



Inspection Report on

Sense Tonypandy Domiciliary Support Services

**Touchbase Cymru (Wales)
Caerphilly Business Park
Van Road
Caerphilly
CF83 3ED**

Date Inspection Completed

19/07/2023

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About Sense Tonypandy Domiciliary Support Services

Type of care provided	Domiciliary Support Service
Registered Provider	SENSE, The National Deafblind and Rubella Association
Registered places	0
Language of the service	English
Previous Care Inspectorate Wales inspection	7 July 2022
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

People receive person-centred care and support to help them have control over their lives. Feedback from people using the service, their relatives, and staff is very positive. People benefit from person-centred care and support documentation which are reviewed regularly and direct staff around how best to support them. People are supported to safely manage their medication. Arrangements are in place to make sure safeguarding concerns and complaints can be raised. Infection control measures are of a good standard. The service has relevant policies and procedures in place. The service has auditing systems and meets the legal requirements in relation to Responsible Individual (RI) visits and quality of care reviews. Care staff are recruited following recruitment checks, receive regular supervision and training, and feel supported in their work.

Well-being

People are supported to have control over their day-to-day lives and do the things that matter to them. Personal plans consider people's needs, interests, and preferences. Staff know people well and respect and promote choice. Detailed risk assessments are in place to promote positive risk taking. Care and support is person-centred, with people treated with dignity and respect. People are offered regular opportunities to take part in activities and to access the community. We saw very good examples of individual activity plans, with an emphasis on people accessing their local community. Systems are in place for staff to record care delivery, which are used to monitor people's well-being and are audited by the service manager. Care staff support people to maintain their home environment to a very high standard, working with the landlord to address issues when they arise. The service has good relationships and lines of communication with relatives, who tell us staff keep them informed, updated and closely involved in people's care and support.

People are supported to be as healthy as they can by getting the right care at the right time. The service works with external health professionals to refer any concerns and follows appropriate guidance. We saw evidence of correspondence with professionals, with personal plans being updated and reflecting direction given. Detailed behavioural support plans are produced by the service in partnership with people, their families, and their health and social care workers. Care staff receive specialist training where this is needed, for example in supporting people with sensory impairments.

People are protected from abuse and neglect through measures promoting safe working practices. The service is proactive in identifying potential risks to people or employees and how to manage these. Care staff know their safeguarding responsibilities and how to report issues if they are concerned for a person's well-being. Care staff feel confident if they raise an issue with the manager, it will be responded to. Policies and procedures help support care staff to ensure people are safe. Care staff have access to a wide supply of personal protective equipment (PPE) and receive relevant infection control training. Recruitment is robust, and regular supervision supports continued staff development. Incidents and accidents are logged, and appropriate actions taken by the service. Ongoing quality assurance audits ensure systems remain effective and improvements are identified and addressed.

The service does not provide a service to people in Welsh and could not currently facilitate this if it were needed.

Care and Support

Care staff have very positive relationships with people and provide good quality care. Interactions between care staff and people are warm and attentive. People and their relatives told us *“I’m happy”* and *“I love it here”*, care staff are *“really good”*, they *“always take families’ views on board and ask our advice”*, *“I absolutely feel my loved one is safe”* with care staff, and the manager has *“really turned the place around”*. Care staff know the people they support well and are able to provide detailed information about their needs which corresponds with information in people’s care files. Care staff use various skills and methods to support people’s communication, which promotes inclusion and aids their well-being. Communication from the service is very good, for example telling families if there are any issues and consulting with them about people’s care and support.

Care staff have up-to-date knowledge of people’s needs. Personal plans are person-centred and detailed and give direction to care staff around how best to support people. Detailed risk assessments are in place to direct care staff with the measures they need to take to help people stay safe. This includes specialist behavioural risk assessments which support people’s independence and community participation. Plans are produced in partnership with people and their representatives and are reviewed regularly with them. This is an improvement since the last inspection. We discussed with the manager ways to strengthen detail of people’s outcomes in their care and support documentation. We saw very good examples of care documentation being produced in an accessible easy-read format, to help people better understand their care and support. We also saw excellent practice in people having access to their care documentation, which they actively read. Daily recordings and monitoring charts are in place, giving important information about people’s progress and identifying changes in care needs. We saw evidence of appropriate referrals to health professionals and agencies, and ongoing partnership working by the service with their multi-disciplinary colleagues.

There are systems in place to support people with their medication. Medication administration records give care staff instructions on how to administer in line with the prescriber’s directions. Care staff receive training on how to manage and administer medication. A medication policy is in place. People’s medications are audited daily by care staff.

There are infection control measures in place to help keep people safe from the transmission of potential sources of infection. Staff have access to a supply of appropriate PPE. Staff have received training on infection control and understand their responsibilities around this.

Leadership and Management

People are supported by a team of well-trained care staff who are recruited safely. There are appropriate recruitment arrangements, with all legally required information in place such as up-to-date Disclosure and Barring Service checks and proof of identity. Care staff start work once pre-employment checks are completed. New care staff complete an induction programme. Training records show care staff have up-to-date training in core and specialist areas of care. Staff feel well trained and receive regular training on an ongoing basis. Care staff are registered with the workforce regulator, Social Care Wales.

Care staff feel very supported in their role and enjoy working for the service. They told us working for the service is “*great*”, they “*absolutely love it*” and “*love the atmosphere*”, “*it’s like a big family*”, and the management “*understand and help*” and are “*good as gold*”. Several of the staff have worked for the service for many years from when it started, helping facilitate continuity of care. Care staff have regular supervision and yearly appraisals to reflect on their performance, identify support they might require, and discuss any issues. This is an improvement since the last inspection.

Good governance, auditing, and quality assurance arrangements in place to support the running of the service. These systems help to self-evaluate and identify where improvements are required. The service appears well-run, with people’s families telling us they have seen a very positive improvement since the current manager came into place last year. The RI has good oversight of the service. The RI undertakes the required three-monthly visits, and six-monthly quality of care reviews. The service gathers the views of people and care staff. Procedures are in place to deal with complaints. The service is open and transparent, identifying and acting to resolve issues and making the legally required notifications to Care Inspectorate Wales regarding occurrences at the service.

Information to help people to understand how the service works is available. The Statement of Purpose details what the service is and how it is provided, is kept under review, and accurately reflects what is in place. A written guide is available for people who use the service and their representatives and has been reviewed recently. This contains practical information such as the complaints procedure and advocacy information. Policies and procedures, such as for complaints, infection control, medication, and safeguarding, are in place. They give guidance to care staff, for example telling them what to do if they thought someone was at risk of harm.

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
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	The service does not ensure staff receive appropriate supervision and appraisal.	Achieved
16	The service provider does not review the personal plan as and when required or at least every three months.	Achieved

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