



Inspection Report on

DSS - North Wales

**Cerrig Cornel
Tywyn
LL36 9SA**

Date Inspection Completed

17/11/2022

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About DSS - North Wales

Type of care provided	Domiciliary Support Service
Registered Provider	Achieve together Ltd
Registered places	0
Language of the service	English
Previous Care Inspectorate Wales inspection	07 August 2019
Does this service provide the Welsh Language active offer?	This service is working towards providing an 'Active Offer' of the Welsh language and demonstrates a significant effort to promoting the use of the Welsh language and culture.

Summary

DSS North Wales provides care and support for adults over 18 years of age living in a supported living environment at Cerrig Cornel.

People are happy with the care and support they receive from DSS North Wales. People are supported with their daily routines and engage in activities and interests. Personal plans and risk assessments are in place to provide staff with information to support and care for people in line with their identified needs. Staff receive relevant information regarding people's well-being.

The manager and deputy manager support staff. A recruitment process is in place including all the necessary checks. There is an experienced staff team who receive the necessary training to be skilled in their roles. Staff receive regular supervision and appraisal.

The service is working towards the Welsh active offer. Welsh speaking staff are assigned to work with Welsh speaking people receiving the service. The recruitment process identifies Welsh speakers.

The service has a statement of purpose, which describes the services provided.

Well-being

People have choice and control over their day-to-day lives. Discussions with support staff demonstrated it is clear they know people using the service well and they communicate in the person's language of choice. People are supported to maintain their independence. Staff encourage people to express themselves and make choices such as choice of personal development opportunities and activities.

People do things that matter to them. People are actively supported and encouraged to be as independent and active as they can be. People using the service are positively occupied and stimulated. We saw people are enabled to live in their own home and be a part of their community. A friendly atmosphere was apparent between people and staff. People said they liked the staff. We observed staff talk to people in a friendly and respectful manner.

People feel safe and staff protect them from harm. Staff have received training on safeguarding and risk assessments are in place to safeguard people from harm. Records relating to people and staff are stored securely in the office to ensure confidentiality.

Staff follow a recruitment process including all the necessary checks and receive the training to be skilled in their roles.

Welsh speaking staff support people whose first language is Welsh.

Care and Support

People receive care and support that meets their individual needs. People are involved with developing their personal plans which are kept under continual review. Personal plans and risk assessments are clear and provide staff with information to support and care for people in line with their identified needs. Staff told us they are aware of care plans, their involvement in producing them and the importance of the matching process when allocating staff to work with individuals. One care staff told us of the importance of assigning Welsh speaking staff to Welsh speaking people and how the management accommodate this. Daily notes and charts show people receive the care they need when it is required.

People remain as healthy as they can be due to care provided and effective administration of prescribed medication. People receive the medication they require safely. Staff competency is checked before they can administer medication. Staff support people to access health appointments as and when required.

People receive good support from friendly, respectful, and caring staff. People are supported by staff with common interests. People have choice about how they spend the day, and their individual wishes are respected. We observed people returning from shopping trips, going out with relatives and others were enjoying the comforts of their own private space.

People's safety is well maintained. There are processes in place to safeguard people. Individual risk assessments are in place and staff are aware of the importance of making the relevant referral to the local authority if they have any concerns about the people they work with. Care workers told us they are aware of the safeguarding procedures and staff receive up-to-date safeguarding training.

Leadership and Management

There are arrangements to maintain oversight of the service, and processes to monitor the quality of the service. An open-door policy is operational which was observed on the days of inspection with both people and staff popping into the office to see the manager/deputy manager. Communication with people, staff, and relatives, is good. Staff told us the manager is supportive. Evidence seen demonstrates the RI conducts visits to the service and produces a report on what the service does well, and any areas of improvements identified. Policies and procedures are in place to help protect people from harm or abuse. Risk assessments are in place to safeguard people and staff.

Overall, trained staff support people living in the home. Staff receive training to gain the knowledge, competency, and skills to meet people's needs. Care workers told us the manager and deputy manager are easy to approach and provides support on both personal and professional levels with staff supervision and annual appraisals taking place. Staff meetings are arranged to share operational matters such as training and health and safety and provide opportunities for staff to share ideas and any concerns regarding the service delivery. One staff member told us *"I love my job.;"* whilst another said *"The manager is very approachable."*

People are supported by a service that has a stable staff team who are suitably fit and have the knowledge, competency, and skills to meet their needs. Staff are registered with Social Care Wales (SCW). Records show staff receive supervision and have completed training in mandatory and specific subjects such as supporting autistic people, drug and alcohol awareness, mental health awareness and schizophrenia. One staff member shared their request to the manager for specific training which was arranged. Staffing is provided dependent on the assessed needs of people using the service.

The service has a statement of purpose, which clearly describes who the service is for and how it will be delivered. People are given information that describes the service and how to make a complaint.

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
	The Service is non compliant with Regulation 36(2)(e) - receives specialist training as appropriate. Service providers must ensure a positive and constructive approach is adopted to supports an individual's behaviours. The senior management and the responsible individual must ensure that all staff working with people who present challenging behaviours receive Proactive SCIP training. The registered provider is not compliant in ensuring that staff receive support and assistance to obtain such further training as is appropriate to the work they perform.	Achieved
	The registered providers are non compliant with Regulation 80 - Quality of Care review	Achieved
	The registered provider is non compliant with Regulation 80 - patterns and trends identified through the analysis of incidents or near misses.	Achieved

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