



Inspection Report on

Rumney Care

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Unit 6 Castleton Court
Fortran Road
Cardiff
CF3 0LT**

Date Inspection Completed

07/09/2022

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About Rumney Care

Type of care provided	Domiciliary Support Service
Registered Provider	Rumney Care and Ambulance Service Ltd
Registered places	0
Language of the service	English
Previous Care Inspectorate Wales inspection	Click or tap here to enter text. 24 January 2021
Does this service provide the Welsh Language active offer?	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

People are very happy with the service they receive and speak fondly of the care staff who support them. People feel they receive a quality service from staff who are kind, caring and professional. Care documentation is generally completed correctly but improvements are required to ensure people's needs are fully captured and documents are reviewed. Care staff are happy working at Rumney Care and receive formal supervision, but improvements are required to staff training. Recruitment processes are in place, but the provider must check validity of references received and evidence that care workers work within the conditions of their visas. There have been some recent changes to office staff and management within the agency and so the Responsible individual (RI) needs to ensure there is always effective oversight of the service and sensible decisions made to ensure that there is a good balance of skill and experience. Staff rotas are prepared correctly but actual call times are not being logged accurately to indicate where staff are at any given time. There are robust policies and procedures in place for the running of the service and complaints seem to be taken seriously and dealt with correctly. Improvements are required to quality assurance reports to ensure they contain all required information. The provider must ensure that referrals are made to the local safeguarding team when required and notifications are made to us (Care Inspectorate Wales) in line with regulatory requirements.

Well-being

People are supported to have autonomy over their lives. Care plans are individual and contain the views of the person being cared for, but the provider must ensure all pertinent information is included and plans are reviewed regularly, to accurately reflect the person's changing care and support needs. People are given a service user guide which clearly outlines what they can expect from the service. The document contains information on how to complain if people are not happy. Complaints to Rumney seem to be taken seriously and dealt with appropriately. People's views of the service are sought as part of the quality-of-care-review, but improvements to the quality assurance report must be made. Care staff have good relationships with the people they support and people are very happy with the care they provide. Care is delivered with respect, kindness and care by staff who understand the needs of the person they care for. Care staff continuity is good and enables people to have their care delivered in their preferred way. Improvements are required to the logging of visits undertaken so the provider can be fully informed of care call duration and location of staff at all times.

Improvements are required to ensure people are protected from abuse and harm. There are robust policies and procedures in place including a policy outlining how to safeguard adults at risk of abuse, but we noted that the service had failed to report at least two safeguarding matters to the Local Authority safeguarding team. The provider has also omitted to inform us of several events notifiable within the regulations. The RI is present at the service and engages well with staff and people who use the service, but oversight of the service operation on a day-to-day basis needs to be improved. Staff feel well supported and mostly competent to undertake their roles, but staff training needs to be recorded more robustly to make it clear what training is required and when. Staff recruitment is generally safe with pre-employment checks completed prior to employment, but the source of references should be checked. In addition, the provider must be able to evidence that care workers who are subject to working visas comply with the conditions applied to them. There is a system in place to ensure Disclosure and Barring (DBS) certificates are renewed every three years. The provider must ensure that workforce are in a position to register with Social Care Wales, (the workforce regulator), when this becomes mandatory.

Care and Support

People told us they are treated with dignity and respect. Care staff say they have positive relationships with the people they support and their families. People we spoke with told us that they are very happy with the care they receive and “*couldn't fault the carers*”. People told us that care staff are “*polite, friendly, helpful and professional*” and one person said their visits “*cheer my spouse up no end*”. People told us that staff arrive on time, stay the full duration of the call, and complete all required tasks. This is not well evidenced in the call record documentation. The manager and RI explained that this was due to instances of staff forgetting to sign out of calls, resulting in a lack of ‘real time’ recording. This undermines the integrity of information, and we required that this must be addressed immediately. People using the service also said that ‘office staff’ are great and keep them updated of any rota changes or inform them if staff are running behind. People have access to information about the service and what they can expect which includes details of external organisations they can contact if they are not happy.

