



## Inspection Report on

**South Wales Community Service - Cardiff and the Vale**

**Cardiff Autism Centre, Unit B3/b4  
Cook Court  
Pacific Business Park Pacific Road  
Cardiff  
CF24 5AB**

**Date Inspection Completed**

*23/02/2022*

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## About South Wales Community Service - Cardiff and the Vale

Type of care provided	Domiciliary Support Service
Registered Provider	National Autistic Society
Registered places	0
Language of the service	English
Previous Care Inspectorate Wales inspection	This is the first inspection since the service re-registered under the Regulation and Inspection of Social Care (Wales) Act 2016.
Does this service provide the Welsh Language active offer?	The service is working towards providing an 'Active Offer' of the Welsh language and intends to become a bilingual service or demonstrates a significant effort to promoting the use of the Welsh language and culture.

### Summary

People are very happy with the service they receive and speak highly of the care staff who provide their care and support. Care staff continuity is excellent which benefits people who are unable to cope with change, and enables good working relationships to be built. Care staff are well trained and feel supported by the management structure in place. Care documentation is thorough, robust and clearly indicates how individuals prefer to be cared for. Personal plans are person centred and outline people's likes and dislikes; these documents are reviewed and updated regularly or when needs change. There is information on specific conditions and how it affects the person. Recruitment is safe and robust as all staff are subject to pre-employment checks. There are robust policies and procedures in place for the running of the service and management understand the requirements of caring for vulnerable adults and children. The Responsible Individual (RI) has good oversight of the service and documents quarterly visits to the service. Quality assurance monitoring takes place as required and clearly documents how improvements can be made within the service.

## Well-being

People have autonomy over their lives. Care packages are developed with individuals and their families and focus on meeting people's well-being outcomes. Care documentation is person centred and detail people's likes, dislikes and how they prefer their needs to be met. Care files contain specific information about people's conditions and how they impact on the individual being cared for. Personal plans are reviewed regularly and include the views of people and/or their representatives. No changes are made to care delivery without consultation with people and/or their representatives. People have access to a complaints processes and their views are sought as part of quality assurance processes. People told us they receive an excellent service and have no concerns with any aspect of their care delivery.

People can be assured their needs are met. Care staff are matched to the people they support, have a good understanding of their needs, and how they are best supported. Continuity of care staff is very good which enables positive working relationships to be built, and care to be provided in a consistent way. Care staff receive appropriate training to enable them to undertake their roles, and can access additional training if necessary or they have a specific interest. Staff have regular formal supervision and tell us they feel well supported by the management structure in place. Staff say they feel confident they can raise any issues. South Wales Community Service work closely with external professionals and ensure that information and guidance is fed into personal plans and followed correctly.

Individuals can be confident they are protected from abuse and harm. There are robust policies in place in regards to safeguarding both vulnerable adults and children. All staff receive training into the safeguarding of children and adults at risk of abuse, which is refreshed annually. The RI and manager understand safeguarding requirements and make referrals to the Local Authority as required. Referrals are then stored centrally with outcomes recorded. Quality assurance processes and RI visits review safeguarding referrals and complaints to the service, with the aim to ensure lessons are learned. Quality assurance processes also indicate where improvements are required. Staff are recruited safely. Pre-employment checks including references and Disclosure and Barring Service (DBS) certificates are applied for prior to commencement of employment.

## Care and Support

People can be assured they get the right care at the right time. People using the service have complex needs and require very specific support by care staff who understand their needs. Care packages are bespoke and built around people's specific needs and well-being outcomes. Care documentation is person centred and clearly outlines people's likes, dislikes and how they prefer their care to be delivered. There is information available to care staff on specific conditions and how they impact on the individual being cared for. Personal plans are devised with family and professionals involved in people's care, and are reviewed regularly. Reviews are important as they ensure any changes are captured swiftly, and documents are accurate and up to date. Staff continuity is extremely important. Staff are matched to individuals, and provide their care at set days and times each week. We viewed a selection of staff rotas and saw continuity of care staff is very good. People we spoke with are very complimentary of the service and one person told us, "*the staff member is a perfect match, and provides an amazing service*".

People are treated with dignity and respect. Care staff receive relevant training and tell us they feel well equipped to undertake their roles. Care staff have good working relationships with the people they care for and their families, providing care with kindness, patience and compassion. Care staff understand people's needs and how they are best met. People we spoke with told us care staff are polite, friendly and respectful, and one person described care staff as "*professional and trained to a high standard*". We saw evidence the service engage well with external professionals, and ensure that any specific guidance or advice is fed into personal plans and followed correctly. People and/or their representatives are fully involved in the care planning and review processes, with the person's well-being outcomes being the main focus at all times. The voice of the person being cared for is evident throughout all documentation and personal plans. One person told us "*staff fit the care around my relative and not around themselves*". People told us care staff arrive on time and do everything they need them to do.

## Leadership and Management

People benefit from effective leadership and management at the service. The RI has good oversight of the service and the manager is registered with Social Care Wales, the workforce regulator. The manager oversees the day to day running of the service supported by a deputy manager, and the RI has overall accountability for the service. There are policies and procedures in place for the smooth running of the service, and people have access to a robust complaints system if they are unhappy with the service. Since registration no complaints have been recorded. The manager and RI understand legal requirements in regard to caring for vulnerable adults and children, and liaise with the Local Authority safeguarding team when necessary. Any referrals are stored centrally with outcomes recorded and are audited regularly. This is important as it gives opportunity for themes and patterns of abuse to be monitored and lessons to be learned. The service is committed to providing a quality service, and has robust quality assurance processes in place which take into account the views of people. The RI undertakes regular visits to the service and produces a written report of their findings.

People can be assured that they are cared for by staff who are well trained and supported. We viewed the staff training matrix and saw staff attend training that is appropriate to their roles, with the majority of staff being up to date with their training. Staff we spoke with told us if they identify any courses they wish to attend the management will look to arrange this. All staff receive regular formal supervision regularly which is important as supervision is an opportunity to discuss and reflect on care performance or needs in a forum that is recorded. Staff told us they feel well supported and one person said "*the management work hard to accommodate our needs and look after our well-being*". We examined a selection of staff personnel files, and found they contain all required information. We saw evidence that pre-employment checks take place before employment is offered, which is important as these checks determine a person's suitability to work with vulnerable people. There is a system in place to ensure that DBS certificates are renewed every three years or checked annually for staff on the update system.

### 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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