Arolygiaeth Gofal Cymru
Care Inspectorate Wales

Inspection Report on

Ty Care Services

Birchgrove House
102 - 104 Caerphilly Road
Cardiff
CF14 4AG

Date Inspection Completed

04/03/2024

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About Ty Care Services

Type of care provided	Domiciliary Support Service
Registered Provider	Ty Care Services Limited
Language of the service	English
Previous Care Inspectorate Wales inspection	[Manual Insert] This is the first inspection of this service since registration with the regulator under The Regulation 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

Ty Care Services provides care for people in their own homes and supports people to access activities in the community. People like that the service is small, the care and support they receive is of "*good quality,*" and they are listened to. Health care needs are supported including assistance with medication. Personal plans and related documentation are good.

A service manager is in place and recruitment processes for care workers is strong. Care workers receive good induction training. The manager is aware of areas where staff could be supported better and is working to improve this.

A responsible individual (RI) has been nominated by the provider to oversee the manager and management systems of the service but are currently unavailable to provide the necessary oversight and governance to improve the quality of the service. Improvement is required around documentation, records, auditing, and quality assurance techniques to ensure the service is delivered safely and in line with the 'statement of purpose.'

Well-being

People know and understand what care, support and opportunities are available to them. A detailed ‘service user guide’ tells people about the services offered. During an assessment, people can confirm how and when they would like their care and support delivered, with a focus on choice. The provider will consider delivering a service through the medium of Welsh but would find this difficult at present. When the service gets to know the person and understands what they like, there is partnership working to help the person achieve what they want to do. People are understood, and communication is good. Personal plans are reflective of the person, their needs and how they would like their care delivered.

The provider helps people to remain healthy and active. People receive the right support at the right time. The service helps people with medication when there is an assessed need, and records are good. People have support with providing meals when this is agreed in the personal plan, including provision of nutrition for people who have diabetes. The service provides care for other healthcare needs. People have the right equipment to support their mobility needs and care workers are trained in its’ use. Care workers encourage people to take opportunities to visit the community and they monitor and support people’s mental health.

People’s voices are heard. People communicate with care workers daily and action is taken if additional care and support is needed. Though personal plans are updated, and good communication records show that the person is at the centre of any changes, the service is working to improve recording around this. People experience good outcomes and are very pleased with the care and support. Quality assurance questionnaires are available for people to comment on the service they receive, and the provider aims to consider issues raised.

The provider mostly protects people from abuse and neglect. Safe recruitment processes are in place so that people can be confident their care worker has had relevant checks to make sure they can work with vulnerable adults. Care workers have a good induction, with mandatory training to suit most people’s care needs. The service does not currently provide care workers with specialist training such as Parkinsons’ awareness, which means there is a missed opportunity to improve people’s outcomes. Current oversight of the service from the RI needs improvement as systems to ensure the monitoring of the smooth running of the service are not in place, or not being followed.

Care and Support

People like the personal service they receive. A professional social care worker told us "*Clients are happy with the quality of care they receive and like that the service is small*." People told us "*They listen to what I ask them to do*." People liked that the manager has a background in nursing and commented that this had been beneficial when helping with assessing their needs. Quality assurance questionnaires we viewed gave positive feedback to the service provider about the service delivery and care. Personal plans contain information showing how the service considers individual preferences and aspirations. People receive help to source information so they can achieve their goals. We saw how one person had support to access alternative events in the community when other options were no longer available, and additional well-being visits from care workers were made to a person when they were 'low in mood.'

Personal plans are in place and reviews of these are undertaken. The manager completes a thorough assessment of people's needs with the person or their representative. Care plans guide staff on how the person would like their care delivered. The service understands what is important to the person and helps them to work towards their desired goals, identifying risks and how these can be minimised. The service is demonstrating that they are improving systems to consistently involve health professionals, for example, occupational therapists to ensure moving and handling plans identify appropriate equipment and techniques.

Care and support is delivered as agreed. Daily records show accurate times of visits to the person's home, how long the person is supported, and the care provided. The service documents when people need support with nutrition and fluids. The manager is considering how this could be better recorded so that any omissions can be seen immediately. Medication records are complete and show people receive prompts and assistance with this task if required. A detailed 'service user guide' available in people's own homes, provides information about the service and how this is to be delivered, so they are clear on the support that is available to them. People who commented on the service said the care and support is "*excellent,*" and one person said, "*They know what they are doing, simple as*."

Leadership and Management

Governance arrangements are in place but these need strengthening. A statement of purpose' (SOP) is in place, which is a document to tell people what the service offers. Policies and procedures are available at the service's office. The RI is in post but not actively available, so are not currently meeting their regulatory requirement. Support and monitoring of the manager and management systems is not effective. While no immediate action is required, this is an area for improvement, and we expect the provider to take action. The service is not being run in accordance with the SOP with statements around 'how the service is provided,' 'staffing,' and 'quality assurance,' found to be inaccurate at the present time. While no immediate action is required, this is an area for improvement, and we expect the provider to take action.

The service recruits care workers safely and they receive induction training. Checks are complete to ensure employees are suitable to work with vulnerable adults, including ensuring the care worker has a clear, current, Disclosure and Barring Service certificate and documents from other government departments. An induction programme gives care workers a good foundation in subject matters appropriate for their role, including Safeguarding of vulnerable adults, Dementia awareness and Moving and Handling training. The manager and care workers are registered with Social Care Wales, the workforce regulator, and are working towards a relevant qualification in care.

Development of the manager and care workers needs improvement. We were told that care workers have group supervision meetings. Evidence of this was not available on personnel files, and one to one supervision meetings are not being undertaken. These meetings would allow care workers to identify any additional training they may require and give opportunity for managers to consider the care worker's performance. While care workers told us they feel valued and supported, they also told us that they need more training. Specialist training to support people's individual identified needs is not always provided, for example, around Diabetes. The RI is not currently available to help the manger with their developmental needs. While no immediate action is required, this is an area for improvement, and we expect the provider to take action.

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

6	The provider is not ensuring the service is run smoothly and in line with the statement of purpose.	New
9	The provider is not ensuring effective oversight of the service during times when the RI is not available.	New
9	The provider is not notifying the regulator when the RI is unable to carry out their duties	New
36	The provider is not ensuring 'specialist training' and one to one supervision meetings are available for care workers.	New
16	The provider is not ensuring personal plan reviews are completed as required, ensuring involvement of the individual and commissioners to inform any changes and identify omissions.	Achieved

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