



Inspection Report on

Phoenix Homecare and Support Limited (North Wales)

**Phoenix Homecare & Support Ltd
Rhosddu Industrial Estate
Wrexham
LL11 4YL**

Date Inspection Completed

7 June 2023 & 15 June 2023

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About Phoenix Homecare and Support Limited (North Wales)

Type of care provided	Domiciliary Support Service
Registered Provider	Phoenix Homecare and Support Limited
Registered places	0
Language of the service	English
Previous Care Inspectorate Wales inspection	27 July 2021
Does this service provide the Welsh Language active offer?	This service is working towards providing an 'Active Offer' of the Welsh language and demonstrates a significant effort to promoting the use of the Welsh language and culture.

Summary

Phoenix Homecare and Support Limited (North Wales) provide domiciliary support services to adults over the age of 18, across Wrexham and parts of Flintshire.

People are supported to maintain their independence within their own homes. Care staff are enthusiastic about providing the best possible care to people who use the service. At the time of the inspection, the service provider was experiencing staff shortages. Measures have since been taken to ensure staff have sufficient travel time and time to provide assistance, in order to help people achieve their personal outcomes.

Well-being

People are supported to maintain their independence. Personal plans promote independence and enable people to do as much as they can, having control in their day to day lives. People told us they feel listened to and know how to raise issues if they have any.

People are supported to maintain their physical, mental health and emotional well-being. Where people require assistance to access health services, the service contact the relevant health professionals in a timely way. We received positive feedback from external professionals regarding correspondence with the service.

People are protected from abuse and neglect, the service provider ensures safeguarding concerns are recorded and reported to the relevant authorities. People are supported by staff who complete regular safeguarding training and are familiar with safeguarding procedures.

Staffing shortages has led to issues with the care delivered and at times it is having an impact on people who use the service. The service is currently working with the Local Authority to address issues regarding low staffing levels, to ensure people receive continuity of care.

Care and Support

People are provided with care and support, through a service which is designed in consultation with them. We reviewed a selection of personal plans, we found the service provider carries out thorough pre-assessments prior to agreeing to provide a service to people, this means they are sure they can meet people's individual needs before providing the service. Care staff work from personal plans which inform care staff on how best to support the person. Care plans promote independence by enabling people to do what they can. Staff complete the relevant documentation, including daily records, these evidence people receive care and support as directed by their care plans. We found, where people require assistance to access health services, the service provider seeks the appropriate advice in a timely manner.

Overall, people are happy with the care and support they receive from the service. People told us they feel respected as individuals and care staff treat them with dignity and respect. Most people we spoke with, told us the care staff understand their needs and said most of the time, carers have sufficient time to provide assistance. Comments from people we spoke with include "[I am] *very satisfied with Phoenix. The staff are very good and they do all I require*". Another person told us the staff are "*Very good, I find. I couldn't do without them. They are so nice, all of them*".

The service provider has mechanisms in place to safeguard people who use the service. Most people we spoke with, told us they feel safe with care staff. The service provider has effective systems in place to record and report safeguarding concerns, outcomes are recorded where these have been obtained. The safeguarding policies and procedures are mostly in line with current guidance and legislation. Staff we spoke with, told us any safeguarding concerns they have raised have been dealt with accordingly. All staff receive regular safeguarding training and are familiar with safeguarding procedures, this means people can be confident staff understand what to do if they identify a safeguarding concern.

The service provider has effective measures in place to promote hygienic practices and manage the risk of infection. There are policies and procedures in place which follow current guidance, these are accessible to staff. Staff we spoke with, told us the provider has sufficient supplies of Personal Protective Equipment (PPE). People we spoke with, told us care staff always wear the appropriate PPE and change these as and when required.

The service provider has safe systems for medicines management. There is a medication policy in place, which is in line with current national guidance and legislation. Care staff receive regular medication training and medication competency assessments, therefore

people can be assured staff understand how to administer medication safely. Care staff keep accurate Medication Administration Record (MAR) charts, any issues are quickly identified by the management team and addressed accordingly.

Leadership and Management

The service provider has governance arrangements in place to support the running of the service. The service provider has policies and procedures in place, which support the service to help people achieve their personal outcomes. Policies and procedures are mostly in line with current national guidance and legislation, these are reviewed regularly. The Responsible Individual (RI) has oversight of the service and is office based throughout the week. The RI seeks the views of staff and people using the service, on the running of the service. The Quality of Care Review reports identify areas in which the service can improve, the provider puts measures in place to address the issues identified within the reports.

External professionals we spoke with, spoke positively about the service. They told us the service meets the needs of the people they are involved with and staff at the service are very quick to respond and they make referrals when required.

The service provider has oversight of financial arrangements and investment in the service, in order to be able to support people to achieve their personal outcomes, including on-going staff training. The provider has a designated staff member to manage the recruitment at the service. At the time of the inspection, the service provider was experiencing staff shortages. Staff shortages mean, staff do not always have adequate travel time or enough time to fully support people. Staff who work at the service and people who use the service, told us this is sometimes having an impact on the quality of the care provided. The service provider are taking the appropriate measures to address this issue and have assured us this will be resolved. This is an area for improvement and we will follow this up at the next inspection.

The service provider ensures staff employed at the service are suitably vetted and receive the appropriate training to meet people's needs. Most staff we spoke with, told us they feel supported by the management team and the managers are approachable. Staff told us they have regular supervisions. We reviewed a sample of supervision and appraisal records, we found these provide staff with the opportunity to receive feedback, reflect on their practice and review training and development needs. From reviewing training records, we found most staff receive regular training and are provided with the opportunity to have specialist training. The service provider has systems in place for staff to receive daily updates and carry out regular staff meetings, to ensure information is shared when needed.

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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34	The service provider has not ensured there are a sufficient number of staff, to meet the care and support needs of people who use the service.	New
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