



Inspection Report on

South Wales supported Living

**Leonard Cheshire Disability
Ty Cwm
Lon Ty Cwm
Carmarthen
SA31 3GA**

Mae'r adroddiad hwn hefyd ar gael yn Gymraeg

This report is also available in Welsh

Date Inspection Completed

01/03/2023

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About South Wales supported Living

Type of care provided	Domiciliary Support Service
Registered Provider	Leonard Cheshire Disability
Registered places	0
Language of the service	Both
Previous Care Inspectorate Wales inspection	19 May 2021
Does this service provide the Welsh Language active offer?	The service provides an 'Active Offer' of the Welsh language. It anticipates, identifies and meets the Welsh language and cultural needs of people who use, or may use, the service.

Summary

Overall, the staff team at South Wales Supported Living do all they can to support people as they wish. Care workers focus on each person's needs, to make a positive difference to their lives. People and their relatives are enthusiastic about the support they receive and say their care workers support them well. Employees feel well supported by senior staff members, there is good communication throughout the service and there are robust systems in place to monitor the quality of care provided.

Well-being

People and their relatives are very happy with the service they receive from South Wales Supported Living. Care workers are enthusiastic and are aware of the importance of each person's well-being: they support each person as they wish, and people and their relatives told us their care workers are kind, caring, respectful and professional in their approaches. One person smiled broadly and said, *"They are all lovely,"* and a relative told us, *"We're so happy that X is happy."*

Care records reflect each person's support needs in detail. There are pen pictures of each person that describe their interests and preferences, together with the best ways of supporting them. We discussed ways of demonstrating peoples' agreement to their support plans: currently not everyone signs or evidences their care records to denote their involvement in the process. But people and their relatives say care workers talk to them about the care they receive and say they feel safe with the care workers who support them. This reassures each person their needs and personal opinions are understood.

People and their relatives know how to make a complaint and are confident the management team would listen if they needed to raise any issues that affect them. Each person's privacy and personal information is kept secure at all times.

The manager provides an 'Active Offer' of the Welsh language: this means being proactive in providing a service in Welsh without people having to ask for it. The service anticipates, identifies and meets the Welsh language and cultural needs of people who use, or may use, the service. Some care documentation is produced bilingually in English and Welsh and made available to people if they wish.

There are clearly written plans for how care workers provide people's care and support. The provider considers a range of information to ensure they can meet people's needs before their support is put in place. This includes obtaining information from relatives and external healthcare professionals such as social workers, together with all assessments relating to the person. From this, senior staff develop care records to describe people's support arrangements and any specific requirements. All care workers have access to this information to ensure each person always receives the agreed support. To remain current, all care records are reviewed every three months, more frequently wherever support needs change. The manager is currently updating the way these reviews are documented, to make it easier to evidence peoples' involvement in the process.

The provider has detailed policies and procedures to manage the risk of infection. Measures are in place to ensure people are kept safe from infection as far as possible. This includes the monitoring of all visitors and the appropriate use of personal protective equipment by all care workers. People and relatives confirmed there are good hygiene practices throughout their visits.

As far as possible, the service takes steps to safeguard people from neglect and abuse. Risks to people's health and well-being are clearly recorded and minimised so people can maintain their independence as far as possible. Care workers recognise their personal responsibilities in keeping people safe. They are aware of the whistleblowing procedure and are confident to use it if the need arises. They say they would go to the manager initially but would be confident to go to external agencies such as the safeguarding team if they thought they needed to.

Leadership and Management

The service is committed to developing a culture which ensures good outcomes for people. There are straightforward checking systems in place, designed to monitor each person's

well-being, together with the quality of support they receive. The management team and the Responsible Individual (RI) identify any actions needed to improve people's well-being in regular quality assurance monitoring reports. Care workers told us, "*We always have enough time for people, to make sure we can do a good job.*" Peoples' relatives are complimentary about the care workers and the management team. One person said, "*They are all lovely and caring. We couldn't ask for more,*" and another said, "*They do a tremendous job, they really do.*"

The provider ensures there are enough knowledgeable and skilled care workers to provide the right support for people. Pre-employment checks take place before new employees start work - these include reference checks, photo identification and Disclosure and Barring Service (DBS) checks. The staff induction programme links to the 'All Wales Induction Framework for Health and Social Care.' The provider has recently changed the way staff training is evidenced, which has made it more difficult to evidence all employees are up to date with their essential training. However, the manager is planning to discuss how this can be improved. In addition, care workers say they have all the specific training they need to support people as they should.

Staff retention has been difficult at times, but there is a core group of staff who have been with the organisation for a substantial period, which gives stability to the support people receive every day. Employee supervision records show care workers are given the opportunity to discuss any issues they wish to raise in three-monthly meetings with their manager. All care workers we spoke with said they are happy with the support they receive from the senior staff team. One employee said, "*They are always around if you need anything. Very helpful too.*"

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