



Inspection Report on

Care Cymru Torfaen

**Ty Clarence
Clarence Street
Pontypool
NP4 6LG**

Date Inspection Completed

19/04/2021

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About Care Cymru Torfaen

Type of care provided	Domiciliary Support Service
Registered Provider	Care Cymru Services Ltd
Registered places	0
Language of the service	English
Previous Care Inspectorate Wales inspection	This is the first inspection undertaken under the Registration and Inspection of Social Care (Wales) Act 2016.
Does this service provide the Welsh Language active offer?	No

Summary

People are given choice about the care they receive on a daily basis and are positive about the quality of the support provided. There are robust arrangements in place to ensure care is provided in accordance with people's personal plans, and it is considered beneficial that consideration be given to ensure travelling time between calls is sufficient in all areas. Care staff are competent and supported in their work. There is good oversight of the service and a commitment to implementing improvements and working with external agencies transparently to ensure positive outcomes for people overall. People and staff views are sought to assure quality across all areas of the service.

Well-being

Care staff treat people with dignity and respect. Feedback about the attitude of care staff is consistently positive and we were told, “(Care staff) are really good, no complaints at all.” Some people told us the office staff, “Usually will ring ahead if they are running late”, although other people told us there have been occasions when they have not been informed when calls have been changed. People in some areas also told us that, despite significant numbers of staff being absent at times during the recent pandemic, their care had continued without any issues.

People overall have choice and control in relation to their care. We identified there has been a full review of people receiving services in some areas, and people have the option to vary call times to suit them. There has also been consultation with people and other professionals about the length of call times required. People told us that care staff respect their wishes if they want specific tasks undertaken or postponed during visits.

There has been attention to ensuring people are protected from harm and abuse. We found there has been work undertaken by the service to improve the recording of incidents and safeguarding issues and while we noted there were some safeguarding issues historically which had not been reported appropriately in one area, we found this has improved and there is good oversight of the service as a whole.

Care and Support

People receive support from care staff who feel well supported and confident to undertake their roles. We spoke to staff who told us, *"I love my job, I have been doing it for a few years now and always visit the same people"*. Staff told us they feel supported and have felt any issues they raise are dealt with promptly. They confirmed they receive supervision and there are regular training opportunities. The training team have continued to ensure learning opportunities have continued as regularly as possible throughout the recent pandemic.

People are satisfied with the care and support they receive and told us the carers were *"kind"* and that the care is delivered in accordance with their personal plans. While people receiving a service have been complimentary about the quality of care and support given to them, we found there have been some occasions previously where care staff have not always remained at people's homes for duration of their planned calls. We have identified this was not in all areas and was partly due to the impact of the pandemic.

We also noted some concerns had been reported about care staff not always adhering to the correct guidance in relation to the use of personal protective equipment (PPE) at this time. However we have found that once these issues were identified, significant work was undertaken to address these issues, form an action plan and make improvements, which have continued to be monitored by the manager and responsible individual (RI). We looked at daily rotas and noted these calls are planned out carefully according to geographical area, with five minutes allocated to travel safely between each call. We did find there is one area where this period of time is likely to potentially cause difficulties at busy times of the day and we recommend this should be reviewed with additional travelling time considered. We have shared our findings with the RI who has agreed this will be reviewed.

Leadership and Management

Overall oversight of the service is thorough and has continued to be so throughout the pandemic which has been overall well managed despite significant staff absences. There has been a recent change of manager in one area and there are plans to continue to implement and monitor improvements going forward in this area. The service has worked closely with external organisations to make improvements. We find supervisions and appraisals are carried out in a timely manner. It has not been possible for staff to safely meet as teams and alternative ways have been used to ensure information has been shared with all staff, including virtual means and social media.

There have been significant improvements to the recording and reporting of safeguarding incidents. A safeguarding meeting has recently identified that concerns were raised by one service user several months previously, and a further incident occurred at a later date, causing distress to that individual. We also found a small number of incidents which occurred during the pandemic had been reported appropriately but had not been logged on the service's incident forms. The RI has ensured improvements to processes were immediately made and we find any notifiable issues are now promptly recorded and appropriate actions are taken when necessary.

Quality assurance is considered as a priority and people are given the chance to provide feedback. Complaints and compliments are recorded and on the whole are responded to within timescales. We noted the complaint logs do not give specific details of issues discussed, and we consider this would be beneficial for auditing purposes, supporting the quick identification of any themes and trends arising. Incidents are also recorded in the same way and again visual detail may help. We identified that the Statement of purpose (sop), a key document which sets out the vision and aims for the service, needs updating to reflect the appointment of a new manager in one area and the RI informed us this has already been actioned. The service user guide similarly needed a slight adjustment and has likewise been updated promptly.

Environment

The environment is not considered as part of inspections of domiciliary care services. We are assured infection control measures are in place and documentation is stored securely in each office area,

Areas for improvement and action at, or since, the previous inspection. Achieved

Areas for improvement and action at, or since, the previous inspection. Not Achieved

None	
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Areas where priority action is required

None	
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Areas where improvement is required

Regulation 41(3)(b) - Sufficient travel time should be allocated between calls in all areas, accounting for busy times of day and traffic congestion.	
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The area(s) identified above require improvement but we have not issued a priority action notice on this occasion. This is because there is no immediate or significant risk for people using the service. We expect the registered provider to take action to rectify this and we will follow this up at the next inspection.

Date Published 08/06/2021