Arolygiaeth Gofal Cymru
Care Inspectorate Wales

Inspection Report on

Hospice of the Valleys - Hospice at Home

Trade Team Distribution Depot
Festival Drive
Ebbw Vale
NP23 8XF

Date Inspection Completed

26/02/2024

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About Hospice of the Valleys - Hospice at Home

Type of care provided	Domiciliary Support Service
Registered Provider	The Hospice of the Valleys
Registered places	0
Language of the service	English
Previous Care Inspectorate Wales inspection	06 July 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 good quality end of life care and support. The agency supports people in Blaenau Gwent receiving palliative care to remain in their normal place of residence. In addition, people can access the Hospital Admissions Avoidance Project which prevents their admission to hospital due to being unwell or carer crisis. People who use the service, their relatives and staff are highly complementary of the service provided.

Since our last inspection, a new manager and responsible individual (RI) have been appointed. A small stable staff team who are experienced, trained, and dedicated work at the agency. Staff are proud to work at Hospice at Home. The service is flexible to meet the on-going needs of people. Improvements have been made to people's plans to make them more reflective of what is important to each person, their likes, and preferences. The RI has carried out the required three monthly visits to gain views of people who use services, their carers, and staff. Quality of Care Reviews have been completed.

Well-being

People's voices are heard and listened to. Peoples plans reflect what is important to them, their likes, and preferences in terms of their care and support. Positive relationships are encouraged and fostered between people receiving services, their carers, and staff. This promotes familiarity and provides reassurance to people and their families. Staff are experienced and trained to carry out their duties. Hospice at Home comprises of a small stable staff team who are supplemented by regular bank staff which ensures consistency.

People are happy with the service and are treated with dignity and respect. They told us, *"Just wanted to say a massive thank-you to everyone looking after my relative, you have been amazing and have gone above and beyond. Really can't thank you enough."*

"Thank-you for the care and compassion given to my relative in his last few weeks, especially the amazing team of sitters, whose care and support was invaluable to his partner (carer)."

"X is very appreciative of the service. Staff are very supportive. Relative feels comfortable with staff."

People are supported with their physical, mental, and emotional health. The agency works collaboratively with health professionals and allied services. Staff can refer individuals to healthcare professionals both within the Hospice of the Valleys organisation and external services. This can be complimentary therapy and or welfare rights to support people's comfort and well-being.

People feel safe and reassured. Audits of accident and incidents are considered on a monthly basis. Policies are in place to safeguard individuals and manage people's complaints. Robust staff recruitment practices and on-going staff training and development further protect people. A staff handbook sets out the expectations for staff who work at Hospice at Home. People are reassured by staff's presence stating, *"X is reassured at night with staff present."*

Care and Support

People receiving services have an accurate and up to date plan of care and support. Staff told us a plan of care is sent to them before a care package is commenced. The plan contains sufficient information to enable staff to support the individual. The plan clearly sets out what is important to the person and considers their individual likes and preferences. The plan is updated as necessary which enables staff to respond to peoples changing needs.

Hospice at Home is able to draw upon the other parts of the organisation to access healthcare clinicians and associated services to support people's comfort and well-being. Staff lone work and can call upon healthcare professionals to support people with end of life care. Staff told us this provides reassurance especially during the night and ensures the agency is responsive to a person's changing needs. For example, for pain relief to make a person comfortable. The service promotes continuity of staff which enables familiarity with people and their families.

Routine reviews of people's plans take place. We saw that the agency consults with the person in receipt of services, their carer, relatives as part of the review process. This ensures the plan continues to meet the person's needs. The agency considers individual's circumstances and risks before providing a service. A comprehensive pre-assessment of the individual's needs is compiled for each person. We saw two plans for people whose services had commenced the night before. The service is flexible to meet the changing needs of the people it supports.

The service promotes hygienic practices and manages risks of infection. An infection control policy to inform those working at the service is in place. Staff have received infection control training in accordance with the organisation's guidance. The staff Handbook supports staff to carry out their duties. It was reported to be under review. A number of the agency's policies and procedures have been reviewed.

Leadership and Management

Governance arrangements support the running of the service. A new manager has been appointed to conduct the day-to-day management of the service. They are experienced and registered with the workforce regulator, Social Care Wales to conduct this role. Staff told us they feel supported by the manager, who is always approachable.

There are arrangements for the oversight of the service through on-going quality assurance. Since appointment, the RI has carried out three monthly visits to people and their families to gather their opinions of the service. The RI is looking to develop systems to show improved outcomes for individuals. Quality of care reviews of the service have taken place. Some of the service's key policies and procedures have been reviewed.

The service has safe recruitment practices. We viewed personnel files and found sufficient recruitment checks in place to demonstrate staff's fitness to work with people who are vulnerable. All newly appointed staff receive an induction including shadowing more experienced care workers. All the agency's care staff are registered with Social Care Wales.

Staff are trained and supported to undertake their role. Staff performance is routinely monitored to support their development. Staff can access training events to support them perform their duties. Staff told us they are satisfied with the training they receive. Staff receive supervision in line with the regulations. Staff are proud to work for Hospice at Home.

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
15	The personal plan is not person centred it does not reflect an likes, dislikes, preferences or how the service intends to meet an individuals outcomes.	Achieved
73	The regulations require the responsible individual to visit the service in person to monitor the performance of the service in relation to the statement of purpose and to inform the oversight and quality of the review. This visit should take place every three months.	Achieved
80	The service has not compiled a six monthly review of care and support since registration under RISCA.	Achieved

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