



## Inspection Report on

**Cardiff and the Vale Community Homecare**

**Ty Heulog  
Cowbridge Road  
Talbot Green  
CF72 8FH**

**Mae'r adroddiad hwn hefyd ar gael yn Gymraeg**

**This report is also available in Welsh**

### **Date Inspection Completed**

This inspection took place over three weeks with the last site visit on  
8 June 2022

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## About Cardiff and the Vale Community Homecare

Type of care provided	Domiciliary Support Service
Registered Provider	Hafod Housing Association Ltd
Language of the service	English and Welsh
Previous Care Inspectorate Wales inspection	This is the first inspection of this service since registration under The Regulation and Inspection of Social Care (Wales) Act 2016
Does this service provide the Welsh Language active offer?	Working Towards. 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

Cardiff and The Vale Community Homecare Service provides care and support across Cardiff and The Vale of Glamorgan, within separate sites known as 'schemes'. At some schemes, the accommodation is provided by Hafod Housing Association, but this is provided by a separate part of the organisation and does not form part of our inspection. Care and support is provided to people of all ages and with varying needs, including those who need support with drug and alcohol dependency.

A responsible individual has been appointed by the service provider to monitor the quality of care and carries out their duties with due diligence. A manager is in post who has responsibility for the day to day running of the service. Each scheme has a coordinator or team leader with managerial responsibilities. The current management model is not working well within the service and needs to be reviewed by the service provider to prevent impact on people; we are advised this is being done.

Across the whole service, care is mostly delivered in accordance with clear care plans, with some schemes having consistently high standards in all areas of care. People are involved in regular reviews of their care and are able to evidence they have achieved good outcomes. Health professionals are involved where required. Medication administration needs improvement in some schemes as it is not of a consistently high standard across the service and could pose a risk to people. The service provider is taking action to address this.

Care workers are kind, compassionate and well-trained. They show respect for individuals and provide a level of care that promotes independence. Elements of the service are

outstanding, especially the work with people who successfully return to community living following support to manage their dependencies.

## Well-being

The service provider informs people about the service through a document called the 'Service User Guide.' This is mostly clear but could contain more specific information around medication to avoid misunderstandings. People have information about how to raise concerns or complaints about the service if they wish to do so. We consulted people throughout the service, across five different schemes, and all had copies of the information. During the consultations, everyone was happy with the care they receive, with some stating, "*I wouldn't change a thing,*" when asked how the service could improve.

During the pandemic, some schemes have not been able to hold meetings for people to be able to contribute to the service delivery, but this is being re-started. The responsible individual has continued their duties through the pandemic, consulting with people to establish the quality of care provided, to listen to individuals and take action if required. There is opportunity for people to comment on their care and be part of reviews. This is consistent across the service.

Care workers are trained with regards to safeguarding of vulnerable people and know how to raise a concern if they had one. People told us they feel safe and protected. People live in a way that they choose, go where they want, and participate in activities of their choice. The service provider makes every effort to provide information in Welsh, and where possible, provide care support through the medium of Welsh if this has been identified as part of the assessment process.

People have access to health professionals and where care plans identify the need, they are supported to be taken to appointments. Where medication administration is identified as a need in the care plan, the service provides this support, but improvement is required in some schemes around the recording of this to prevent mistakes being made. One scheme demonstrates exceptionally high standards in medication administration and the service provider is considering how to share this best practice with other schemes in the service.

Care workers are consistently described by people using the service as "*good as gold*" and "*marvellous.*" They show people respect and uphold equality. Care workers enable people to be as independent as they can, including in work, education and community involvement if this is the individual's wish. Care and support times have been adjusted due to the current Covid-19 pandemic, and in some schemes, due to large turnover of staff; but it is hoped that this will be resolved soon with recruitment of new staff. People have been understanding of this situation and don't report any real impact due to the changes. We expect the service provider to consider the current management model so that it better supports the registered manager, coordinator and team leaders to ensure staffing levels improve care and support. This forms part of an area for improvement and we expect the service provider to take action.



## Care and Support

The service provides care to people throughout Cardiff and The Vale of Glamorgan. Throughout the service care workers are observed to be compassionate. We were told: *"They go above and beyond,"* with an example of, *"Staff will do shopping in their own time."* At one scheme where people are supported to manage their dependencies, a person told us: *"It doesn't matter who you are, they treat everyone the same."* In this same scheme, we were told, *"Care is fantastic, I wouldn't be anywhere else,"* and others gave powerful testimonies of how, if it wasn't for the care and support they received from the dedicated team of care workers, they may even be dead. People feel safe, even when they are going through a time of personal crisis. Care workers demonstrate understanding and empathy with people who require specialist care, especially around mental health. They also show respect as they provide care and support in a dignified manner.

