



Inspection Report on

Home Service Solutions Ltd.

**Home Service Solutions
Office 3 Sandfields Business Centre
Purcell Avenue
Port Talbot
SA12 7PQ**

Date Inspection Completed

16 August & 8 September 2022

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About Home Service Solutions Ltd.

Type of care provided	Domiciliary Support Service
Registered Provider	Home Service Solutions Ltd.
Registered places	0
Language of the service	English
Previous Care Inspectorate Wales inspection	
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

Home Service Solutions Ltd is a small domiciliary support service that operates from accessible offices based in port talbot. The service is provided within the regional partnership area of West Glamorgan. People and or their representatives are involved in the planning of their care and have personal plans which accurately reflect their needs. There has been a high turnover of staff in recent months and all care workers are relatively new in post. At the time of the inspection some care workers were working without an appropriate Disclosure and Barring Service (DBS) check in place. This is a breach of regulations and, an urgent priority action notice was raised. We instructed the provider to stop these care workers from working with people until these checks were completed and satisfactory. The Responsible individual (RI) is visible in the service and regulatory reports are completed as required.

Well-being

People have a voice and personal plans are written from their perspective. Personal plans are detailed and give a good overview of the person, their personal history, likes and dislikes and what matters to them. These plans are updated to ensure they meet the current needs of the people they support. Feedback from professionals in relation to the care workers providing the service to people was positive. Care workers spoken with felt they can build a good rapport with those they supported and were getting to know them well.

Improvements are required to ensure that people are protected from harm and neglect. We saw robust recruitment procedures are not in place and immediate improvements are required to ensure thorough background checks including up to date DBS checks are in place prior to introducing care staff to people receiving the service. There are policies and procedures in place for all aspects of the service. These are reviewed routinely. Care workers in post are relatively new and are enrolled in the providers online learning platform and are working through the required units. Care workers confirm they are given sufficient supplies of personal protective equipment (PPE) to minimise the risk of cross infection.

The manager and RI are visible in the service routinely. The RI routinely speaks with people receiving the service and their representatives and where possible, visits them in person. The RI completes quarterly and bi-annual quality of care reports using the templates available on their electronic software package they have invested in. At the time of inspection, regulatory mandatory notifications were not always submitted to CIW appropriately. Improvements are needed to ensure compliance with these requirements.

People are treated with dignity and respect by care workers who feel supported and valued in their roles. Feedback from care workers about the service is positive with all saying they feel supported in their roles. Care workers in the service are all new in post and the provider is registering them onto an e-learning programme to ensure that training is prioritised. Care workers are being supported to register with Social Care Wales and some are already registered.

Care and Support

Overall, people are provided with the quality of care and support they need through a service designed in consultation with them. We looked at one care file and saw a very detailed personal plan that reflected the individual and their current needs very well. A life storybook was in place that gave a very good oversight of the person's life, and all the things that are important to them. These documents are written in the first person. We saw signatures in the file to confirm the individual's involvement in the process of writing them and confirmation that the next of kin was also in agreement. Personal plans have been reviewed within the last three months and corresponding risk assessments are also in place. We were unable to obtain feedback from people directly using the service. However, feedback from professionals include: "Some carers who have been looking after X have been excellent in terms of professionalism and approach to their work"

People are supported to maintain their health and well-being. Care workers told us that they had received competency checks from the management team in regard to assisting people with medication and felt confident in doing so. We saw detailed recordings in care files of communication between care staff, the service and medical professionals; We saw good, care and support plans in place for medical conditions, nutritional needs and well-being so care workers know what to do if they have any concerns.

Improvements are needed to safeguard individuals receiving the service. Feedback from professionals is mixed and concerns raised regarding continuity of care in the past due to staff shortages. Comments include "*there have been several occasions whereby carers have not been available, and no cover has been provided*" and "*on a few occasions the agency have asked for support to cover the package of care at short notice due to unforeseen staffing shortages*". We spoke to the RI about this, and he assured us that this is no longer the case as he had recruited additional staff. However, on looking through personnel files we discovered care workers were working without appropriate Disclosure and Barring checks in place which is a mandatory regulatory requirement. This places people at risk and a safeguarding referral was raised to the Local Authority for the affected individuals. The service has a safeguarding policy in place and training of care workers is being prioritised.

Environment

The environment is not a theme which is applicable to a Domiciliary Support Service. However, the office premises are on the ground floor, accessible and are clean. They are situated in a purpose-built building which has adequate parking. There was no confidential information on display. Paperwork is stored in locked filing cabinets and electronic records are stored on password encrypted devices and can be accessed remotely if required. Environmental risk assessments are in place prior to the commencement of the service in people's home to ensure a safe working environment for care staff.

The service promotes hygienic practices and manages risk of infection. Care workers spoken with confirmed they are well stocked with their personal protective equipment (PPE) needs. The service has an infection control policy in place, and they adhere to the updated guidance.

Leadership and Management

The oversight of the service is improving. We saw the RI is utilising the software package of which they have invested to assist with the completion of regulatory reports. We saw these include three monthly regulatory and six-monthly quality of care reports. We saw quarterly reports include feedback from people receiving the service. Quality of care reports are also completed in appropriate timescales to meet regulations. The information and feedback seen on these reports are used to drive improvements in the service. The software package has audit tools in place to assist the RI in their governance responsibilities. We saw these audit tools are being better utilised. The RI explained that it is planned for more of these tools to be more fully utilised in the future to ensure robust oversight.

Improvements are needed to ensure care workers are suitably vetted and recruited to meet the needs of people. We looked at two personnel files and saw required documentation for appropriate employment and background checks was not in place. Pre-employment reference checks were not available in personnel files and at the time of the inspection. These were submitted and seen by the inspector electronically following the inspection, but should be in personnel files ongoing. Disclosure and Barring service (DBS) checks were not seen. One file had an expired DBS which was not enhanced and had not been reviewed under regulatory timescales, the other had no record of a DBS application at all. This is a regulatory breach and needs to be addressed immediately. This is having an impact on people's safety and well-being and placing them at risk, and we have therefore issued an urgent priority action notice. The provider must take immediate action to address this issue. A safeguarding referral was raised by the inspector. The provider was notified to withdraw these Care workers from their care duties immediately.

Care workers feel valued and supported in their roles. Comments include: "*they are supportive to be fair and are always the other end of the phone*" and "*they have been so good with flexibility for me*". We saw the training matrix has significant gaps in staff training. However, the RI explained that as all the staff are new in post it would take time for them to complete. Care workers confirmed that they had received induction training and were aware of the need to log into their individual training plans to complete e-learning modules. Care workers who have been in post longer than two months confirmed they receive supervision routinely and have an opportunity to discuss any issues on a one-to-one basis.

Improvements are needed to ensure notifications are submitted to statutory agencies and regulatory bodies when there are any concerns or significant events that effect individuals. We saw there had been historic safeguarding referrals about issues in the service that had not been notified to CIW. The provider was not aware of the requirement to submit notifications of such events but will ensure that submissions take place for any future notifiable events. This is an action for improvement and will be followed up at the next inspection.

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
35	Two of the three care workers employed by the service were providing direct care to people without a DBS check being carried out. A further staff member who had been in post for some time has an expired DBS on file, however this was not an enhanced DBS as required for all care staff who have direct contact with people whether in a caring capacity or administrative.	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
60	The service provider has not notified the service regulator in a timely manner of events as specified in Parts 1 and 2 of Schedule 3.	New

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