



Inspection Report on

Premier Care Plus Ltd

**Unit 5 Field Farm
Oakenholt Lane
Flint
CH6 5SU**

Date Inspection Completed

16 November 2021

Welsh Government © Crown copyright 2021.

You may use and re-use the information featured in this publication (not including logos) free of charge in any format or medium, under the terms of the Open Government License. You can view the Open Government License, on the National Archives website or you can write to the Information Policy Team, The National Archives, Kew, London TW9 4DU, or email: psi@nationalarchives.gsi.gov.uk
You must reproduce our material accurately and not use it in a misleading context.

About Premier Care Plus Ltd

Type of care provided	Domiciliary Support Service
Registered Provider	Premier Care Plus Ltd
Registered places	0
Language of the service	English
Previous Care Inspectorate Wales inspection	Click or tap here to enter text. 7 August 2019
Does this service provide the Welsh Language active offer?	Yes

Summary

People are happy with the care and support they receive from care workers. They are knowledgeable, respectful, caring and are available in sufficient numbers to meet people's needs. People told us care staff are very rarely late and calls are never missed. Support is provided in an un-hurried and dignified manner by a friendly staff team. People's care documentation is detailed, giving staff appropriate instruction on how to deliver support and care plans are reviewed regularly.

People receive support from a well-managed service. An enthusiastic staff team are recruited safely, supervised regularly and trained to meet individuals' support needs. Managers undertake detailed audits of the service on a regular basis and the views of those receiving a service are actively sought. The Responsible Individual (RI) has good oversight of the service.

Well-being

People's views on the care and support they receive are actively sought and individuals told us they were confident they were listened to. People told us they were treated well, with dignity and respect. They said staff are friendly and care staff told us they viewed people's personal plans before care and support commenced. People's care and support documentation is detailed and gives staff adequate instruction on how to support individuals. Care staff told us this documentation gave an accurate reflection of the individual and their needs. People are supported by small teams of staff who develop good, appropriate relationships with the individuals they are supporting. The service supports people to achieve their outcomes.

The service has good measures in place to ensure people receiving a service are protected from harm and takes safeguarding individuals seriously. Recruitment practices are robust and care staff are trained in areas such as safeguarding. Infection control measures are detailed and staff are trained in their implementation. Staff follow care plans closely. Care plans mirror the requirements set out in accompanying documentation provided by health care professionals. Risk assessments are detailed and reviewed regularly.

Care and Support

The service provider considers a range of views and information about prospective clients. People and / or their relatives are consulted regarding their care needs and preferences prior to the service commencing to ensure the service can meet their needs. Care staff view the personal plans of individuals they are to support, prior to the service commencing to ensure they are familiar with the requirements of the person. Care plans are reviewed and written in conjunction with the individual. People using the service and family members confirmed they were consulted about what care and support was required and this was undertaken in the way in which the person wanted their support delivered. One person told us *"I have a say in what care I get."* Whilst another person said *"the care plan is discussed with us."*

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 assessment documentation and information provided by health care professionals on how to support the individual. Care plans also reflect the wishes of the person on how they want to be supported. People we spoke with told us they receive the care and support they require. Care workers we spoke with confirmed care plans were detailed and gave them the information they needed to undertake their role. They also confirmed care plans were updated with any changes to the care and support people may require and care workers said they read personal plans prior to undertaking support of individuals. We also found risk plans to be detailed, comprehensive and reviewed at appropriate intervals. People confirmed they are treated with dignity and respect. One person said it was *"a pleasure to have the carers in the house... they treat me with dignity, respect, they are kind caring and humorous."*

Leadership and Management

Comprehensive management arrangements ensure effective oversight of the service and required policies and procedures are in place. We saw evidence of regular audits of all aspects of the service. The Responsible Individual (RI) has oversight of the service and undertakes their reviews in line with regulations. The provider actively seeks the views of people who use the service. People we spoke with said managers are helpful. One person told us *“office staff are very good and very helpful.”* Care staff told us managers are approachable and supportive. One care worker told us *“managers are great to work for and really supportive.”* The feedback from commissioners was positive with one professional we spoke with advising they have *“no issues with the service...the provider is very pro-active ...and forward thinking.”*

We saw evidence of robust recruitment processes and knowledgeable staff are provided in appropriate numbers to support people. Care staff told us they receive regular and appropriate training for the people they support and we saw training records which confirm this. We saw evidence of regular staff supervision, appraisals and spot checks are undertaken. We also saw team meetings are taking place.

The provider takes safeguarding seriously and has good mechanisms in place to safeguard the individuals they support. The safeguarding policy reflects current national guidelines. There are safe systems for medicines management being followed with policies in place for staff to follow. The provider has comprehensive infection control policies and procedures and manages the risk of infection well. Since the coronavirus pandemic, the service has implemented additional detailed procedures. Care staff confirmed they have enough stocks of appropriate PPE and people receiving a service and care workers told us PPE was worn at all times.

Care staff told us they have enough time to undertake their calls. People who receive the service and their relatives told us care staff spend their allotted time undertaking support, were very rarely late and the support received was not rushed. We were told by people calls were never missed. Staff rotas confirm people receive good continuity of support from small teams of care staff. People receiving support and their relatives also confirmed this was correct. One person told us they received support from *“a group of between 6 – 8 care staff.”*

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
N/A	No non-compliance of this type was identified at this	N/A

	inspection	
--	------------	--

Date Published 20/12/2021