

Inspection Report on

Delight Care and Support Services

Alexandra Gate Business Centre Ltd
2 Alexandra Gate
Ffordd Pengam
Cardiff
CF24 2SA

Date Inspection Completed

20 and 24 February 2023



About Delight Care and Support Services

| Type of care provided | Domiciliary Support Service |
|--|---|
| Registered Provider | Delight Care and Support Services Limited |
| Language of the service | English |
| Previous Care Inspectorate Wales inspection | [Manual Insert] |
| 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

Delight Care provides care and support to people in their own homes, mostly in the North of Cardiff. A consistent small team of care workers provides a reliable service, showing respect and upholding people's dignity by doing the little extra things that make a big difference to people. People tell us "*They do a good job and really care about you.*" Care plans contain good detail, but the provider is working on improvements required around some documentation and medication records.

The provider is the responsible individual (RI) and manager. They run the service smoothly and have oversight of the quality of care provided. They are making improvements to ensure their knowledge of all aspects of the running of the service is up to date. Good recruitment systems are in place, induction and training is provided, with more in-depth training arranged. Policies, procedures and other documents are available.

Well-being

People's voices are heard and listened to. Information about the service is available for people so they can make decisions about their care. People or their representative are part of the assessment process before the service starts to provide care and support. People's preferences are considered, and where possible, met. If any aspect of care needs to be reviewed, the manager listens and supports this, contacting relevant professionals if required. Care plan reviews are documented. Care workers are carefully matched to provide the care and support people need. The RI consults people as part of the review of quality of care, to seek their opinions and views of how the service can improve. The manager is in touch with care workers almost daily to gain any feedback from people, so they are aware of any changes required.

The provider supports people to stay as healthy and active as possible. Care plans are followed so that people get the right care and support. When people find it difficult to understand or manage routines, these are supported through the care workers. They also have help to monitor their general health, with action taken to involve professionals such as doctors if issues are identified. Care workers know people very well and notice when someone needs specialist help with their health, taking action to address this. Daily records keep evidence of how people are feeling, and where appropriate, record if people have been eating and drinking to maintain their health. Medication records show when people have had support to take their medication, but improvement is required to ensure consistent recording. Some people have support to go into the community, and this is encouraged. Some people need support with their mental health, and this is provided.

The safety of people is considered by the provider. Policies and procedures give information so that care workers can carry out their duties safely. People and staff have information about complaints procedures and details are available about safeguarding vulnerable adults. People and their representative confirmed that communication with the service is good and they know how to raise a concern. Risk assessments are being reviewed to ensure they capture information about the environment where people are supported to make sure both they, and the care workers, are as safe as possible. Care workers receive appropriate training, but some of this could be at a higher level to ensure awareness, particularly around medication administration.

Care and Support

The provider ensures people's wishes and needs are considered when developing plans of care. The manager visits the person to gain as much information as they can about a person and their needs. Additional information from the Local Authority care plans is also used. Personalised care plans are developed. The manager is considering the format of the care plan so that information around tasks to complete are more easily identifiable amongst the very good background information that allows care workers to get to know and understand what is important to the person. People or their representative sign to show they have agreed the care plan and any reviews of this. Care and support is delivered at the agreed times.

People have continuity of care and are treated with respect. The care team is very small with only five staff at present. The manager is part of the care team at times to help cover holidays and absences, ensuring continuity for people receiving the service. People tell us that they have the same care workers and they, "Like them very much." The manager considers the support needs of people and matches a care worker to the person receiving care. When people find it hard to make decisions and arrange their care, they have support from family members. Families of people receiving care are complimentary, with one person describing the service as "First class," and confirmed that the communication, especially with the manager is very good. Daily records are detailed and show how a person is supported to achieve their identified goals. Care workers support people and are respectful of the person, showing understanding of their individual circumstances. We saw how the service goes above and beyond at times, completing tasks that are not part of contractual agreements, but make a difference to the individual, their dignity and ability to continue to live independently.

Consideration is given to people's safety but further work is needed to ensure that documentation and records are robust. Risk assessments are in place but lack sufficient information, especially around the working environment for care workers. This has been identified and is in the process of being addressed. There is no impact on people, therefore an improvement notice has not been issued on this occasion, but we expect the provider to ensure this is embedded and sustained. There are gaps in medication administration records (MAR) so we cannot be confident that people have their medication at the required time. We found that care workers and the manager have only a basic level of training in medication and do not understand when MAR charts don't follow the current guidance. This is putting people at risk so we have issued an 'Area For Improvement' notice. We expect the provider to take action and this will be followed up on the next inspection

Leadership and Management

The service provider has governance arrangement in place. The responsible individual (RI) is also the manager of the service. They have good oversight, producing detailed reports around the quality of care and plans for development. The day-to-day operation of the service is managed well. There have been some gaps in the manager's knowledge around risk assessments and medication administration practices, but this has been identified and immediate action taken to address this. Auditing tools and information is available, and systems are being considered and developed to ensure that these are fit for purpose and can highlight, for example, when renewal of checks on fitness of staff are due through the 'Disclosure and Barring Service'. Policies and procedures are available for care workers to follow with an exceptionally high quality of detail in the 'safeguarding' document. The provider is reviewing the 'medication' policy to ensure this reflects current guidance and details of the support offered to help people with 'medication' is clear in the 'statement of purpose.'

Care workers are safely recruited and supported to develop. Personnel files are well organised and contain all documentation required to evidence that care workers are fit to work with vulnerable adults. Supervision and appraisal records show that staff have 3 monthly meetings with their line manager to discuss their development and any issues they may have. Care workers told us that less formal meetings are held weekly with their manager. Care workers do not have guaranteed hour contracts of employment, but the manager discusses the staff member's availability with them, and staff prefer the flexibility offered to fit around family and personal circumstances. These discussions need to be more formally recorded. Care workers are encouraged to register with Social Care Wales, the workforce regulator. Induction and training is provided and overall, staff feel they have the skills to carry out their role, but the provider has arranged more in-depth medication training to support improvements required.

| 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 | | |

| 58 | The provider is not ensuring that medication administration training, policies and processes are robust. | New |
|----|--|-----|
| | 100001. | |

Date Published 22/03/2023