



## Inspection Report on

**Drive Gwent**

**Drive  
Unit 8  
Cefn Coed  
Cardiff  
CF15 7QQ**

**Date Inspection Completed**

03/02/2023

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## About Drive Gwent

|  |   |
|--|---|
| Type of care provided                                      | Domiciliary Support Service   |
| Registered Provider  | Drive   |
| Registered places  | 0   |
| Language of the service                                    | English   |
| Previous Care Inspectorate Wales inspection                | <a href="#">09 November 2021</a>  |
| Does this service provide the Welsh Language active offer? | This service is working towards providing an 'Active Offer' of the Welsh language and demonstrates a significant effort to promoting the use of the Welsh language and culture. |

### Summary

Drive provides care and support to people in their own homes throughout Wales. This report covers the Cwm Taf, Gwent and Western Bay areas.

People using the service receive a good standard of person-centred care and support. Personal plans contain detailed information setting out the best ways of supporting people to achieve their personal outcomes. There are processes in place to maximise people's engagement and monitor their progress in relation to activities, daily living skills and overall health and well-being. A multi-disciplinary team approach is used to support people with complex needs and there are risk assessments in place to ensure people are safe.

The governance and quality assurance of the services are strong. The Responsible Individual (RI) and senior management team take an active role and have good oversight of service delivery. People are regularly asked about the service they receive, and their views help inform improvements. Care workers are trained to meet the needs of the people they support and feel supported and valued. There is a robust recruitment process in place ensuring care workers possess the skills and attitude necessary for working in the care sector.

## Well-being

The service has systems in place that help protect people from harm and abuse. Risks to people's health and safety are thoroughly assessed and effectively managed. Care workers receive safeguarding training and are aware of their safeguarding responsibilities. Policies and procedures such as safeguarding, and whistleblowing are kept up to date and outline the process for reporting concerns. Care workers adhere to infection prevention and control measures and have access to a plentiful supply of personal protective equipment.

People are supported to maintain optimum health and have access to a range of health and social care provision. People's overall health and well-being is closely monitored, and concerns are reported to the relevant professional for investigation. People are supported to engage in a range of activities promoting their well-being and keeping them active and engaged. Support is available for people with medication needs and there are measures in place to ensure people receive their medication safely, in line with best practice guidance.

People are treated as individuals and care and support is delivered in a dignified respectful manner. Personal plans are tailored to people's specific needs and are devised with input from people, their representatives, and other professionals. Documents detailing people's history and their likes and dislikes are present. People can do the things that are important to them and are encouraged to develop to their full potential. We observed people being treated with warmth and kindness. Positive feedback from people and their representatives suggests the service provides a good level of care and support.

## Care and Support

People are happy with the service they receive and have good relationships with care workers. We witnessed positive interactions between care workers and people during the time we spent visiting some of the supported living services. We saw care being delivered in a dignified, respectful manner. Care workers appeared to know the people they support well and are familiar with their routines and preferences. People we spoke to provided consistently positive feedback regarding care workers and used words like “wonderful”, “nice” and “very good” to describe them. A relative of a supported person told us, “*The staff are marvellous. They always do their best*”.

The service adopts a person-centred approach to care delivery. This means care and support is tailored to people’s individual needs. Personal plans are produced in conjunction with people, their representatives and where necessary the multi-disciplinary team. Personal plans highlight people’s outcomes and set out strategies on the best ways to support people to achieve these outcomes. Specialist plans such as Positive Behaviour Support Plans (PBS) are in place to ensure people’s behavioural needs are managed in a safe respectful manner. Risks are assessed and managed using a positive approach where the benefits of taking risks are also considered. All care documentation is reviewed regularly in line with regulation.

The service encourages people to maximise their independence. This is done by utilising the ‘Active Support’ model. This approach ensures people of all abilities are appropriately supported in a range of activities. Participation in each activity is closely monitored to show progress or deterioration. We saw evidence in people’s personal plans showing people have access to a wide range of varied activities including general household tasks as well as leisure pursuits. People using the ‘Supported Living’ service are supported to understand their tenancy agreements. We saw the service works with housing providers to produce easy read information for people who experience communication difficulties. Other methods such as ‘social stories’ are used to inform people who do not understand conventional ways of communicating.

People have access to the right care at the right time. Personal plans we examined contained extensive information in relation to people’s health and well-being. We saw evidence of appointments and correspondence from a range of health and social care professionals such as social workers, psychologists and behavioural experts. We also saw care and support plans have been updated following advice from various professionals such as the speech and language team. Capacity assessments and best interest decisions are in place where people lack the capacity to make decisions regarding their care and support. Medication is stored and administered in line with best practice guidance.

## **Environment**

This domain is not considered as part of a domiciliary inspection. The agency offices are suitable for their intended use with secure storage facilities.

## Leadership and Management

Care workers are recruited following a safe recruitment process. We sampled a number of personnel files and found all of the required pre-employment checks have been completed. These include Disclosure and Barring Service and employment history checks. Supported people are involved in the recruitment process and make up part of the interview panel. This is to ensure they are involved in choosing the people who provide their care and support. We saw evidence of a structured induction programme where new employees receive training and get the opportunity to shadow experienced members of staff. Care workers spoke positively of this process, with one saying, *“The way they did the induction was very good”*. And another saying, *“I had an induction, and I did two weeks shadowing, it was very useful, I got to learn people’s routines”*.

The service sets high standards for itself and is committed to on-going improvement. This is achieved by adhering to its robust governance and quality assurance measures. The service appears to be well led with the RI and senior management team having good oversight of service delivery. The RI regularly speaks to people, their representatives, other professionals, and staff to help improve the service provided. The RI is up to date with all their specific duties including visits and quality of care reviews. A performance report is also produced on an annual basis highlighting the services achievements. This document is available in an easy read format so supported people have access to the information.

People are supported by a staff team who feel valued and supported in their roles. Care workers have regular one to one meetings with their manager where they discuss their practice and development opportunities. Records we sampled relating to supervision and appraisal show care workers are receiving the required level of formal support. The senior management team have a visible presence and are involved in the day to day running of the service. We spoke to many care staff whilst inspecting the service. All provided positive feedback saying they enjoy their work and feel valued and supported by the management team.

Care workers have access to an on-going programme of training and development opportunities. Most employees hold a recognised qualification in care. The service provides core and specialist training. Care workers we spoke to were positive about training provision saying it equips them with the skills necessary for providing good quality care and support. Records relating to training provision show the service is mostly compliant with its training requirements.

### 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 |
|------------|---------|--------|
|------------|---------|--------|



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

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