who is to support them, how they are going to be supported and what they are going to do. People are supported to live their lives how they wish to, maintaining relationships and socialising. One person said they did not feel they would get along with a specific staff so that staff was not asked to support them.

People receive the right care and support when they need it. Care plans are drawn up and agreed with full consultation from people using the service, their family and any professionals involved. Regular reviews of the care plan help ensure they are accurate and changes made where needed. Care staff make sure people get medical and health guidance when it is needed by supporting people on appointments when needed. People told us the care is flexible and the manager of the agency always tries to accommodate requests such as holidays. People told us they feel safe, and they are helped to do what keeps them well and happy. They benefit from continuity of care, developing good relationships with their care staff and gaining a sense of security from knowing staff are familiar with their needs and preferences. One person recalled how when a staff was sick, the team leader came in to help instead. People feel the agency is reliable and they can be confident their care needs will be met.

People are protected from abuse as staff receive training on safeguarding and there are policies and procedures to guide them. They know when to raise concerns to management about people's well-being and have opportunities to do so in the frequently arranged one-to-one meetings with their team leaders. Care and social activities are risk assessed to ensure people are always kept safe and well.

People are supported to maintain family and personal relationships and keep their connections with their local community. People told us of their visits to family, their attendance at local social and music events, their holidays and trips out. People socialise when they go shopping and attend social clubs and day care centres if they wish to. People we spoke with are all happy with the way they spend their lives.

Care and Support

The service provider considers a range of views and information to build an accurate picture of the person, their needs and wishes. We saw other professionals, family members and people receiving services are consulted fully about what care is needed and how this is to be provided. People are asked about what matters to them, what their interests are and what makes them happy so that plans are person centred and staff are well informed. Care plans contain a lot of information to guide staff. We saw there is a team of people who work on identifying staff with the right skills to support individuals based on the assessment of need.

People have an up to date and accurate plan for how their needs are to be met. We saw personal care plans include agreed outcomes and are set out clearly in care domains such as communication, moving and handling, nutrition, breathing, continence. Risks are identified and actions to take to reduce these. Care plans are reviewed every three months, or sooner if care staff identify changes to needs within that period. The team leader or manager of the service visits people to check the care plan is still accurate and make changes or additions if needed.

People have a quality of care and support they need through consultation and good care planning arrangements. A professional told us how outcomes are achieved for people; they do what they want, visiting family and going out for day trips, shopping and other things that matter to them. There is good continuity of care so people form good relationships with staff they know well. People told us they choose what they want to do and are supported to do it. Some have been on holiday with support; they attend college and social events. People and their family described care staff as 'marvellous', and 'we don't know what we'd do without them'. The service's statement of purpose confirms documents can be provided in Welsh for those who have Welsh as their first language.

Care staff monitor the health and wellbeing of people they care for and will arrange GP appointments or seek other health care guidance if needed. They ensure people have the correct medications and do everything they can to access other services to improve wellbeing. One person told us how they feel safe and happy with their care staff supporting them. They can relax knowing someone else is helping them stay well.

Leadership and Management

The service provider has governance arrangements in place to help ensure the service runs smoothly. The RI (responsible individual) who oversees the service for the providers, meets with the manager every month for an overview of the operation and to support the manager. We saw audits are carried out on various aspects of the agency operation; complaint investigations, notifications, safeguarding, incidents and accidents are recorded and analysed. Reviews are carried out with face-to-face visits to people using the service and people's views are sought. Professionals told us communication is good; they are confident they would always be notified quickly if there were any concerns. Staff told us it is easy to contact the management team and they feel comfortable doing this at any time.

The RI has good oversight of the service. Quality of care reviews are completed every six months where key performance indicators are analysed, and views are sought; audits are completed to ensure records are up to date and policies and procedures are being adhered to.

People are supported by care staff who are suitably fit and have the required knowledge and skills to help people achieve their personal outcomes. We saw safe recruitment procedures are followed and care staff are properly vetted. People are supported by staff who are skilled to meet their needs. In addition to mandatory training in health and safety areas, specialist training is given for individuals unique needs. All staff feel competent; they have expressed a preference for more face-to-face training and the manager has listened and is arranging more of this. The agency is in the process of registering all care staff with Social Care Wales; this ensures anyone providing support to people are competent and qualified to do so. Staff receive one to one supervision frequently and can discuss the work they do and raise issues in confidence. They told us they can pick up the phone at any time to discuss concerns.

Staff enjoy working for the agency. They praise the manager for being approachable and quick to respond if they have any queries. Staff said they feel they are well supported; they enjoy their work and feel valued. From speaking with staff, it is clear they are happy and passionate about their work, and they care about the people they 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	

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	N/A
	inspection	

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