



Care Inspectorate Wales

Care Standards Act 2000

Inspection Report

**Compass Community Care Limited
Newtown**

Type of Inspection – Baseline

Dates of inspection – Monday, 21 May 2018 and Thursday 24 May 2018.

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Summary

About the service

Compass Community Care Ltd is registered with the Care Inspectorate Wales (CIW) to provide domiciliary care services to older people, people with physical disabilities, sensory loss/impairment, mental health problems and people who may have a learning disability. The service operates in Powys and South Wales.

The registered provider is Compass Community Care Ltd and the registered manager is Gaynor Dunwell.

What type of inspection was carried out?

We carried out a baseline inspection as part of our inspection programme. We made an unannounced visit to the agency's office on 22 May 2018 between 9.20am and 2.15pm and an announced visit on 24 May 2018 between 11.45am and 3.15 pm.

The following methods were used:

- We visited four services where a total of nine people lived.
- We spoke with seven staff members, the registered manager, the responsible individual and the training manager.
- We looked at a sample of records and documents in regards to the operation and management of the service. We looked at care plans and records relating to four people in receipt of the service and we looked at six staff files.

What does the service do well?

The service is well run with a focus on continuously monitoring and improving the quality of the service provided for the benefit of people using it.

What has improved since the last inspection?

At the last inspection we recommended that:-

- Key documents were made available to people in a format suitable for the service provided. At this inspection we saw that the provider was working towards this. The service user guide was available in both text and pictorial format and the complaint policy was available in an easy read version.
- Hand written entries on Medication Administration Records (MAR) were signed by the person making the entry. At this inspection we saw that this had improved.

What needs to be done to improve the service?

No non compliance notices were issued as a result of this inspection. We notified the provider, however, that the service was not compliant with Regulation 26. This is because we saw that although notifications were being made to appropriate organisations, CIW were not being notified of incidents in line with the regulations. The provider gave an assurance that this would be addressed.

We made the following recommendations

- Support plans should be signed by the person completing them.
- Known allergies for people using the service are recorded on their Medication Administration Records.

Quality Of Life

Overall we saw people being treated with respect by care workers who were familiar to them and knew how they wanted their individual needs met. People were consulted about the care they received. Service delivery plans were personalised and contained sufficient information about the person and how they wanted their care provided.

People using the service have choice and influence and are treated with respect. We saw good, kind interactions between care workers and people they were supporting. One person told us that they liked the staff. We saw that people were relaxed in their company. Conversations were respectful and care workers showed a genuine interest in the person. We heard them talking with them about their family and friends. Care workers respected people's property. We heard them asking for permission from the individuals to, for example, answer the telephone and they always encouraged people to answer the door when we visited their homes. Care records viewed, including support plans and daily records, were detailed, personalised and evidenced that people were involved in developing and reviewing the documentation to ensure care was provided in a way that they wanted. We could not always find evidence of who had completed the documents as they were not always signed. This was discussed with the responsible individual who confirmed they would address this.

People are supported to follow their interests and are encouraged to be as fit and well as they can be. We saw that people were supported to go on holidays of their choice and to keep in contact with family and friends when possible. During the visits to people's homes, one person was going shopping and another had just come back from day services. We saw that the skills development programme was in use for some people. All the services we visited were aware of this programme and planned to implement it as a way to help promote people's independence. We saw a step by step account of how one person was being supported to purchase tickets to attend the Royal Welsh Show, purchase theatre tickets and do their personal shopping. Care workers told us that, on occasions, they were short staffed especially at the weekend which meant that people could not always be supported to be involved in activities outside of their home. The responsible individual was aware of this and confirmed that they were actively trying to recruit care workers to address this issue. Documentation seen showed that care workers supported people to attend medical appointments and referrals to specialist services, such as Speech and Language Therapist, were seen on some files where appropriate. We looked at medication management at the agency and saw that, generally, this was managed well. Care workers told us and we saw from the training matrix that they had regular training. The medication policy was available to care workers. Daily audits of the medication identified where errors had been made and were picked up and reported in a timely way. One medication administration record (MAR) we saw had not been signed by the person making a hand written entry. Another did not

show a person's allergies although care workers were aware of this and it was documented in records seen. The responsible individual gave an assurance this would be addressed.

Quality Of Staffing

Overall we found that people received reliable care. Care workers generally felt supported in their role and had appropriate training. Systems were in place to ensure training and supervision was carried out and people were inducted into their role.

