



Inspection Report on

Crwban Care and Support Ltd

**3 Woodland View
Church Village
Pontypridd
CF38 1RW**

Date Inspection Completed

16/02/2023

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About Crwban Care and Support Ltd

Type of care provided	Domiciliary Support Service
Registered Provider	Crwban Care and Support Ltd
Registered places	0
Language of the service	English
Previous Care Inspectorate Wales inspection	This was the first inspection since the service registered under the Regulation and Inspection of Social Care (Wales) Act 2016.
Does this service provide the Welsh Language active offer?	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 have access to daily activities and are supported to achieve goals. Comprehensive personal plans outline people's strengths and individual outcomes. Risk assessments keep people safe and reviews are completed. People are encouraged to maintain contact with those individuals who are important to them and staff understand and support daily routines. Care staff provide care and support in a least restrictive manner and work in a flexible person-centred way. People and relatives are satisfied with the service they receive.

Effective communication channels are evident and staff feel valued. Policies are up to date and fit for purpose. The Responsible Individual (RI) and manager have positive oversight of the service. Personal Protective Equipment (PPE) and infection control measures are understood. Staff are recruited safely and have access to sufficient supervision and training. There are medication policies in place in the event this support is required by people living at the service.

Well-being

People are supported to have a voice and make decisions. Plans contain person-centred information and provide clear guidance around goals and outcomes. People receive support to make choices and staff tailor social activities to reflect people's interests. Menus consider individual tastes and preferences and people receive support to decorate and arrange their bedrooms as they like. Staff support people to maintain positive contact with those individuals who are important to them. The service seeks regular feedback from people and their relatives to ensure care is provided in a positive and supportive way. People and relatives know how to raise concerns and feel confident these will be addressed appropriately.

The service enables people to maintain and improve their independence and to enjoy community life. The service actively encourages the improvement of new skills and focuses on developing people's educational, domestic, and personal care abilities. The service understands the importance of providing social opportunities for people to engage in and encourages people to undertake activities to enhance their emotional well-being. People are supported to feel invested in their home environment by developing skills to ensure this remains well maintained and clean.

Care staff understand their roles in protecting people and providing safe care. Communication is effective within the service and staff feel confident in raising any concerns or issues. Access to regular care staff ensures people receive continuity of care from staff who understand their needs. Appropriate recruitment checks are completed to ensure staff are suitable to work with vulnerable people. Staff benefit from ongoing training and supervision in line with the statement of purpose, this ensures staff feel sufficiently supported and skilled to undertake their roles. The RI has oversight of the service and there are a range of policies in place to support good care practices.

The service supports people's physical and emotional well-being. Personal plans hold detailed information about people's health needs and staff regularly review plans to ensure they remain up to date and current. Risk management plans assist staff to provide support around behaviours or situations which people may find challenging. The service consults with professionals to help keep people safe and well and there are medication policies and procedures in place in the event this support is required.

Care and Support

People receive good quality care. People are treated as individuals and staff understand the importance of developing good relationships. Care staff we spoke with have a good understanding of people's individual routines and tell us they have sufficient time to familiarise themselves with people's plans. Suitable systems are in place to support people to maintain contact with their family. Review documentation and communication logs show people and relatives provide positive feedback around the care they receive. Relatives told us communication with the staff, manager and RI is very good and they are easy to reach. Relatives described the service as "*very professional*" and state staff go the "*extra mile*". We did not have an opportunity to observe direct care during the inspection visit.

The service completes detailed assessments and plans. Careful consideration is given to ensure people are compatible prior to placement. The care provided is planned and created through consultation with people, their families, and professionals. Plans reflect people's strengths, social history, preferred activities, interests, and daily routines. Detailed plans help care staff to maintain people's safety, while also promoting their independence. Risk assessments outline any anxieties or behaviours that may challenge and provide guidance on strategies to manage these. Daily records evidence people's day-to-day experiences, achievements and care provided. We found reviews provide information on people's overall progress and next step goals.

People are supported to remain as healthy as possible and engage in meaningful activities. Care workers encourage people to make healthy food choices and develop cooking skills. No medication support is provided by the service at present however there are policies in place to support medication administration and appropriate storage. Appointments with health and social care professionals are undertaken in a timely manner. The service promotes a range of healthy activities, liaises with local community groups and supports opportunities for people to visit places of interest. On the day of inspection, we saw one person had written a list of planned activities they intended to undertake over the following weeks. The service supports educational placements and encourages further learning opportunities.

Environment

This theme does not currently form part of the inspection remit for domiciliary support services in Wales.

We can confirm the service operates from secure premises with appropriate arrangements for storing confidential information.

Leadership and Management

Systems are in place to support the day-to-day running of the service. The statement of purpose is up to date and reflects the service provided. A range of policies and procedures are fit for purpose and care staff we spoke with have a good working understanding of these. From viewing a selection of staffing rotas and feedback provided, we can be confident sufficient staffing levels are in place. The service has a small stable team of staff to support consistency for people accessing the service. The RI maintains regular contact with people, staff and their families and is working towards completion of the three-monthly RI report. The RI and manager understand the requirements around the pending six monthly quality of care report which will be due later this year. A complaints policy is in place and people/relatives feel confident in using this.

The service ensures staff are recruited safely and receive appropriate training to remain sufficiently skilled. The training matrix confirms the service offers regular training opportunities and staff remain up to date with all core training requirements. The RI confirmed newly appointed staff receive a period of induction and shadowing before undertaking their care duties. Care staff we spoke with told us their induction period was positive and they feel sufficiently skilled. Recruitment files we examined evidence all necessary pre-employment checks have been completed to ensure staff are fit and suitable to work within the service.

Care staff feel supported and records evidence staff receive regular supervision. Care staff told us they are confident in approaching their manager with any queries, they enjoy working for the service and feel valued by the management team. One staff member described both the manager and RI as *“lovely and really helpful”* and working for the company is a *“lovely experience.”* Documents we viewed evidence staff members receive one to one supervision in line with the statement of purpose.

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
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Date Published 22/03/2023