



## Inspection Report on

**RSD Social Care Ltd**

**R S D Technology Ltd  
Kingsway Fforestfach  
Swansea  
SA5 4DL**

## **Date Inspection Completed**

24/01/2024

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## About RSD Social Care Ltd

Type of care provided	Domiciliary Support Service
Registered Provider	RSD Social Care Ltd
Registered places	0
Language of the service	English
Previous Care Inspectorate Wales inspection	<a href="#">10 November 2022</a>
Does this service promote Welsh language and culture?	This service does not provide an 'Active Offer' of the Welsh language and does not demonstrate a significant effort to promoting the use of the Welsh language and culture.

### Summary

RSD Social Care Ltd is a domiciliary support service for adults over the age of 18 in the Swansea area. The service offices are on the first floor with access to training facilities downstairs in Fforestfach in Swansea. Overall, people receive a good service that meets their needs in their own homes.

People can maintain their independence in their own homes with the support they receive from RSD. Feedback from people about the service overall was positive with most of those spoken with reporting to be satisfied and happy with the care they receive. Personal plans are written in a suitable way for care staff to understand people's support needs and are reviewed regularly and updated as needed.

There are good procedures in place to support care staff and those spoken with feel very content and happy in their roles. Improvements have been made to the frequency of supervision and appraisals. Core mandatory training of care workers is prioritised and mostly up to date. There is an established and respected manager in post who is visible in the service daily, they are supported by the responsible individual (RI). Feedback about the management of the service is positive. There are auditing tools and systems in place to maintain oversight of the service.

## Well-being

People have a voice and are encouraged to contribute to their care plan and make improvements to the service. Assessments are carried out with people before the provision of care, during these assessments people tell the service what support they require. Personal plans contain this information in a way that care staff can support them appropriately. People are encouraged to complete satisfaction surveys on a regular basis to share their views of the service. The RI visits people to obtain their feedback on the service to drive improvements.

People overall, are treated with dignity and respect. People told us that the care staff who support them are generally caring and compassionate overall and support them appropriately. Care workers are supported and feel valued in their roles and have completed suitable training and developed skills to be able to provide the service as required.

People are protected from the risk of harm and abuse. Care staff receive mandatory safeguarding training as part of their role and those spoken with have a good understanding of their responsibilities and how to report any concerns they have about people. Care staff are vetted and recruited safely to ensure they are suitable to work with people. The provider has policies and procedures in place to guide care staff on how to support people safely.

People's physical, mental health and emotional wellbeing are promoted. On the whole, people have a good rapport with the care staff supporting them. There are good systems in place to support people with medication in the service. People are supported to seek medical help at times of need.

There is good oversight of the service. The experienced manager in post is respected by the staff team and has years of experience in the sector. There are good tools in place to oversee elements of the service to ensure it continues to meet the needs of people. The manager is supported by care coordinators who have designated roles to support the overall management of the service.

People are not able to receive the service in Welsh if they want it. Most care workers in the service are from overseas and are non-Welsh speakers. Despite this there is no demand for the service to be delivered in Welsh at present. The provider is aware of the 'active offer' to provide the service in Welsh and will look to address this should the demand change.

## Care and Support

People have accurate and up-to-date personal plans in place to detail how their care is to be provided in order to meet their needs. We viewed eight care files and saw information on people's care and support needs is accurate and up to date. We looked at care files in the community which are the same as those seen in the office with signatures of people visible to evidence their agreement. People told us their care needs are being met by the care team and are grateful for the support to be able to stay in their own homes. Personal plans are written in an easy-to-understand format which care workers confirmed. These plans could be improved further with more background history and information about what matters to people available for care staff. Feedback from people about the service overall was positive, comments included *"in the main they are very good"*, *"they are a lot more stable than the previous provider and they are far more reliable,"* and *"I can't think of any grumbles with them at all"*.

The service has safe systems for medicines management in place. We saw medication administration record (MAR) charts and viewed these in people's homes. We found MAR charts are completed appropriately. Additional medication support, for example 'as needed' (PRN) medication and topical medications, are also recorded appropriately as required by the local authority medication management team. The manager told us, only care workers who have completed competency training in medication are able to assist people with medication. We heard that competency training was arranged for the week of the inspection and saw that over half of the staff are up to date with their training. We saw electronic records of medication audits in place in the office which are then forwarded to the local authority medication management team. Medication errors are reported promptly and investigated as required to minimise the risk of re-occurrence.

The service has mechanisms in place to safeguard people who receive the service. On the training matrix, we saw, all staff have completed and are up to date with safeguarding training and are aware of their responsibilities to report any concerns they may have. We saw the service manager passes on concerns appropriately to the local authority safeguarding team and works closely with them to resolve any issues when required. The policy for safeguarding is reviewed as required and it contains a working electronic link to the All-Wales safeguarding procedures.

## Leadership and Management

The service provider has governance arrangements in place to support the smooth operation of the service. There is an electronic call monitoring system in place, this is monitored by office staff and care coordinators to ensure calls take place within the given time as much as reasonably possible. This minimises the risk of missed calls and care staff are locatable. We saw regular audits take place by the management team which include daily records, care plan reviews, staff supervision and appraisal, training, and care staff registration to ensure these are completed at the appropriate timescales. Care coordinators are responsible for different areas within the borough which gives people receiving the service consistent contact in the office. Policies and procedures are in place to support the smooth running of the service, these are attached to the service's Statement of Purpose (SOP). This document details the service's aims and objectives and how it will deliver it.

People are supported by a service that provides appropriate numbers of staff who are suitably fit and have the knowledge, competency, skills, and qualifications to provide the levels of care and support to them. There are good systems in place to recruit safely, support, and train care workers in the service. We looked at six personnel files and saw documentation in place for safe recruitment including identity documentation, background checks and up-to-date Disclosure and Barring Service (DBS) checks. The provider has recruited many staff through the sponsorship of foreign workers to assist with filling ongoing vacancies in the sector. Feedback from care staff is very positive in relation to them feeling valued and given opportunities to develop within their roles. The training matrix was viewed. Most of the service's mandatory training requirements are 100% up-to-date by all staff, this includes manual handling, food hygiene and first aid. Improvements have been made to the frequency of supervision and annual appraisals and all personnel files case tracked had these in place, as well as additional observational spot checks. The service has worked hard to ensure that care staff are registered with Social Care Wales (SCW), the workforce regulator. We noted that almost all staff are either registered, awaiting their registration, or working towards this.

The provider has arrangements in place for the effective oversight of the service through ongoing quality assurance. The RI visits people on a routine basis to obtain their feedback on the service. People are also encouraged to complete feedback surveys which are analysed and detailed in the bi-annual quality of care review. This feedback is used to identify any actions that need improvement in the service. At the time of the inspection CIW had not received any notification from the service for some time, this was discussed with the manager and assurances given that this would be addressed. Since completion of the inspection visits, notifications are now being received as required so an area for improvement has not been raised.

### Summary of Non-Compliance

Status	What each means
<b>New</b>	This non-compliance was identified at this inspection.
<b>Reviewed</b>	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.
<b>Not Achieved</b>	Compliance was tested at this inspection and was not achieved.
<b>Achieved</b>	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	Supervision and appraisal is not being completed at the required timescales to meet the regulations	Achieved



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