People receive timely support from care workers who feel confident to deliver responsive care. Care workers spoken to told us they felt supported by the management and their colleagues. People new to their roles felt supported and told us that someone in the management team was always available to answer any queries they had. Without exception, care workers told us that they could telephone a member of the management team at any time day or night and they were responsive to their calls. We saw that care workers had regular meetings with their line manager. Staff spoken to confirmed this. We saw that appraisals of their work were carried out annually demonstrating another source of support for staff. A system was in place to alert management when these meetings were due including probation meetings for new staff. However, from records we saw, it was sometimes difficult to evidence if the supervision meetings had taken place. The responsible individual agreed and confirmed that they would review the system to ensure it was effective. We saw that, mostly, people had continuity because they were supported by the same team of care workers. However, some care workers said that staff shortages sometimes meant that they were lone working which made them feel vulnerable and impacted on their ability to support people to attend events in the community. We saw from minutes of team meetings that shortages of care workers was discussed and discussions with the management during our visits to the office confirmed that they were taking all reasonable measures to address this.

People receive support from care workers who are appropriately recruited and receive training. Recruitment files checked contained information in line with the legal requirements. New care workers were given an induction into their role with regular meetings throughout their probation period. The training matrix seen evidenced an ongoing training programme which provided care workers and the management team with the knowledge and skills to meet people's individual needs. Care workers confirmed that training opportunities were good with one person telling us they were 'excellent'.

Quality Of Leadership and Management

We found the agency was well run with emphasis to monitoring and improving the quality of the service provided.

People using, working in or linked to the service are clear about what it sets out to provide. There was a statement of purpose and service users guide which set out, in detail, the aims of the service and what people could expect. The service user guide was also available in pictorial format for people who may prefer this. Care workers were issued with handbooks when they commenced employment. This provided them with information relating to their employment and a sample of operational policies. This was confirmed by care workers spoken to. The complaints policy seen was available in a shorter easy read version and contained timescales for responding to complaints which were in line with the legal requirements. The responsible individual was looking at also making this available in pictorial format. People knew how to raise a concern or complaint and we saw that no complaints had been received since the last inspection. We saw there was a full range of operational policies and procedures in place to support practice, which included whistle blowing, medication and safeguarding.

People benefit from a service which has an effective quality assurance system in place to monitor and improve the service provided. People are involved with defining and measuring the quality of the service. We saw evidence of regular staff meetings. Care workers spoken with confirmed these took place and they were able to express their views on the service provided. We saw that people using the service had the opportunity for regular tenant meetings, six weekly meetings with the manager and quarterly service discussion groups. The responsible individual told us that this provided people with an opportunity to comment on the service they received and gave people various opportunities to raise any issues they may have about the service they received. The quality assurance report seen evidenced people's involvement in the quality assurance process. Documentation seen evidenced that regular service checks were carried out by the senior support worker and the management team. Discussion with the management team demonstrated that they would carry out shifts in the services regularly which gave them the opportunity to continually assess the service provided.

People benefit from a service which identifies and reports concerns in a timely manner. We looked at documentation relating to accident and incident reporting. We saw that accident records were audited by management with outcomes recorded. Safeguarding referrals were made appropriately and in a timely way. We noted that a number of incidents relating to medication errors had been identified through an effective audit system. However, CIW had not been informed of any incidents since December 2017. We discussed this with the responsible individual who gave an assurance that this would be addressed as this had not previously been an issue. Whilst CIW had not been

informed, we noted that other agencies had been and appropriate action taken.

Quality Of The Environment

This theme does not form part of domiciliary care inspection. However, we noted that the agency was run from suitable office space allowing for confidential information to be held securely. It is accessible to people using the service and staff.

How we inspect and report on services

We conduct two types of inspection; baseline and focused. Both consider the experience of people using services.

- **Baseline inspections** assess whether the registration of a service is justified and whether the conditions of registration are appropriate. For most services, we carry out these inspections every three years. Exceptions are registered child minders, out of school care, sessional care, crèches and open access provision, which are every four years.

At these inspections we check whether the service has a clear, effective Statement of Purpose and whether the service delivers on the commitments set out in its Statement of Purpose. In assessing whether registration is justified inspectors check that the service can demonstrate a history of compliance with regulations.

- **Focused inspections** consider the experience of people using services and we will look at compliance with regulations when poor outcomes for people using services are identified. We carry out these inspections in between baseline inspections. Focused inspections will always consider the quality of life of people using services and may look at other areas.

Baseline and focused inspections may be scheduled or carried out in response to concerns.

Inspectors use a variety of methods to gather information during inspections. These may include;

- Talking with people who use services and their representatives
- Talking to staff and the manager
- Looking at documentation
- Observation of staff interactions with people and of the environment
- Comments made within questionnaires returned from people who use services, staff and health and social care professionals

We inspect and report our findings under 'Quality Themes'. Those relevant to each type of service are referred to within our inspection reports.

Further information about what we do can be found in our leaflet 'Improving Care and Social Services in Wales'. You can download this from our website, [Improving Care and Social Services in Wales](#) or ask us to send you a copy by contacting us.