The service provider has systems in place to consider if they can meet people's needs before providing a service, but we could not see documented evidence of this within personal plans. We were told that the assessment document and care plan are developed at the same time. Due to this, we are unable to see evidence of all areas that need to be considered prior to a person being offered care, including the 'Welsh Active Offer'.

In all schemes within the service, personal plans are available to people in their own home and reflect the person's needs. They also contain important information to help the individual, including a complaints procedure. Risk assessments are in place and help to identify areas where the individual or care worker may be at risk, and how this is to be managed. Care plans identify the number of care workers needed to support an individual, in addition to step by step guidance on all aspects of an individual's care. Reviews of personal plans that involve consultation with the individual are consistently completed throughout the service. The service is successful in assisting people to achieve positive outcomes. For some people, this means they improve to a point that they no longer require care and support.

Across the service, medication administration compliance varies from scheme to scheme. In one scheme where people are supported with their drug and alcohol dependency, we saw a high standard of medication management, while people living in other schemes are at risk due to lack of clarity around prescription submission and collection, in addition to poor record keeping. While there is no impact at present, we expect the service provider to take action to address the issues around medication administration, and we will test this at the next inspection.

Appropriately trained care workers mostly follow the care plans to deliver identified care and support. Some schemes benefit from a consistent, experienced staff who know people well, while some have recently undergone a large turnover of staff. People using the service have been understanding of adjustments made to their care and support times to accommodate changes in staffing levels. Good communication systems are in place within

each scheme with details around appointments that helps people access healthcare professionals. We saw how 'senior' care workers monitor care provision on a daily basis and guide care workers if issues are identified.



## Leadership and Management

The service provider has a nominated responsible individual (RI) who undertakes their duties to meet regulatory requirements. They visit the main operations office, in addition to each scheme, to gain an understanding of the service provided. The RI produces required reports. These consider feedback from people and staff to improve the service, and identifies action to be taken, in addition to reviewing actions already completed. Care is needed to ensure the anonymity of people is maintained within the reports, and six-monthly reports contain evidence of more recent consultation.

A manager oversees the day to day running of the service and is registered with Social Care Wales. Their experience and extensive knowledge in managing domiciliary care services enables them to guide the organisation to secure compliance and good service. Experienced team leaders who provide a managerial oversight of schemes are effective, with people and care workers describing them as “*amazing*.”

Information is made available to people who are considering using the service. This requires updating with key information about medication administration to ensure individuals understand what the service can offer, and to support the improvements required regarding medication.

Clear, up to date policies and procedures are in place and care workers benefit from thorough induction and comprehensive training opportunities. The majority of the care team are compliant with their training and updates. Care workers are encouraged and supported to access qualifications to develop their career. A large percentage of the care workers are registered with Social Care Wales, the social care workforce regulator. Specialist training is provided when required, such as for epilepsy, and all care workers receive training around how to safeguard vulnerable people.

Care workers are safely recruited, with appropriate documentation available to evidence pre-employment checks. Care workers benefit from defined hour contracts, and those who have a more open contract are happy with this. The organisation offers all employees access to a supportive resource to help with any issues they may have, in addition to other health packages, such as dental care.

The service provider needs to improve the overall support of more senior staff. We found protected time is not available for more senior staff to have one to one supervision and development discussions with their line manager. These meetings are important to support care workers in their role, but also applies to team leaders, co-ordinators and the manager. The management structure has changed, with unrealistic expectation on one registered manager to cover a large geographical area with multiple schemes within this. Issues with team leader availability and inexperienced coordinators has added to the pressure on the manager, in addition to supporting some schemes where there are exceptional challenges due to the nature of the support provided. The manager has not been invited to be part of decision making around deployment of staff they will be responsible for, resulting in

support issues due to inexperience of these staff. There is impact on people using the service as they often lack consistency of care workers due to turnover of staff, and some live within schemes where procedures are not followed around medication, which should be overseen by the coordinators. The RI and area directors have identified the issues and are aware of the need to review the management structure. They are working on an improved model, allowing the manager the time they require to effectively oversee the schemes and be able to offer the support required to staff they are responsible for. While no immediate action is required, we expect the service provider to take action to improve the overall support of staff to improve the service provision; this will be tested at the next inspection.

Staffing levels are mostly appropriate to meet people's needs. Spot checks and competency checks are conducted by senior care workers to ensure care workers are confident and compliant with provision of care. The senior care workers have also recorded supervision meeting outcomes for care workers they support.

### 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
58	The service provider is not ensuring that audits of medication processes are identifying poor practices where care workers are not following procedures around acquisition and recording of medication	New

	administration.	
34	The management structure within the service does not provide effective support of all care staff, resulting in poor supervision and development of staff that could impact on the care delivery.	New

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