

# Inspection Report on

**Vale Community Resource Service** 

Cardiff & Vale Nhs Trust
Barry Hospital
Colcot Road
Barry
CF62 8YH

**Date Inspection Completed** 

11/12/2023



## **About Vale Community Resource Service**

Type of care provided	Domiciliary Support Service
Registered Provider	Vale of Glamorgan Council Adults and Children's Services
Registered places	0
Language of the service	English
Previous Care Inspectorate Wales inspection	13 January 2022
Does this service promote Welsh language and culture?	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

People are very happy with the service they receive and are complimentary of the staff who provide their care and support. The service includes specialist reablement practitioners which means people's recovery and reablement is maximised. People receive day-to-day care and support from skilled and dedicated reablement support workers (RSWs). Personal plans fully inform RSWs of people's needs, personal goals and abilities. Encouraging people to reach their potential and regain their independence is at the heart of the service. The staff are skilled at making people feel at ease, and in a short amount of time trusting bonds are formed.

RSWs receive training and support to be able to meet the needs of people accessing the service. Policies and procedures are available to all staff, and most are informative and up to date. The service is operating without a responsible individual (RI). Oversight is being effectively coordinated by the management team until a successful RI application is received and accepted by the regulator. Systems are in place for auditing and monitoring of the service. People and staff are regularly consulted with to inform service improvement.

#### Well-being

People access a range of professionals to support their reablement once they return home from hospital. The service fully includes people and representatives when planning their care and support. Overall, people feel well informed about the aims of the service and how the staff team will support them. Information is available in Welsh for those who request it. A suitably qualified person completes an assessment with people and their goals and aspirations are the focus of the assessment. Personal plans are well written and tell RSWs what a person wants to achieve during their rehabilitation. Some people had information available to them in their home. People are fully involved in reviewing their personal plans and they understand their progress. Equipment is safely assessed and installed to support reablement and improve people's well-being. People told us "They explained everything to me" and "I was involved in my assessment. I was asked what I wanted."

People are treated with dignity and respect. They feel listened to by the service, and their individual circumstances taken into consideration. People told us "Staff make me feel like family, they cheer me up when I am low." Representatives are kept up to date on people's progress when this is appropriate to do so. Promoting and enabling independence is embedded into practice and people highly value the service. People told us because of the care and support they are becoming more independent at home; they experience an increase in confidence to do things for themselves. The support teaches them new ways of doing things after returning home from a hospital stay. An increase in independence has enabled some to leave their home to attend lunch groups with friends and go to see shows. This is really important to them. People told us "The service is making a difference to me" and "It is very comforting when they call, it is lovely to know someone cares."

People are protected from harm and abuse. There are robust measures in place to keep people's information secure. RSWs receive training in safeguarding procedures and understand their roles and responsibilities for keeping people safe. Accidents, incidents, and matters relating to the well-being of people is recorded and monitored following the local authority's policies and procedures. Staff are safely recruited, trained and supervised to maintain their skills and knowledge.

#### **Care and Support**

The reablement team completes assessments with people to ensure the service can meet their needs. The assessment captures most information about the person, but not all. There are missed opportunities to document other information which could be important to people. The Service User Guide is available to people, but the current document is not up to date. The management team is taking prompt action to ensure people have the correct information. Personal plans focus on what outcomes are important to people during their time with the service. We found a few instances where not all essential information noted during the initial assessment was included in people's personal plans and risk assessments. The plans detail daily care and support tasks. All people told us their care and support needs are consistently met and RSWs are kind, caring and compassionate. RSWs and other professionals at the service work well together as a team to support people to adapt, learn or regain independent living skills.

The service involves people in planning and reviewing their care. The initial assessment is reviewed within the first week of people using the service. We found frequent updates to the personal plan with people and representatives involved where appropriate. Assessments relating to equipment and treatment, such as physiotherapy are completed for those who need additional support to enhance their progress with reablement. Onward referrals are made to other services for people who require longer term care and support once their time with the reablement team has finished.

RSWs and other staff are very good at establishing trusting and professional relationships with people in a short amount of time. Records tell us when people have become unwell. RSWs are prompt to advise the person or their representative to seek medical help, such as district nursing or to make onward referrals to other health care professions. People told us "They give me privacy to get on with things, but I know they are there if I need them."

Records relating to people's day-to- day care and support are complete. People receive the right care at the right time. The service completes risk assessments to ensure people can safely manage their medication as independently as possible. The service medication policy follows the All Wales Policy for Managing Medication for Domiciliary Care. People's personal plan inform RSWs of the level of support people need to safely manage their medication.

#### **Leadership and Management**

The service is operating without an RI, which means regulated activities are not complete for the last six months. The management team maintain oversight and continue to audit and monitor the service people receive. Oversight and monitoring activities are continuous. The management complete quality assurance meetings, they seek the views of people using the service. Annual reports are prepared for the provider which includes the feedback. The service looks at what is working well and what could be better for people and staff. The service has robust auditing systems to monitor concerns, complaints and compliments. Audits relating to care packages tell us the service has previously sampled care records, and evaluated people's journey with the service but this has not been a recent monitoring activity. The management team and other professionals meet weekly to discuss care packages and the needs of the people accessing the service.

Records relating to recruitment tell us procedures are safe and the appropriate checks are in place before employment commences. New staff receive a robust and thorough induction and value the skills and knowledge shared by experienced RSWs. Staff receive a variety of training to meet the needs of people using the service, but some would like more specialist training and more emphasis on their training and development. RSWs are registered with Social Care Wales, the workforce regulator, and all are qualified or working towards their qualifications. Most staff receive regular supervision, and the provider is aware of the importance of ensuring all staff have equal opportunity to get support and professional development. We did not see records relating to spot checks with RSWs. The provider is taking immediate steps to ensure this is being done.

Staff meetings are regular, ensuring RSWs are fully informed and kept up to date. The service annually engages with staff to seek their views and inform service improvement. Some staff told us of improvements in communication and team unity. Some staff told us they feel valued and supported but not all. The management team is aware of this and is continuing to work on ensuring all staff feel valued and supported. Overall, RSWs are confident to share their opinions and ideas to their supervisors and the management team. There is a strong team ethic and a united focus on giving people the best outcomes. Staff told us "Teamwork is amazing, we work well together."

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

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