



Inspection Report on

Careful Care Ltd

**96 Gnoll Park Road
Neath
SA11 3DD**

Date Inspection Completed

28/11/2023

Welsh Government © Crown copyright 2024.

*You may use and re-use the information featured in this publication (not including logos) free of charge in any format or medium, under the terms of the Open Government License. You can view the Open Government License, on the National Archives website or you can write to the Information Policy Team, The National Archives, Kew, London TW9 4DU, or email: psi@nationalarchives.gsi.gov.uk
You must reproduce our material accurately and not use it in a misleading context.*

About Careful Care Ltd

| | |
|---|---|
| Type of care provided | Domiciliary Support Service |
| Registered Provider | Careful Care Ltd |
| Registered places | 0 |
| Language of the service | English |
| Previous Care Inspectorate Wales inspection | 19 October 2022 |
| Does this service promote Welsh language and culture? | 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

People receive a good standard of care and support from Careful Care Ltd. Since the last inspection the provider has made continued positive progress in multiple areas. There are a team of experienced, well trained and supported care workers who are dedicated to their roles. Care worker recruitment has improved recently. The management team and Responsible Individual (RI) take an active role in ensuring service delivery is of a high standard. There are generally robust and thorough governance and quality assurance procedures in place. There are good processes and procedures in place regarding support planning, risk planning, monitoring and reviewing.

Well-being

People receive a good service from Careful Care. People and relatives spoken with told us the care and support provided is of a good standard. Care workers know the people they support very well, many of them working in the service for years. The manager told us recruitment of new care workers has improved recently. This is positive given the current recruitment challenges across the social care sector. There has been continued improvement in multiple areas since the last inspection including staff supervisions and appraisals. There is clear governance and oversight of quality by the RI and managers. There are regular planned and documented staff meetings taking place. Care workers told us they greatly value the support provided and the opportunity to ask questions of the managers and RI.

People contribute to and have a voice in decisions that affect them. People said there is good contact and communication with the managers. There are assessment and support plans which people contribute to, and care workers actively follow. Care workers understand the importance of maintaining and developing people's skills and abilities. People and relatives also informed us there is good continuity of care and generally they are allocated the same care workers and notified if calls are late for any reason. Care worker rotas confirm calls completed, align with support plans and care workers told us there is adequate time to carry out tasks. We completed a support file audit and saw detailed and thorough documentation. This includes support plans and associated risk assessments. We also saw that support plans are regularly reviewed and updated when necessary. There is also a support file in people's home containing key documents and contact details.

People are protected as far as possible from abuse and neglect. There are detailed and thorough policies and procedures to help guide care workers. Care workers told us they understand and have received training in relation to safeguarding and infection control. Care workers also receive training in relation to a wide range of core and specialist subjects. The training matrix shows all care workers are currently compliant with their training needs. The provider has also introduced taught training in some subjects.

Care and Support

People receive a good standard of care and support. We spoke to two people who receive a service and two relatives. All gave very positive feedback about the service provided. A person told us; *“carers are excellent, they come regularly and on time. I have no complaints or concerns at all”*. A relative stated; *“happy with care and support provided. No complaints and contact with and from manager is very good”*. We also received positive feedback about the service from Neath Port Talbot social services commissioning team. The manager told us the service is very settled at the current time and staff recruitment has improved since the last inspection. The service continues to actively recruit new staff. We spoke to four care workers and received seven feedback questionnaires. Care workers showed good knowledge of the people they support and roles they undertake. They also gave very positive feedback about the support and training they receive from managers and the RI.

People have an accurate and up to date plan for how their care is to be provided in order to meet their needs. We completed an audit of four support planning files. The service uses an electronic support planning online system. We saw thorough and detailed information in support plans. There are also linked detailed risk assessment documents. Personal plan reviews are documented and completed routinely within regulatory timeframes. We also saw detailed and informative files containing copies of support plans and contact information kept in people’s homes. Since the last inspection we noted strengthened person centred information in the personal plans. The manager informed us this improvement is continuing as the plans are reviewed and updated. People and relatives confirmed communication with and from managers is good and they are regularly consulted with, regarding their care and support needs.

People are safe and risks to their health and wellbeing minimised as much as possible. We saw healthcare records with detailed information regarding people’s health needs. There are detailed and thorough safeguarding and whistleblowing policies that are in date and updated as necessary. All care workers spoken to told us that they had received safeguarding training and this is updated annually. Care workers spoken to have good knowledge regarding the importance of safeguarding and their responsibilities. We saw robust infection control measures are in place along with good stocks of PPE.

Leadership and Management

People are supported by a service that provides appropriate numbers of staff who are suitably fit and have the appropriate knowledge, competency, skills and qualifications. We viewed an overall training sheet for all care workers showing they are fully compliant with a wide range of both core and specialist subjects. These include; online dementia, Covid 19, Control of Substances Hazardous to Health (CoSHH), medication administration, moving and handling, safeguarding etc. Managers and care workers have also attended taught training including dementia and maintaining skin integrity. We confirmed with care workers they are satisfied with the standard and range of training provided and feel it equips them for their roles. All care workers are registered with Social Care Wales (SCW) and have achieved Qualifications and Credit Framework (QCF) or equivalent training. The manager is a manual handling trainer and supports care workers in the work place to ensure safe practice is maintained. Since the last inspection the provider has made considerable progress in relation to staff supervisions and appraisals. We completed an audit and saw nearly all care workers have received a recent formal supervision. All care workers spoken with gave very positive feedback about the informal support available both from colleagues, the managers and RI. A care worker told us; *“As an employee I feel like I am supported in making a difference to service users and their families’ lives, I never feel rushed and always feel supported”*. Another care worker stated; *“I believe the company is run very well. Management support is great and staff work well together. Communication is very good”*.

There are good oversight and governance arrangements in the service. The RI works in the service on a weekly basis alongside a dedicated and experienced manager and deputy manager. All have a strong and supportive presence in the running of the service. All people, relatives and staff confirmed communication with and from managers is good. We read reports detailing regular care worker spot checks taking place by managers to ensure good continuity and outcomes are maintained. We read reports detailing regular contact with people and relatives by the managers and RI. We discussed with the RI how the current quality of care six-monthly review reports can be strengthened and improved for future reference.

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 inspection | N/A |
| 36 | Not all supervision is current for all staff working in the service. | Achieved |
| 73 | RI regulation 73 requirements are not currently documented adequately in respect of timeframes or staff discussions. | Achieved |

Was this report helpful?

We want to hear your views and experiences of reading our inspection reports. This will help us understand whether our reports provide clear and valuable information to you.

To share your views on our reports please visit the following link to complete a short survey:

- [Inspection report survey](#)

If you wish to provide general feedback about a service, please visit our [Feedback surveys page](#).

Date Published 18/01/2024