



Inspection Report on

Simply Safe Care Group (West Wales)

**Unit 2
Hendy Industrial Estate
Swansea
SA4 0XP**

Date Inspection Completed

06/10/2023

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About Simply Safe Care Group (West Wales)

Type of care provided	Domiciliary Support Service
Registered Provider	Simply Safe Care Group Ltd
Registered places	0
Language of the service	English
Previous Care Inspectorate Wales inspection	16 February 2023
Does this service promote Welsh language and culture?	The service provides an 'Active Offer' of the Welsh language. It anticipates, identifies and meets the Welsh language and cultural needs of people who use, or may use, the service.

Summary

This is a focused inspection. People and their representatives are happy with the care and support they receive and are involved in the planning and review of their personal plans. Reviews are undertaken routinely and are accurate and up to date. The personal plans reflect the current care and support needs of people. This was an Area for Improvement in the last inspection and these matters have now been addressed.

We cannot be certain that care staff receive the appropriate training or if they are up to date with their training as these records were not available. This was an Area for improvement at the previous inspection. We have not seen any progress in this area and will therefore review it at our next inspection.

The provider does not have a robust system in place to recruit care staff and we found inconsistencies in personnel files. This was a Priority Action Notice at the previous inspection and these matters have not improved.

Well-being

People have a voice and are involved in developing and reviewing their personal plans. Reviews are undertaken routinely every three months and are kept accurate and up to date. Plans reflect the current care and support needs of individuals and are in line with the Local Authority Care plans.

Records show that the views of individuals and their representatives are considered and action is taken as a result.

We cannot be certain that people are protected from harm as the provider does not have a robust recruitment system in place. Furthermore, we cannot be sure that care staff are receiving the necessary mandatory training required to undertake their role.

Care and Support

People and their representatives are happy with the care and support they receive from care staff they know well. During the last inspection in February 2023, we found that some personal plans were not being reviewed regularly. They were not relevant as they did not reflect the current needs of individuals and were not updated following reviews undertaken by the Local Authority. This was identified as an Area for Improvement.

At this inspection we found that plans reflect the current care and support needs of individuals and are in line with the Local Authority Care plans. They are accurate and up to date. Reviews are being undertaken in a timely manner and individuals and/or their representatives are involved. People are given opportunities to voice any concerns they have and how they would like their care to be provided.

Risk assessments of the individuals' home environment are in place to minimise harm to people and those providing support. Manual handling plans are in place where people have mobility issues. Independence is promoted to enable people to remain living in their own homes as long as possible. Referrals are made to health and social care professionals as required.

However we cannot be certain the care staff have the necessary skills and knowledge to undertake their role effectively as no details of staff training were available.

Leadership and Management

During the last inspection we found that staff personnel files were incomplete and the provider did not have a robust system in place when recruiting staff. As a result a Priority Action Notice was issued.

At this inspection we have not found any improvements and there are continued inconsistencies when recruiting care staff. The provider has not always obtained the required references for each staff member prior to commencement. Some care staff did not have a completed application form and we found gaps in employment history on some application forms. We also found some files without the required ID. We will therefore consider taking further action.

Care staff spoken with told us they receive regular training and are up to date with their required training. However the Responsible Individual has not been able to provide details of staff training therefore we cannot be certain that care staff are suitably trained to undertake their role. This has been identified as an area for improvement and will be reviewed during the next inspection.

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
35	The service has employed staff without consistently obtaining full and satisfactory information and documentation in respect of the matters set out within Schedule 1 of the Regulations.	Not Achieved

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
36	We cannot confirm that the provider ensures that all staff receive ongoing appropriate core and specialist training and that they are up to date to reflect current practice as the provider was unable to evidence this.	Not Achieved
16	Personal plans had not been updated following a review of care and support by the LA therefore did not reflect the current needs of some people.	Achieved

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Date Published 15/11/2023