



## Inspection Report on

**Consensus community support Limited**

**Lime Grove Apartments  
Lime Grove Avenue  
Carmarthen  
SA31 1SN**

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

**This report is also available in Welsh**

**Date Inspection Completed**

10/01/2023

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## About Consensus community support Limited

Type of care provided	Domiciliary Support Service
Registered Provider	Consensus Community Support Limited
Registered places	0
Language of the service	Both
Previous Care Inspectorate Wales inspection	<a href="#">19 April 2021</a>
Does this service provide the Welsh Language active offer?	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

The service supports people to live as independently as possible. Interactions between people and support workers are friendly and encouraging.

Passionate and experienced support workers are guided by person centred plans that are created by the individual, with support from their staff, family and health professionals. A support worker told us *“it’s so vibrant here and a great place to work, I love it as much today as I did on my first day”*.

The provider has good oversight of the service. The Responsible Individual (RI) is accessible and visits the service regularly. The manager leads the service with an open and supportive culture that is valued by people and their support workers.

## Well-being

People receive person centered support and are fully involved in decisions about the service they receive. Detailed information about the individual, how best to support them and intended outcomes is recorded in personal plans. Senior staff work with health and social care professionals to help people remain as healthy as possible. People contribute to decisions that affect them in monthly key worker reviews that help them stay on track of their goals. Senior staff maintain detailed and accurate personal plans with daily notes that record people's outcomes.

The service supports people to live as independently as possible; a worker told us *"I see my job has helping people to be as independent as they can be, it can be difficult but it is so rewarding"*. The service works effectively to support people with communication challenges and provides an 'Active Offer' of the Welsh language. Support workers encourage people to contribute to their communities by making the most of local facilities. People are supported to know what opportunities are available to them because plans focus on new and old activities. We were told about the positive impact the different clubs opening has had on people's well-being.

Recruitment and training ensures people get the right care and support, from skilled and knowledgeable workers. Staff protect people from abuse and neglect and are fully aware of their responsibilities to raise concerns. People are supported to make suggestions or raise complaints if needed.

People have a voice and input into the running of the service because the RI involves them and their support workers in Regulation 73 visits. Governance processes focus on developing the service by using information from quality audits and internal checks. The Quality of Care Review identifies areas to improve following consultation with people who use and work at the service.

## Care and Support

People are very happy with the support they receive. Interactions are warm and friendly, and people have longstanding relationships with their support workers, who encourage them to be as independent as possible. A support worker told us *“the guys have more choice and less restrictions, we really try to promote people’s independence”*. People are fully involved in their plans. Staff obtain feedback from individuals regularly to stay on track of goals and to help maintain people’s motivation. Detailed daily records are accurate and clearly evidence individual achievements and feedback from the persons perspective.

The manager considers a range of information from the person, their representatives, support workers and external professionals. Risk assessments allow people to take risks while helping to maintain safety and promoting independence. Key Workers regularly review plans with people, to ensure they are up-to-date and focus on what they want to achieve. Best interest decisions are clearly recorded in plans. We saw evidence of health professionals such as advocates and specialist nurses being involved and their guidance reflected in plans. Support workers are clear about their role and empower people to be as independent as possible.

People are rebuilding their social connections that were lost during the pandemic. They are planning new activities such as going on holiday, enrolling in college and volunteering jobs. The manager ensures staff work flexibly and allocates support workers at times when these activities take place. The provider gives people the opportunity to be involved in quality assurance in their own and other services. People offer peer support to others to find out more about individual experiences, views of the service and suggest any improvements.

The provider has policies and procedures to manage the risk of infection. There are good hygiene practices in line with Public Health Wales guidance.

## Leadership and Management

The provider has good arrangements in place for monitoring, reviewing and improving the quality of the service. The provider is in the process of registering a new Responsible Individual (RI). When discussing the previous and new RI a support workers told us *“[both RIs] are accessible and always at the end of the phone if needed”* and *“I saw [new RI] last week and she always asks how we are and is always available. It’s the same with the [previous RI], we can just pick up the phone”*. The RI statutory quarterly visits are completed following discussions with staff and people. The six monthly Quality of Care Review is detailed and highlights positive outcomes as well as areas they intend to improve.

There is an open and encouraging culture at the service. Line managers know people well and staff feel very well supported. All workers are positive about the leadership of the service and describe the manager as organised, accessible and supportive. We were told *“[Manager] is a great support and the best manager I’ve had”*. Regular team meetings allow support workers to discuss what’s working well and what needs to improve. All support workers confirm they receive regular, one-to-one supervision meetings and appraisals, records corroborated this. A support worker said *“supervision and appraisals are open and very constructive”*. All workers have a good understanding around safeguarding and their duty to report concerns. Policies and procedures are in place to support good practice and staff have a sufficient understanding of them.

Pre-employment checks take place before new employees start work. These include reference checks, right to work and Disclosure and Barring (DBS) checks. This is stored electronically along with all other personnel information. Support workers receive mandatory, person specific and developmental training to meet people’s needs. The induction process is detailed and comprehensive and specific to the service. Ongoing training and development is available to all workers, with opportunities for career progression. A support worker told us *“the training is really good and very helpful”*.

Adequate numbers of staff are available to meet people’s needs and choices, for example staff work later, on evenings where people go to social clubs. People have built up longstanding relationships with dedicated staff and get the continuity they need. Support workers promote and encourage independence, when discussing a new person at the service we were told *“It feels like we are supporting them to start living his own life”*.

### 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
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N/A	No non-compliance of this type was identified at this inspection	N/A
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