



Inspection Report on

ND Care and Support Cwm Taff

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Date Inspection Completed

23 January 2024

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About ND Care and Support Cwm Taff

Type of care provided	Domiciliary Support Service
Registered Provider	ND Care and Support Limited
Registered places	0
Language of the service	English
Previous Care Inspectorate Wales inspection	11 November 2022
Does this service promote Welsh language and culture?	The service is working towards providing an 'Active Offer' of the Welsh language.

Summary

New Directions Care & Support is a domiciliary support service which offers care and support to people in their own homes.

People we spoke with are generally happy with the care and support they receive from their regular care workers. Personal plans are accurate, regularly updated, and clear to follow. People are feeling in control of their care and can develop relationships with familiar care workers. People may be supported by care workers who are not sufficiently trained to meet their specific needs.

We identified continued non-compliance at this service since the last inspection. Although improvements are now being made, progress is not sufficient. As a result, we have re-issued two areas for improvement. Care Inspectorate Wales (CIW) will reinspect the service to ensure compliance is achieved within the specified timescales.

Well-being

People are treated with dignity and respect. People told us the practice of most care workers is positive and they receive care and support from some care workers that know them well. People spoke positively about their relationships with most of their regular care workers. People described their them as “*superb*”, “*they really listen...they have been absolutely wonderful*”, “*they are all a lovely team*”, “*we have regulars here every day, it’s starting to get better*”. The provider made Christmas a special time for some of the people using the service.

People can be confident they get care at the right time but not always the right approach. The provider needs to ensure care workers training is more robust and individually tailored to ensure people receive timely and skilled interventions and approaches.

People are not kept as safe as possible, from harm and abuse. We found ineffectual audit and oversight systems. We found a lack of action and analysis of lessons to be learnt in response to accident and incidents, to improve the practice of care workers and reduce future risks to people. We found discrepancies in record keeping and information sharing. We found higher management and CIW do not have a true and accurate understanding of the scale of concerns and safeguarding allegations head office receive.

There are governance arrangements, oversight systems and policies and procedures in place, but these require revision and improvement to provide a service which promotes safety, quality, and people’s well-being. Care workers are robustly vetted and checked before working at the service, they receive regular supervision and are positive about the management at the service. Staff and people told us progress is being made and people are seeing improvements at the service.

Care and Support

Overall, people and their representatives are happy with the care and support they receive. Care workers arrive on time and stay the full duration of a visit. Most people know who is visiting beforehand. People told us care workers complete what is needed when they visit. Most care workers are motivated in their role and want to provide a good standard of care.

People cannot be confident all care workers will have the right knowledge, skill, and competence to best support them. Care workers lack sufficient training in line with the needs of people support. We found no positive behaviour support (PBS) guidance in place for those that require it. We have identified, again, an area for improvement in relation to this because the provider has not addressed this since the last inspection.

People's individual circumstances are considered. Information within people's care records is personalised, outcome focused and considers people's preferences and strengths. Personal plans contain clear information regarding people's risks and are regularly reviewed. We found good quality personal plans which are detailed and up to date documents, in line with best practice guidelines. The provider has informed us that information about people's own care can be made available to them on their request.

People are supported to achieve optimum physical health and well-being. The service provider works in partnership with professionals to enable people to live at home for as long as possible. We saw good evidence of timely communication and referrals to district nurses and occupational therapists, when changes to a person's mobility or skin is identified.

People are supported to take their medication on time, there are infection control measures in place and care workers have access to personal protective equipment (PPE). Care records provide clear guidance to care workers on the support they are required to provide with medication. Regular routine medication audits are completed but medication practices and oversight of actions completed require strengthening.

Leadership and Management

We found safe staff recruitment checks, regular supervision, and routine monitoring checks of staff. Improvements have been made by management to ensure that most care workers are now registered with the workforce regulator, Social Care Wales (SCW). Care workers feel supported and valued in their roles and confirmed the management team are approachable. The RI completes regular visits to the service and quality of care reviews, which have improved since the last inspection, but continue to require strengthening.

Governance arrangements have improved but require embedding and continued development. Care workers and people using the service, told us they have seen improvements in the operation of the service over recent months. People told us their delivery of care feels more organised and communication with head office has improved.

The service provider must ensure there are effective arrangements in place for the monitoring, reviewing, and improving the quality of care and supported provided. This is an ongoing area of non-compliance since the last inspection. We found ineffectual auditing and review systems in place to maintain oversight of information in care records, incidents, and concerns. Leadership and management do not appropriately investigate and analyse accident and incidents to implement actions and learn lessons to prevent further events. We found a lack of training needs analysis within the organisation to highlight discrepancies in staff knowledge and competencies compared to the needs of people who use the service. At this inspection, we also found ineffectual policies and procedures that need to be updated in line with the most recent national guidelines. Due to this, we have re-issued an area for improvement.

People benefit from care and support from a service provider that shows a commitment to improve to provide a quality service. Leadership and management are identifying, addressing, and acting in response to our feedback. Action plans are being developed to address shortcomings. We will test the outcome of this at the follow up inspection.

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
36	The service provider must ensure that any person working at the service receives training appropriate to the work to be performed by them.	Not Achieved
8	There are ineffectual systems, audits and action plans in place to monitor the service and take action when problems are identified. These systems are required to ensure that people are safe, receive a quality service and action is taken when necessary.	Not Achieved
16	Personal plan's are not reviewed as and when required or at least every three months.	Achieved

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