



Inspection Report on

Deeside Home Care Ltd

**Deeside Home Care Ltd
54 Chester Road West Shotton
Deeside
CH5 1BY**

Date Inspection Completed

22 March 2023

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About Deeside Home Care Ltd

Type of care provided	Domiciliary Support Service
Registered Provider	Deeside Home Care Ltd
Registered places	0
Language of the service	English
Previous Care Inspectorate Wales inspection	This is the first inspection of the service since it was re-registered under the Registration and Inspection of Social Care (Wales) Act 2016.
Does this service provide the Welsh Language active offer?	This service does not provide an 'Active Offer' of the Welsh language and does not demonstrate a significant effort to promoting the use of the Welsh language and culture.

Summary

The service provides reliable, flexible care to people living in their own homes who need support to help maintain their quality of life. The focus is on promoting independence and supporting people to live in their own homes safely and happily. People are very happy with the care they receive; they enjoy good relationships with care staff who they describe as warm and friendly. People have choice and control about all aspects of their care and know care staff will be flexible should their needs be different on any day.

The care agency enjoys successful care staff retention because care staff are very happy to work for them. They describe their employers as a service that genuinely cares. They feel valued as a team of care staff, their views always considered and acted on. The provider is proactive in seeking people's views of the service, they know what the service does well and search for ways it can possibly improve. The culture of the service ensures care staff always place people's outcomes at the centre of what they do. Professionals praise care staff for their competence, their experience and their caring approach. They praise the agency for being so involved and person centred.

Well-being

People have choice and control over their care. They are fully involved in the planning and reviewing of the support they are given. People told us they have previously made changes to their care, asking staff to do tasks not included in the plan of care. Care staff and the management of the service are flexible and amenable to people's requests. People told us carers go above and beyond, according to their needs on that day and their preferences.

People's health and well-being is a priority to the care staff and the service. Care staff are competent, experienced and confident to support people's health and well-being in any way they can. Care staff use their initiative to instigate referrals to relevant professionals such as an occupational therapist when someone needed an alternative sling for their hoist. A professional told us staff and management pre-empt situations and work with them to ensure contingency plans are in place to protect the person.

People are protected from abuse through the provision of training to care staff and the service's own policies and procedures; the management promotes a culture of integrity and proactivity. We saw safeguarding referrals have been made by the service when there have been concerns, risk assessments have been put in place to help keep people safe. The team meetings held every two weeks offer an opportunity for staff to discuss practice, any issues and challenges so any potential safeguarding matters can be identified quickly.

People's social well-being is important to the service. Recreational activities, while not formally part of the care plan, are considered as important by the provider and care staff. Care staff proactively seek out social events in the community, share this with each other in meetings and on the staff notice board and then direct people who need more engagement with others. The service arranges community transport for people to get out. The service was able to arrange a Christmas meal for people living alone through a local community charity.

While accommodation is not the service's responsibility, care staff feel strongly people should have the equipment they need to be as independent as possible. They know who to approach if they do not feel the person has access to all they need. They know how to raise any concerns they may have about the safety and security of the home. They know who to approach if vital equipment is broken or not in place.

Care and Support

The provider considers a wide range of views and information to ensure the service can meet needs and support people to achieve their outcomes. Initial assessments and care plan documents show people and their families are at the centre of plans; district nurses, social workers, occupational therapists and other professionals also contribute. People's outcomes are recorded with directions and guidance for care staff on how to help them achieve these in a way that respects their preferences. Care plans consider people's strengths and skills and promote maintenance of independence. A professional told us; *"they know (how to help the person) achieve her best outcomes, such as prompts and explaining clearly what they are about to do/assist with; at the same time, they promote independence and support the service user to maintain her level of participation"*.

Plans are kept accurate as they are reviewed every three months, or sooner if needed. Changes are highlighted and new documents written when needed. We saw the manager send surveys to everyone involved in the review so, even if they are unable to attend the review meeting, they can contribute by making suggestions and confirming what is going well and what needs improving. People told us they can change their plan; the manager visits them to check they are happy with the care delivered.

People are consulted, not only when designing the plan of care, but daily. Daily records show care is delivered as required on that day, care staff taking into consideration how the person feels, what they need at that time. People told us they can make changes on the day if they want. They said, *"care staff go above and beyond, they are excellent"*. A professional also confirmed; *"I would recommend this care agency; it's one of the most involved, and person centred I have worked with"*. Every person and family we spoke to praised the care staff for their approach, their kindness and warm friendliness. One person said, *"we have tried lots of different agencies and these are the best we've ever had"*. Every person said they had never had a care staff fail to turn up. Even in recent heavy snowfall, staff carried out all of their planned visits; the responsible individual (RI) and manager used their own cars to transport care staff around and ensure everyone received the care they needed.

Care staff check on the health and wellbeing of people they care for and will arrange GP appointments, or guidance from other social care and health professionals if required. We saw texts sent from care staff to the office mobile phone, requesting someone chase up a prescription, another request asked the management to arrange a District nurse visit.

Leadership and Management

The service provider has governance arrangements in place to support the smooth operation of the service and ensure quality care and support for people. The RI is in the service office every week but formally reports on their findings of checks and measures every three months. These reports evidence the views of around half the people who use the service are sought every three months. We saw records of spot checks carried out to monitor the compliance of care staff, that they are carrying out their role according to the service's policies and expectations. People using the service told us the manager visits them to check they are satisfied with the care they receive.

The manager and RI carry out audits of processes including care planning and medication administration; correct procedures are followed, and administration of medication is accurately recorded. A quality of care review report carried out every six months is comprehensive and identifies what is working well, the evidence for this and also where improvements might be made. The provider is candid in their quality audit, and shows they are keen to identify ways to further improve.

Individuals are supported by a service that provides appropriate numbers of care staff who are suitably fit and have the knowledge, competency, skills and qualifications to provide the levels of care and support required to help people achieve their personal outcomes. We saw safe recruitment procedures are followed; care staff are properly vetted. Records show a wide range of training has been provided to every staff including specialist training to enhance knowledge of individuals' needs. Staff told us they feel competent to carry out their role. They feel valued and well supported.

Care staff are paid to attend training, they are paid for their travel time to each person's home and they are paid to attend team meetings. The benefits of fortnightly team meetings is very evident; staff said the team meetings bring them together as a team, building relationships and making them feel accountable to each other. Staff told us they value and respect the management of the service. Four care staff have worked at the agency for between seven and eleven years and two staff returned to the agency after a break. They told us they choose to work here because the providers "*genuinely care*".

The service provider has oversight of financial arrangements and investment in the service so that it is financially sustainable and supports people to be safe and achieve their personal outcomes. The provider values their care staff and recognises happy staff are motivated and likely to remain loyal to the service. The manager explained the service is in no rush to grow, they would rather allow it to develop in its own time and focus on the quality of the work, not the quantity. It is clear the manager is proud of the service and promotes a positive culture.

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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N/A	No non-compliance of this type was identified at this inspection	N/A
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Date Published 20/04/2023