



Inspection Report on

Walsingham Support Domiciliary Service Wales

Forge Fach Community Resource Centre
Hebron Road Clydach
Swansea
SA6 5EJ

Date Inspection Completed

09/12/2020

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About Walsingham Support Domiciliary Service Wales

Type of care provided	Domiciliary Support Service
Registered Provider	Walsingham Support Domiciliary Service Wales
Registered places	
Language of the service	English
Previous Care Inspectorate Wales inspection	17.02.2020
Does this service provide the Welsh Language active offer?	Yes

Summary

Walsingham Support Domiciliary Service Wales is a domiciliary support service for people with learning and/or physical disabilities over the age of 18. The head office is in Swansea. Support is provided in supported living settings where people have their own tenancies in Neath Port Talbot and Swansea, which is within the Swansea Bay partnership region. The Responsible Individual (RI) is Mick Burgess and there is an operations manager in post who is registered with Social Care Wales. There are registered locality managers and deputy managers that cover various locality areas. People receive a good service from Walsingham with a team of care staff who are well trained and dedicated to their work. The management team are visible in the running of the service. There are robust systems in place to ensure there is oversight of the quality of domiciliary support service delivered.

Well-being

People contribute to decisions that affect them. Assessments and personal care plans viewed were of a very high standard; outcome focused and included contributions from others including relatives, professionals and advocates where appropriate.

Communication across the service is highly effective and relatives informed us that managers and staff are very supportive and helpful. Care staff receive the appropriate training to fulfil their roles.

The service is well run and managed. There is clear oversight from the RI and management team. Quality checks are completed appropriately and according to current guidance and legislation. The latest quality of care review report completed by the RI contains detailed and thorough information regarding feedback from people, relatives, quality audits and safeguarding. All care staff told us that they have a positive working relationship with their manager's feeling supported and listened too. Locality managers and care staff stated that they receive regular monthly formal supervision and an annual appraisal and staff files viewed confirmed this. We saw that RI checks are completed, senior management meetings are taking place regularly and that there is good communication across the organisation. Staffing levels reflect people's needs as documented in care plans and assessments.

People are protected from abuse and neglect as care staff know what to look out for and how to raise concerns if they suspect someone's wellbeing is at risk. Care staff receive regular and updated training in safeguarding and have access to clear and detailed policies and procedures to guide them. There are very strong risk management assessments and plans in place to keep people safe and promote independence as far as possible. Care staff receive training in relation to infection control and Covid 19 and there are good supplies of personal protective equipment (PPE).

Care and Support

The service provides a good standard of care and support to people. We spoke to six people receiving a service and five relatives. All spoke very highly of the care staff and managers. One person told us “*staff are excellent I really enjoy working with them*”. A relative informed us “*fantastic communication, they keep us updated*” and another “*they are the best, can't praise them enough*”. Relatives confirmed that communication is very good.

The service provider considers a wide range of information to confirm that the service is able to meet people's needs. We looked at seven care files, all contained detailed information regarding people's needs and personal outcomes. There is strong evidence of person centred planning contained in documentation such as assessments, communication passports, care plans and need to know profile sheets. All of these reflect very clearly the person's contribution towards their care and includes personal outcomes and achievements. One person told us “*staff are excellent I really enjoy working with them. They have helped and supported me*”. Care plans viewed were extremely detailed, thorough and covered areas such as health, skills development, risks, community access, behavioural plans etc. Care plan reviews are completed monthly and reflect contributions from others including advocates. Care staff spoken to showed good knowledge of people's needs one stating, “*I have good working relationships with all the people living here*”. We read the latest quality of care report that details discussion with a person about their ambitions and current progress. For people who lack the ability to fully contribute we saw that advocates and relatives are consulted and legal processes such as deprivation of liberty safeguards (DoLS) had been considered and progressed.

People are safe and risks to their health and wellbeing minimised as much as possible. There are detailed and thorough safeguarding and whistleblowing policies that are in date and updated as necessary. We saw evidence of discussion and learning from safeguarding investigations documented in quality reports by management and discussed regularly at board meetings. All care staff spoken to told us that they had received safeguarding training and that this is updated annually. We saw that information and reporting details regarding safeguarding and whistleblowing are held in each of the supported living settings. Care staff spoken to have good knowledge regarding the importance of safeguarding and their responsibilities. Care staff were wearing the appropriate PPE such as masks and visors throughout the inspection.

Leadership and Management

There are good oversight arrangements in place to ensure the service runs smoothly. The service is managed extremely well by an experienced and dedicated operations manager and responsible individual (RI). Locality and deputy managers directly oversee the individual supported accommodation settings. We looked at policies and procedures and saw that these are thorough, detailed and reviewed as required. There are appropriate and robust quality assurance systems in place. The RI completes three monthly checks of the service provision and six monthly quality of care reports. The most recent three monthly check completed by the RI includes virtual discussions with the manager, a person using the service, locality managers, safeguarding audit information and Covid 19 measures. An easy read version is available for people who use the service. Safeguarding referrals are analysed at quarterly board meetings. Managers complete detailed monthly audit checks in areas such as absence, training and supervision.

Care staff receive training to ensure they are skilled and competent to deliver the service. Care staff told us of online training that they had completed in recent months. We viewed the training matrix and saw that nearly all training for care staff is current and in date. We spoke directly with eight care staff who all confirmed that their training is current and aligns with the statement of purpose (SOP). Care staff told us that they had received a good induction that follows the All Wales induction framework for health and social care. A care staff member informed us “the induction process was good with the right support in place”. We looked at eight staff files and all recruitment documentation was in place including Disclosure and Barring (DBS) checks, which were all current. Supervision and appraisal records are all in date a member of care staff stating, “I have a brilliant relationship with my manager. I receive formal supervision every month and informal support when I need it”. Several managers informed us that they have progressed and been supported to develop their knowledge and skills by attending additional training in areas such as behavioural and service management.

Staffing levels reflect commissioned levels of support and service user needs. We completed virtual inspections of four supported living settings. There were appropriate levels of staffing that reflected people’s needs as detailed in care plans, a care staff member informing us “we have plenty of time and there is a good staff team and cover”. care staff informed us that they are working additional hours due to the current pandemic. The RI and registered manager (RM) told us that recruitment is a priority for the service and something that they are actively looking at.

Environment

The quality of environment is not a theme that is applicable to a domiciliary support service.

However, the service operates from a self-contained office with good facilities for staff and some off road parking. Rooms seen are clean and well equipped, with suitable space for record keeping and locked filing cabinets for the storage of confidential information.

Areas for improvement and action at the previous inspection

None

Areas where immediate action is required

None

Areas where improvement is required

None

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