



## Inspection Report on

**Premier Homecare North Wales Ltd**

**Premier Homecare North Wales Ltd  
Pinfold House  
Pinfold Lane  
Mold  
CH7 6NZ**

## **Date Inspection Completed**

07/08/2024

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## About Premier Homecare North Wales Ltd

|   |   |
|---|---|
| Type of care provided                                 | Domiciliary Support Service   |
| Registered Provider                                   | Premier Homecare North Wales Ltd  |
| Registered places                                     | 0   |
| Language of the service                               | English   |
| Previous Care Inspectorate Wales inspection           | 18/11/2020  |
| 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

Care staff are knowledgeable, respectful, caring and employed in appropriate numbers. People receive excellent continuity of care and support. People receiving a service, and relatives, are happy with the support they and their loved ones receive. People's care documentation is detailed, outcome focused and gives care workers appropriate instruction on how to deliver support. People's personal plans are reviewed in a timely fashion.

Care is delivered by an enthusiastic and familiar staff team, led by highly effective senior managers. High quality care documentation accurately reflects people are being cared for appropriately by care staff and in line with their personal plans.

Support staff are properly vetted prior to employment and are well trained to ensure they carry out their roles safely. Care staff have regular supervision and appraisals. There are arrangements in place to ensure the provider knows how the service is running, and the Responsible Individual (RI) ensures the Quality-of-Care review is undertaken.

## Well-being

People have control over their day to day lives. The provider has quality assurance processes in place which consider and act on the views of people receiving support. The RI consults with people using the service on a regular basis. The Quality-of-Care review and three-month checks are completed.

Relatives are happy with the support their loved ones receive. They told us their relatives are treated well, with dignity and respect. People also told us they receive the support they need, and care staff listen to what support they require. Care workers told us personal plans are updated as soon as the person's support needs change. Support is provided by small staff teams, and care workers are familiar with the people they support.

People are protected from potential abuse, harm, or neglect. Reviews of personal plans and risk assessments are undertaken in a timely manner and reflect the information contained in professional documentation on file. Care records give care workers the instruction required to support people accurately and are reviewed appropriately. The care staff we spoke to confirmed care plans give them enough information to support the person effectively. Personal plans are an accurate reflection of the support the person needs. Care staff records are checked robustly. Training records show care staff have undergone appropriate training. There is a robust set of management audits in place which ensure any risks are minimised.

## Care and Support

The service provider considers a range of views and information about prospective clients. People are consulted regarding their care needs and preferences prior to the service commencing to ensure the service can provide the care and support required. Care staff we spoke to told us to ensure they are familiar with the requirements of the person, they view personal plans, prior to the service commencing. Pre-admission paperwork is detailed, and person centred. Personal plans are detailed, person centred, and goals are outcomes focused. People using the service confirm their care and support is undertaken in the way in which they want their support delivered. People are involved in regular reviews of their care and support.

People are provided with good quality care and support which is tailored to the needs of the individual. Detailed personal care plans are in place and give comprehensive instruction to care staff on how to support people. They are reviewed in line with regulations and care staff told us they are made aware of any changes to people's personal plans. Care plans mirror information contained in the service's own pre-admission assessment documentation and information provided by professionals on how to support the individual. People we spoke with told us they receive the care and support they require. One person's relative told us that carers had been *"Excellent, the care has been good, care staff and managers will support my relative out of the normal care time if required.... If it was without this my relative may have to go into a care home... the care they receive is keeping my relative out of a care home...care staff understand the needs and show care and compassion and staff are knowledgeable in caring for my relative."* Care workers told us care plans are detailed and gave them the information and instruction they needed to undertake their role. They also confirmed care plans are updated with any changes to the care and support people may require, and they are informed of any changes. We found risk plans to be detailed, comprehensive and reviewed at appropriate intervals.

We spoke with care staff, relatives and people receiving a service who confirmed that care workers are never late and stayed for the required amount of time. One relative told us care workers *"Always turn up and do their job."*

## Leadership and Management

Management arrangements ensure oversight of the service, and required policies and procedures are in place. We saw evidence of regular, and comprehensive audits of all aspects of the service. The RI has oversight of the service. The RI's three-monthly review of the service and six-monthly Quality-of-Care Review are undertaken in line with the regulations. Records of both are detailed and transparent and show discussions with stakeholders take place.

Care staff and relatives told us managers are approachable and supportive. One care worker told us *"I love it here, it's great, the staff are great."* Care staff we spoke with were complimentary about managers of the service. Policies and procedures in areas such as safeguarding, medication and challenging behaviour are comprehensive and reviewed regularly.

People are supported by an appropriate number of staff who are suitably fit and have the knowledge, competency, skills, and qualifications to provide the levels of care and support required. We saw several staff files which evidence robust recruitment processes are in place, and care workers are registered with the appropriate bodies in regards their fitness to work. Training resources are good. Care staff told us they receive a lot of training which is appropriate for the people they support. We saw training records which confirm that there is a large suite of training given. We also saw evidence that the provider arranges manual handling training to meet the exact requirements of the individual being supported which is very good. We saw evidence which show there is an induction process in place. We saw regular staff supervision and annual appraisals are taking place.

Care staff and relatives told us people are supported by small groups of care workers which staff rotas confirm. One person told us their relative *"Needs the regularity his carers provide... the consistency of staffing helps."* Another person said their relative *"Generally has two carers who do the majority of calls and (their relative) really likes them."* The provider has procedures in place which ensures care workers are aware of the support needs of people being supported in a different team so that adequate cover can be provided in the event of staffing issues.

| 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.

| Area(s) for Improvement |   |        |
|-------------------------|---|--------|
| Regulation              | Summary   | Status |
| N/A                     | No non-compliance of this type was identified at this | N/A    |

|  |            |  |
|--|------------|--|
|  | inspection |  |
|--|------------|--|



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