



Inspection Report on

Living Hope Social Care Limited

**Rothco Office
Dalton House
34 Chester Street
Wrexham
LL13 8AH**

Date Inspection Completed

06/03/2024

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 Living Hope Social Care Limited

Type of care provided	Domiciliary Support Service
Registered Provider	LIVING HOPE SOCIAL CARE LIMITED
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 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 are happy with the care they receive. They praise the kindness and patience of friendly, gentle, cheerful care staff and the speed with which any communication is dealt with. The service is described as responsive and flexible, with care staff going the extra mile. People are fully involved in designing their care plan and this ensures they receive the kind of care and support they need in the way it is preferred. They have choice and control about how they are supported.

Care plans are kept relevant and up to date through regular reviewing and requests for feedback from those using the service. Care staff are trained in a wide range of relevant areas including specialist care for people with specific and different needs. Staff are safely recruited following thorough vetting. The service has been operating for less than a year, but the responsible individual has governance arrangements in place to ensure good oversight. A variety of checks and measure and audits are planned to help make certain a quality and compliant service is provided.

Well-being

People have control over their day-to-day lives; they are treated with dignity and respect as personal care is planned carefully and with full consideration of people's preferences. Their views are heard on all aspects of their care as plans are devised in consultation with people, their carers, and any health professionals involved. Every month people's views are sought about the quality of care they receive. People's views about the support staff are important to the service; they are asked monthly whether they are happy with their care and their care worker.

People's physical and mental health and emotional well-being is fully considered in planning care. Care staff are directed on how to support people without reducing their independence; people's strengths are fully considered as well as their needs. Advice and guidance is sought from other health professionals when needed, and staff are vigilant in monitoring people's health and well-being. They will call health professionals to request home visits if needed. People are supported to do things that keep them healthy and active such as social calls to escort people who want to visit cafes and other local facilities. The care people receive is flexible and can be changed quickly, depending on people's current needs and preferences; They get the right care and support when they need it.

Care staff receive training on how to protect vulnerable people from abuse and neglect. The service has policies and procedures they adhere to and ensure any concerns are raised quickly and reported to the relevant authorities. Staff meetings encourage staff to reflect on safeguarding, so they are reminded of the correct procedures. Additionally, all complaints, however minor, are treated seriously, fully investigated and appropriate actions are taken.

Care plans also consider the needs and impact of immediate family and carers; the agency recognises the importance of promoting and supporting domestic, family and personal relationships. Care provided helps ensure main carers benefit from a break from their caring role while remaining involved. They know who is coming to provide the care and what to expect from the care staff. Family members told us how much they appreciate the support they receive from care staff they trust. They can do other things that matter to them while care staff occupy and care for the person in the comfort of their own home and in accordance with their preferences.

Care and Support

Prior to care and support commencing, the manager visits the person needing care to seek their views on what is important to them. People confirmed someone from the agency visited them to find out what they needed. An assessment of the person's care needs including the expectations of any family is completed. We saw the provider assessment is very person centred and focuses on what people can do for themselves as well as where they need support. Following the assessment, the manager can be clear about whether a service can be offered.

The service has an accurate and up-to-date plan for how their care is to be provided. The provider assessment identifies the person's outcomes and how these will be met. We saw care plans are reviewed weekly in the first month, and monthly thereafter, to ensure care needs have not changed and care delivery remains effective. People's views on the care, and on the service generally are sought at this time to ensure everyone is still happy.

People are provided with quality care and effective support. People's needs and aspirations are carefully recorded and associated care plans detail how care should be delivered to reflect these wishes. People told us they are very happy with the care they receive; they benefit from the continuity of care as they are now familiar with the staff. They describe care staff as friendly, very enthusiastic, and flexible about the care they provide. They are "*caring and kind, and chatty, friendly people*". One person needed a cleaning task done one day, and although not part of the normal care plan, care staff did this. Another person told us what a big difference the care has made to them and their partner; "*Regular care means I have time to go out and do things that I need to do*". People told us care staff know the person well; "*they know what impacts on (the person's) behaviour and treat them with patience and understanding*".

People are supported to access healthcare and health advice. We saw care plans include instructions to staff on what to do should they have any concerns about a person's health and wellbeing. We saw an example of a district nurse being asked to visit someone at their home following staff concern regarding a health matter. Health and well-being is a feature of the care plan, including how to promote people's current mobility skills and maintain a level of independence. Care plans consider any risks associated with a person's daily activities and inform care staff on how to mitigate these.

Leadership and Management

The service provider has governance arrangements in place to help ensure the service runs smoothly and its compliance with regulations. The electronic database alerts the manager when processes are due or if any are missed so issues can be rectified immediately. Care staff input information about care delivery into an app on their mobile phones, so the manager is always kept up to date. This same electronic database completes a weekly audit of processes such as clients visited, number of visits and punctuality. The service also has independent advisors who conduct biannual audits to ensure compliance with regulations.

Although the service is in its infancy, the responsible individual has started using quality assurance processes that seek the views of people using the service, their family, staff and professionals. We saw positive responses have been received. People told us their views are sought every three months and changes are made if required. The results of the questionnaires form the basis for the responsible individuals' three-monthly reports. There are plans to complete biannual reports also which will consider what is working well and where improvements need to be made.

The provider operates a culture of openness honesty and Candour. We saw policies and induction training covering the importance of candour, and minutes of team meetings recording staff views. Care staff and people using the service told us they can contact the office at any time should they have any issues. Care staff told us the provider is very approachable and has provided lots of support and guidance to help them personally and in work. Care staff hold their employer in high regard, they want to continue working for Living Hope and this helps ensure continuity for people using the service.

People are supported by competent care staff who are properly vetted to ensure suitability prior to employment. We saw staff are trained in a wide range of relevant topics including specialist training for individual and different needs; the services database keeps check of when refreshers are required. The responsible individual completes competency checks to ensure staff have understood and adhere to the guidance and training provided. They go through an induction to ensure they follow safe practices and work to the services expectations and receive one to one supervision so they can reflect on their work, raise any queries, and receive constructive feedback on their performance.

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
-----	--	-----

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 24/04/2024