



Inspection Report on

Care in the Vale

**Care In The Vale
13 High Street
Barry
CF62 7EA**

Date Inspection Completed

19/02/2024

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About Care in the Vale

Type of care provided	Domiciliary Support Service
Registered Provider	Care-in-Wales Ltd
Language of the service	English
Previous Care Inspectorate Wales inspection	01 April 2022
Does this service promote Welsh language and culture?	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

Care In The Vale provides care and support to people living in their own homes, some of whom live with complex needs or Dementia. Personal plans are kept under review and systems are in place to ensure people get the right care at the right time. People are happy with the care they receive and appreciate the consistency of care workers who are knowledgeable and competent. Care is observed to be delivered in a dignified way, with care workers demonstrating the upmost respect for people and their homes.

A responsible individual (RI) has improved their oversight of the service, ensuring they engage with people and staff to inform development of the service. The service is run smoothly with good leadership and support of staff. Documentation is in place as required but the provider is aware that work is still required to strengthen some records. Care workers are recruited safely and receive excellent induction and training.

Well-being

People know and understand what care and support opportunities are available to them. Where possible, the service meets with the person to carry out an assessment to make sure the service can meet their needs. Information in the 'statement of purpose' helps people to know what the service can offer. Care and support plans are agreed with the person or their representative and are reflective of the person and the support required, but these are not always kept up to date in people's own homes. When a person's needs change, referrals are made to external health or social care professionals so the right support can be arranged as soon as possible.

The service supports people to stay as healthy and active as they can. Care workers have robust training to help support people, including 'skin care' to help identify and manage any issues with this. Detailed records are kept of good nutritional provision and people like that they have care workers who can cook a meal. People have support with medication if this is needed but records around this could be strengthened. Support is provided when a person's plan identifies they would like to go into the community, but people are also encouraged and supported to maintain their mobility indoors to help stay active. Risk assessments identify the level of support people require.

People feel safe and know how to raise concerns. A robust system monitors calls to make sure care workers turn up on time and stay for the duration of the call time. People feel confident that they will get help if they need to discuss a problem, with good support from office staff who are readily available. Information is available so that people know how to raise a complaint, but the service works with people to ensure worries they have do not escalate to this level. Care workers have training around the 'Safeguarding' of vulnerable adults. People have consistent care workers who get to know them well, so they feel comfortable and confident in the care delivered.

The provider listens to people. The RI consults with people gaining in-depth feedback on the service, helping to drive improvement. They also conduct a quality assurance system through questionnaires to monitor the service delivery. People are consulted about the individual personal plan so any changes in need can be identified, and action taken. The RI and manager support the continued ethos of the service that is person centred, offering a 'can do' approach where they try to say 'yes' to requests and help break down barriers that people experience in trying to achieve their goals.

Care and Support

People receive kind, consistent care that meets their needs. A call system which is constantly monitored ensures people get the right support at the right time. People told us that the care workers turn up on time and stay to complete all the tasks they need to do. People also told us that the care workers always ask them if there is anything else they need before they leave the call. We observed care workers approaching people in a calm manner, giving reassurance with good communication skills, demonstrating knowledge of the person and their needs. People told us about several staff members who are “so good” and said how “*elated*” they are to have the company to provide care to meet their complex needs and felt “*lucky*” to also have care workers who make home made meals.

Personal plans are developed. The service considers information available to them to assess if it can meet the needs of the person. Risk assessments are completed and kept under review, and where a risk assessment is required from a health professional, these too are in place. Personal plans contain the information required, with care plans to inform care workers how the person likes their care delivered. People’s language preferences and other wishes are considered, including the wish to have the service delivered through the medium of Welsh.

The service conducts personal plan reviews and people know how to raise concerns. People or their representatives are regularly involved in the review of their personal plan. These are usually in-depth discussions about care delivery, with good records around this. Any changes or additional support required is mostly actioned, and care plans changed to reflect the needs of the person. People we spoke with had no concerns about their care package, plans, or reviews, and told us they would know how to raise an issue if there was one. One person told us how helpful the office staff are when they need to speak to someone about their care.

People’s health care needs are supported. Referrals are made to health professionals when people need specialist health support, such as adaptations to help their mobility. When the service provides support to prepare food and drinks for people, this is recorded in detail within the daily record. When specialist care, such as support with catheters, is required, the care workers have the required training and are competent to support people’s needs. Documents are signed to show care workers have supported people to take their medication. Where possible, people are encouraged and supported to remain as independent as possible; we saw people living with dementia prompted by a very patient care worker to prepare a nutritious meal.

Leadership and Management

Governance arrangements are in place. The RI represents the provider, fostering a culture of care and a positivity attitude to providing person centred care. The RI has improved engagement with people to gain feedback to inform their judgement on the quality of care being provided. The 'Quality Care Review' reports demonstrate the RI is considering all aspects of the performance of the service to help them identify how the service can improve. Policies and procedures are in place. The statement of purpose, which is a document to inform people what to expect from the service, is in place and kept under review.

The service is run smoothly, but improvements are required around some records. A knowledgeable manager is supported by a team of office staff who are also part of the care team. The manager is commended by care staff for their leadership. The management produce daily and monthly detailed reports to understand how effective the service is. Work required on some records remains outstanding from the last inspection, and people do not always have up to date personal plans in their own home. Maintaining accurate records is an area for improvement and though no immediate action is required, we expect the provider to take action to address this.

The provider has safe systems in place to recruit and supervise care and support staff. Personnel files contain the required information to demonstrate care workers are fit to work with vulnerable adults, including checks undertaken with the Disclosure and Barring Service and government departments. Contracts of employment are in place and reviewed. Care workers have supervision meetings with a line manager.

Care workers are supported to learn and develop. A detailed induction programme is provided for care workers, with most of the training provided face to face. Care workers are supported to complete the recognised training programme set by the workforce regulator, Social Care Wales (SCW). Care workers are also encouraged and supported to register with SCW. Training, for example, around catheter care, support people's needs, and care workers are assessed for their competency with this. Senior care workers tell us how they have been nurtured, the manager having recognised abilities, and encourages them to develop.

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
59	The provider is not ensuring that records around medication contain sufficient information and some personal plans in people's own homes are not updated in a timely manner.	New
66	The responsible individual is not undertaking some aspects of their duties in relation to more formal supervision of the manager and oversight of the management of the service.	Achieved
58	Medication records are not completed in accordance with current guidelines.	Achieved

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