



Care and Social Services Inspectorate Wales

Care Standards Act 2000

Inspection Report

Seashells Care and Support Services

Quinton Hazell Enterprise Park
Glan Y Wern Road
Colwyn Bay
LL28 5BS

Type of Inspection – Baseline

Date(s) of inspection – 09th January 2014

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Summary

About the service

Seashells Care and Support Services provides domiciliary care for older people, including people with dementia care needs, and adults with a learning disability. Seashells Limited is the registered provider and Garry Williams is the registered manager. The person nominated by the company as responsible individual is Stuart Owen. The agency operates in the counties of Conwy and Denbighshire from premises in Mochdre.

What type of inspection was carried out?

We (Care and Social Services Inspectorate Wales, CSSIW) visited the agency on 09/01/14. This was a scheduled inspection and was unannounced.

Information for this report was gathered from the following sources:
Discussions with people using the service, relatives, the registered manager and staff.
A sample of records held at the agency office.

What does the service do well?

The service is expected to meet national minimum standards for domiciliary care agencies in Wales. We did not see any areas of exceptional practice that went beyond this during our visit. We did find that the people who contributed to the inspection were very positive about their experience of the agency and spoke highly of their carers.

What has improved since the last inspection?

Recruitment procedures have been tightened up to ensure that the required checks to determine people's fitness to work at the agency are completed before they are allowed to provide care. The benefit of this for people using the service is that they are safeguarded through improved vetting procedures.

What needs to be done to improve the service?

Where the agency is supporting people to take their medication, the nature and extent of support and/or assistance that the person is receiving should be clear in the records maintained. Medicine administration records (MAR) must be maintained if care workers are actually administering medication rather than prompting or giving general assistance. The benefit of this for people using the service is that they will be supported by safer systems.

Quality of life

Overall, we found that people using the service are given choice in how their care is provided and that they are treated with respect.

People using the service have choice and influence because they are involved in planning their care. People told us that they had received a visit to discuss and plan the care they would receive and we saw records of assessments carried out by the agency. These assessments looked at what people could do for themselves as well as where they needed assistance. People told us that they had a copy of their service delivery plan setting out what care was required, and how it was to be provided. The plans we saw were signed by either the person receiving the service or their representative confirming their agreement.

We found that people are treated with dignity and respect. The evidence for this came from people using the service and their relatives who commented on the friendliness of their carers and said they were always pleasant and polite. People also told us that carers respect their home and property.

People have a voice and are encouraged to speak up. The agency has a complaints procedure and people told us they had a copy along with contact details of the agency. People told us they would feel comfortable raising any worry, concern or complaint. The agency conducts quality of care reviews, giving people the opportunity to comment on their experience of the service.

In the main, we found that people experience appropriate, responsive care from staff with an up to date understanding of their individual needs and preferences. Service delivery plans are available in people's homes for carers to refer to, along with records of the care provided during each call. These include comments on the person's well being for the next carer to refer to. People told us that they had the same team of regular carers who knew and accommodated their wishes. Carers told us that they are made fully aware of people's service delivery plans before any new calls. The carers we spoke with also said they were under strict instructions to report any changes they noticed in the person's well being or needs.

We did find, however, that where people were being supported to take their medication there was room for improvement in recording the level of assistance given. It was not clear in one of the records we saw whether the person was receiving general assistance to take their medication or if medication was being administered by carers. This needs to be addressed.

Quality of staffing

In summary, we found that people receive a reliable service from carers they are comfortable with and who are supported in their role through a structured training and supervision programme.

People can feel confident in the care they receive because their carers are competent to meet their particular needs. This is because the agency has an ongoing staff training programme. We saw evidence of this when looking at staff files. Examples of the training being provided were manual handling (to passport standard), medication administration, first aid, food safety, dementia, adult protection, challenging behaviour and nationally recognised qualifications in care. One newly recruited carer was receiving training in adult protection as part of the person's induction to the role on the day of our visit. When we spoke with carers they told us that they receive sufficient training to help them do their job and that they are never asked to undertake tasks they don't feel able or confident to do. When looking at records we found that staff receive formal one to one supervision, including observed practice. Carers told us that there was always a senior person on call to contact if they needed support.

Concerns had been raised since the last inspection that had identified weaknesses in the procedures for recruiting new staff. When we looked at a sample of records we found evidence that this had been addressed. Procedures were in place to ensure the required checks to determine fitness to work for the agency are completed before a person is allowed to provide care.

People receive timely support and care. People using the service and their relatives told us that carers arrive when expected and that they are contacted if carers are unduly delayed. Carers confirmed that adequate travelling time is allowed between calls so that they are not rushed or in danger of being late. The people we spoke with confirmed that their carers always stay the allocated time. When looking at records we saw that carers enter their time of arrival and departure at calls on care documents within people's homes and that spot checks are carried out by the management. No one participating in the inspection reported any missed calls.

The people we spoke with were very complimentary of their carers and told us they shared good relationships with them. People told us that they have the same team of regular carers and always know who to expect. This demonstrated that people are cared for by familiar staff.

Quality of leadership and management

Overall, We found that the agency was being run in an efficient way with systems in place to monitor the quality of service provided. New posts had been created since the last inspection to support the registered manager in this.

People can be confident that they will receive effective support from a service that can meet their needs. This is because assessments are carried out with the person before offering to provide care. We saw this when looking at records and the people we spoke with confirmed they had been consulted regarding the care they would receive and that this is reviewed with them regularly. Everyone we spoke with felt they were receiving a good service.

We found that people using the service are actively involved in defining and measuring the quality of the service. This is achieved through the agency's quality assurance system. Annual questionnaire surveys are carried out and we saw that a quality of care review report showing the results of the last survey was available. This was dated September 2013.

The agency employs a community team leader and 2 care coordinators who visit people in their homes to monitor the service being delivered and gain their views. Service users are also given details of how to contact the care coordinators if they need to discuss any issue, including outside of office opening hours. These are new posts since the last inspection created to improve quality monitoring and there is also now an assistant manager to support the registered manager. The registered manager told us that he was in daily contact with the responsible individual and felt supported in his role. The outcome of this for people using the service is that they know that there are people who are over seeing the service.

People can be confident that the service is well run, with due care and attention to national minimum standards and regulations. We saw that there are operational policies and procedures in place that are available to staff for reference and training. We saw that these had been updated within the last 12 months and we were told that staff sign up to them as part of their contract of employment.

Quality of environment

Not applicable to domiciliary care agencies.

How we inspect and report on services We conduct two types of inspection; baseline and focussed. 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.

- **Focussed 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. Focussed inspections will always consider the quality of life of people using services and may look at other areas.

Baseline and focussed 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 telephoning your local CSSIW regional office.