People mostly get the right care at the right time, but improvements to care documentation is required. Prior to the service commencing an assessment takes place of individual needs and how people would like their needs met. This needs to properly explore the complexity of need that people present with and determine whether the staff have sufficient skill and expertise to meet the care and support of the individual. Where placing authority information is scant, this should be challenged, and sufficient information received prior to agreeing to deliver care. Care call times are agreed and what tasks should be completed during the calls is documented, along with people’s likes, dislikes, and preferences to how they wish their care to be delivered. Care plans and risk assessments generally contain basic information, but we noted that two service users care plans were lacking some pertinent and important information. The service is behind with care plan reviews which poses a risk of the documents being inaccurate. For example, we saw a well compiled personal plan for one person, which was personalised and informative. However, the person’s condition had rapidly deteriorated to the point where the person’s care needs were palliative and highly dependent. This information would be critical for new or agency staff. Staff rotas are prepared in advance and include sufficient time for staff to travel from and to care calls. We noted a significant number of discrepancies with actual call recording documents which make it impossible to identify where staff are or how long they have taken in a call. Whilst no immediate action is required these are areas for improvement and we expect the provider to act. Staff continuity at Rumney care is good which enables people to build good relationships with the people who provide their care. Good continuity also ensures that people received their care their preferred way. During one visit to a service user’s home, we overheard staff discussing a person’s care needs which enable us to conclude that the staff knew the person well and had good knowledge of their needs.

Leadership and Management

Improvements are required to the leadership and management. Rumney Care benefits from an RI who is at the service daily, but improvements need to be made to the oversight of the service. A new manager and office staff have recently been recruited, and whilst they have experience of other roles within the service, they are new to the current role and require support and training to ensure they are effective and competent. Quality assurance monitoring of the service takes place regularly and the views of people using the service are sought. Reports are produced to support the process but improvements are required to ensure that they contain required information in line with regulations. We have advised the provider that these are areas for improvement, and we expect them to act. The provider has failed to make safeguarding referrals to the Local Authority and has failed to notify us of several events that they are legally obliged to. We have advised the provider that they must take immediate action to address these issues.

People are supported by staff who feel valued and well supported. Care staff we spoke with told us that they are happy working for Rumney care and feel equipped to undertake their roles. One person said, "*we are looked after well*". Most staff have recently received a formal supervision with the manager. Supervision is important as it is an opportunity to discuss practice issue and needs in a setting that is recorded. We viewed the staff training matrix and found that some staff have not attended some training courses and others are overdue refresher training. Employee records show that much of the training people have undertaken has been whilst in the employ of their previous workplaces. The RI feels that some training has not been recorded on the matrix but has given assurances that the issue will be addressed. We examined a selection of staff personnel files and found that generally recruitment is appropriate. Pre-employment checks including DBS certificates and references are applied for prior to employment commencing. We saw an occasion where a reference was received from a family member and advised the provider that reference checks should be completed. We have advised the provider that this is an area for improvement, and we expect action to be taken. There are appropriate policies and procedures in place and complaints to the service are taken seriously. People we spoke with told us that they have never complained but would feel confident to do so if needed.

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
36	The provider must ensure that all staff attend required training and receive an appropriate induction. Staff training should be refreshed in line with company policy.	New
60	The provider has failed to notify CIW of significant incidents that have occurred at the service.	New
27	The provider failed to notify the safeguarding team of an incident that they suspected to be neglect.	New

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
6	The provider must ensure that they have oversight of the service to ensure that it is being managed correctly at all times.	New
15	The provider must ensure that care plans contain all significant information relating to the person being cared for with detailed guidance on how staff should meet the needs.	New
16	The reviews of personal plans are not taking place within required timescales.	New
34	The provider has recently recruited some staff who lack experience and knowledge of working in a domiciliary care setting.	New
35	Some staff files were missing some required information.	New
41	The care staff rotas that indicates actual call delivery are inaccurate and do not evidence exactly where staff are and how long they are spending in care calls.	New
80	The provider is not completing quality assurance reports in line with regulatory requirements.	New

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