



## Inspection Report on

**Accredilink Community Response Taskforce**

**7 Mwrog Street  
Ruthin  
LL15 1LB**

**Mae'r adroddiad hwn hefyd ar gael yn Gymraeg**

**This report is also available in Welsh**

**Date Inspection Completed**

09/04/2024

**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](mailto:psi@nationalarchives.gsi.gov.uk)  
You must reproduce our material accurately and not use it in a misleading context.*

## About Accredilink Community Response Taskforce

Type of care provided	Domiciliary Support Service
Registered Provider	Accredilink Community Response Taskforce CYF
Language of the service	Both
Previous Care Inspectorate Wales inspection	27 September 2023
Does this service promote Welsh language and culture?	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

This was a focused inspection and therefore not all themes have been considered in full. People are happy with the care and support they receive from Accredilink Community Response Taskforce. They spoke positively about the continuity of care staff they receive and said care staff are always on time and they do not feel rushed.

Personal plans are clear on what support people need, but the service provider does not consistently complete pre-assessments before agreeing to provide the service to people. This requires improvement to ensure the service can meet people's needs.

Care staff work as a team and are enthusiastic about their role. Records do not show that all staff receive regular supervision, sufficient training and competency assessments. The service provider is working on implementing the new training programme to all care staff.

Since the last inspection, some improvements have been made to the overall governance of the service. Relevant policies are reviewed regularly, care documentation is audited to ensure these remain up to date and quality of care reviews have been put in place since the last inspection. Insufficient improvements have been made to the recruitment processes to ensure new staff are suitable to work with the people who use the service.

## Well-being

People have choice and control over their day-to-day life. People told us they have choice and control over their care and support, care reviews show people are regularly involved in the ongoing development of the service they receive. People said care staff treat them with dignity and respect. Comments from people include *“they do a superb job, my life would be grim without their visits”*. Relatives told us they are grateful for the support their loved one receives. They told us they have continuity of care staff with the same care workers visiting each week and at the same times. People receive the service in their chosen language, there are care staff who are able to converse in Welsh. A selection of the documentation is available in Welsh and the service provider is in the process of translating the remaining documents into Welsh.

People are supported to maintain their health and wellbeing. Pre-assessments are not consistently being completed before providing the service to people and this requires improvement. Personal plans are clear on how to support people, but not all risk assessments are in place and this remains an area for improvement. Care staff complete the relevant documentation to show people receive the right support. Advice sought from professionals is included in the personal plans and risk assessments. External professionals we spoke with told us care staff are very good with engaging with their service. Care staff we spoke with know people well, including their needs and preferences.

People are not always protected from harm. People told us they feel safe with care staff and said they are friendly and approachable. Relatives told us they have not had a reason to complain but felt able to approach staff if they had issues. Most care staff are up to date with safeguarding training and the majority of care staff we spoke with are familiar with the correct procedures to raise a concern. Many care staff are not up to date with whistleblowing training and other mandatory training as well as specialist training to meet people’s individual needs. Recruitment practices remain insufficient to ensure new staff are suitable to work with people who use the service.

## Care and Support

As this was a focused inspection, we have not considered this theme in full. People receive a service which is mostly designed in conjunction with the individual and/or their representative. We reviewed a selection of care files and found people's personal wishes, aspirations and goals are considered. Personal plans are clear on how best to support people, they are written using person centred language and include people's preferences. We spoke with care staff who clearly understand people's needs and are familiar with individuals likes and dislikes. The service provider does not consistently complete a pre-assessment to ensure they can meet the person's needs, before agreeing to provide the service. While no immediate action is required, this remains an area for improvement and we expect the provider to take action. The majority of files we reviewed contain appropriate risk assessments, but improvements are still required to ensure these are in place for all people who use the service and we will follow this up at the next inspection. People and/or their relatives told us they are involved in the development of the care and support and records show reviews take place regularly. Feedback from relatives include [care staff are] *"polite, professional, reliable and good with time keeping"* and *"I wouldn't be able to do it without them"*. Relatives told us they feel the service meets their loved ones needs and they are kept up to date of any changes. Professionals we spoke with told us care staff at the service are *"really helpful, they have always been professional, caring, communication skills are excellent"*.

The service promotes hygienic practices and manages the risk of infection. Care workers told us they have plenty of Personal Protective Equipment (PPE) and people confirmed care staff wear PPE. Most staff are up to date with infection control training.

## Leadership and Management

As this was a focused inspection, we have not considered this theme in full. The service provider has some governance arrangements in place to support the running of the service. There are policies and procedures in place which are regularly reviewed. There are systems in place to ensure care documentation is maintained. The Responsible Individual (RI) seeks the views of people who use the service. Feedback gathered is analysed and included in the quality of care report. The quality of care report highlights what is good about the service and where improvements are required.

Care staff feel supported in their role. Feedback from care staff includes *"I just love it"* and *"I would say communication is excellent, support is there to do with anything"*. The majority of care staff we spoke with told us they receive regular supervisions with a senior member of staff. Supervision records show care staff have the opportunity to reflect on their practice and receive feedback on their performance, but not all care staff receive regular supervisions. At our last inspection we found not all care staff receive the appropriate training for their role. At this inspection, we found the necessary improvements have not been fully implemented and embedded within the service. Not all care staff have completed the required training and qualifications for their role. Care staff benefit from having regular competency assessments to ensure they are confident in their role, we found these are not up to date for all care staff. We have therefore issued a priority action notice, the service provider must take immediate action to address this issue. The service provider told us they have put in place a training programme and are working on implementing this for all care workers.

At the last inspection, we found recruitment checks for new care staff were insufficient. At this inspection we found the necessary improvements have not been made. The service provider does not ensure all new staff are robustly vetted before they begin working for the service, this includes obtaining appropriate references and ensuring the Disclosure and Barring Service (DBS) checks are completed. The RI assured us action is being taken to resolve these issues. This is placing people's health and well-being at risk and we have therefore issued a priority action notice. The provider must take immediate action to address this issue.

### Summary of Non-Compliance

Status	What each means
<b>New</b>	This non-compliance was identified at this inspection.
<b>Reviewed</b>	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.
<b>Not Achieved</b>	Compliance was tested at this inspection and was not achieved.
<b>Achieved</b>	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	The provider has failed to ensure recruitment pre-employment checks are fully completed prior to new staff being employed to work at the service. Ensure there is a robust process in place to obtain all the required information including references and Disclosure and Barring (DBS) checks prior to them commencing their post.	Not Achieved
36	The service provider has failed to ensure that all staff have received support and training relevant to their roles. Ensure all staff receive inductions, supervisions and complete the training they need to carry out their roles and responsibilities effectively and can appropriately meet the needs of people using the service.	Not Achieved

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
14	The service provider has not evidenced that pre-assessments have been carried out prior to people being offered a service. Ensure there is documentary evidence to demonstrate that pre-assessments have been completed and the service demonstrates their ability to meet people's needs before a service is offered.	Reviewed
15	The service provider has not ensured that all personal plans contain detailed information for staff to be able to appropriately meet people's needs. Ensure all personal plans are available for staff, up to date, contain all the relevant information and are reviewed with people and others involved in their care and support.	Reviewed
80	The provider has not undertaken a quality care review within the prescribed timescale. The provider must ensure a review is undertaken every 6 months and provide a report for inspection	Reviewed



### **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** 15/05/2024