



Care and Social Services Inspectorate Wales

Care Standards Act 2000

Inspection Report

Network Healthcare

Merthyr Industrial Park
Pentrebach
Merthyr Tydfil
CF48 4DR

Type of Inspection – Focused
Date(s) of inspection – 28 January 2014
Date of publication – 19 February 2014

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Please contact CSSIW National Office for further information
Tel: 0300 062 8800
Email: cssiw@wales.gsi.gov.uk
www.cssiw.org.uk

Summary

About the service

Network Healthcare is registered with the Care and Social Services Inspectorate for Wales (CSSIW) to provide domiciliary care services for people with physical and learning disabilities. The registered manager is Mr Ashley Henry.

From the same office, Network Healthcare operates a social care employment agency which is not regulated by CSSIW.

What type of inspection was carried out?

We carried out an unannounced, focused inspection on 28 January 2014 between the hours of 09:30 and 13:00.

The information used to compile this report was gathered as follows:

- Inspection of two care files/daily recordings
- Discussion with relatives of one service user
- Discussions with the assistant manager and care co-ordinator
- Inspection of 4 staff personnel files
- Inspection of Statement of purpose, Service user Guide and Quality Assurance Document

What does the service do well?

The agency provides flexible and individually tailored services which encourage people to make informed choices and to be autonomous.

What has improved since the last inspection?

There were no areas of non-compliance at the last inspection.

What needs to be done to improve the service?

We did not issue any non-compliance notices but the following recommendations were discussed with the registered manager:

An Annual Quality Assurance Report needs to be produced which is specific to the Merthyr branch of Network Healthcare. This should demonstrate a robust quality assurance system is in place which includes consultation with people using the service, their families and other relevant individuals, including staff. This is to ensure the agency is compliant with Regulation 23.

Daily recordings should be audited by care co-ordinators at regular intervals to ensure the smooth running of care packages and early identification of any issues.

Quality of life

The agency currently provides domiciliary care to a limited number of people who independently contract with them for the provision of care. Prior to undertaking packages of care, assessments of need had been carried out and individual service delivery plans drawn up covering specific support needs. Service users and their families are involved in assessments. This ensures people have a voice and are encouraged to make informed choices about their needs and how they would prefer care to be delivered.

We saw two examples of service delivery plans. We found that generally people in receipt of the service can be assured that staff will have a clear picture of their care and support needs. This is because service delivery plans are subject to regular review and there are mechanisms in place for care workers to report any changes in care needs. There was evidence that service delivery plans had been updated in line with reported changes in need. We were informed that service delivery plans are reviewed four weeks after the commencement of the service and then at six monthly intervals. We saw evidence of this in care files.

Service delivery plans included contact details for health and social care professionals involved in the care of service users. Staff were provided with information on specific health conditions such as epilepsy. Risk assessments were in evidence and detailed information was available in relation to Positive Behaviour Management. This was important as some service users could on occasions display challenging behaviour. The assessments and information provided for staff guided them as to the most appropriate and effective strategies to employ. There was excellent identification of antecedents to certain behaviours. This was important to enable staff to manage the environment in order to minimise difficulties. Where necessary, all staff were trained in Positive Behaviour Management to enable them to best meet the needs of service users.

We spoke with one family following the inspection and were told that they were very happy with the service which was extremely reliable and communication was excellent. The family spoke highly about the care and interaction skills of the staff and said *"it is all positive with Network"*.

People using the service benefit from care which is flexible to their individual needs. Service users are encouraged to access community amenities and are supported to participate in a range of educational and recreational activities.

We found in one file that daily record sheets had not been collected from the person's home for several weeks and recommended that this should be done more frequently. This would enable the care co-ordinator to analyse the information to ensure the smooth running of the package and to identify any issues needing to be addressed.

People can be assured that there is good attention to issues of confidentiality and that their personal details and documentation will be securely kept in appropriate lockable cabinets in secure premises.

Quality of staffing

As this was a focused inspection we did not concentrate on quality of staffing. However, we did inspect four staff personnel files and found all expected checks had been undertaken and all necessary paperwork in place as outlined in Schedule 3 of the Domiciliary Care Regulations. We therefore found that people could be confident that they will receive care from staff who have been through a robust recruitment process. We also found evidence that staff have been appropriately trained, some staff having undertaken specialist training in addition to mandatory requirements. For example, where necessary, staff have been trained in Positive Behaviour Management. The assistant manager being qualified to carry out this training with staff.

Quality of leadership and management

As this was a focused inspection, we did not concentrate on quality of management on this occasion. The registered manager, Ashley Henry, was not in the office on the day of inspection.

We were able to view documents such as the Statement of Purpose, Service User Guide and Quality Assurance report. We found that people can be assured that the service is able to deliver what they propose in their documentation. We did find however, that the Quality Assurance Report was rather generic and we would recommend this is reconsidered to make it more specific to the particular branch and the specific service delivered. The registered manager needs to demonstrate consultation with service users, families and other relevant individuals, including staff.

Quality of environment

This section was not considered at this inspection.

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.