



## Inspection Report on

**RCTCBC Support @ Home Service (Home Care, Intermediate Care and Rehabilitation Service) and Supported Living**

**Rhondda Cynon Taff County Borough Council  
Ty Elai Unit B1  
Dinas Isaf Industrial Estate  
Tonypandy  
CF40 1NY**

### **Date Inspection Completed**

31/05/2022

31 May 2022

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## About RCTCBC Support @ Home Service (Home Care, Intermediate Care and Rehabilitation Service, Mobile Response Service, Supported Living and Extra Care)

Type of care provided	Domiciliary Support Service
Registered Provider	Rhondda Cynon Taff County Borough Council Adults and Children's Services
Registered places	0
Language of the service	English
Previous Care Inspectorate Wales inspection	
Does this service provide the Welsh Language active offer?	Yes. 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

RCTCBC Support @ Home Service (Home Care, Intermediate Care and Rehabilitation Service, Mobile Responder Service, Supported Living and Extra Care) specialises in providing care and support to people with a range of needs. People are happy with the care and support provided by the service. Care documentation is tailored to each person's specific circumstances and sets out people's care and support needs. Risk assessments are in place and are reviewed regularly. Staff workers are happy working for the services and feel supported in their roles. Staff have regular supervision sessions to discuss any professional issues or development needs. They receive the training necessary to fulfil their roles. Improvements to governance arrangements are being made to ensure the service is meeting legal requirements.

## Well-being

People have control over their day-to-day lives. People are supported in their homes and communities by a service that promotes independence. Personal plans identify people's personal outcomes and contain clear guidance for care workers to follow. We sampled several personal plans and found them to meet regulatory requirements. Personal plans and risk assessment are reviewed regularly. This means their needs and wishes are identified and met.

An established team of care workers promote people's well-being. The service provides good continuity of care. Care workers are familiar with people's wants, needs and the best way to support them to achieve their personal outcomes. Consistently good feedback from people suggests care workers treat people with dignity and respect and are held in high regard by the people they support.

Staff help to protect people from potential harm and abuse. They receive safeguarding training and are aware of the procedure for raising concerns. Policies and procedures such as Safeguarding, and Whistleblowing are in place and reviewed regularly. Medication administration is available for those who require it. There is a medication policy and care workers receive training to ensure they can carry out tasks safely and appropriately.

## Care and Support

People's personal plans set out their care and support needs. We looked at a number of personal plans and found they are person centred. This means the information recorded in them is specific to each individual who uses the service. We found personal plans are concise and provide clear instructions for care workers to follow. We saw evidence that care documentation, personal plans and risk assessments are reviewed in line with regulatory requirements. The care files we saw for people in supported living settings showed they were involved in their care and contributed their goals, wishes and preferences. Care workers anticipated people's emotional needs and supported them with respect and understanding. People's individual needs were set out within their personal plans and we saw support was adapted to suit their circumstances or changes.

People are happy with the care and support they receive. We spoke to a number of people using the service who provided complimentary feedback regarding care workers. One person told us: *"The support is great, it's there when I need it."* Another person said: *"The carers are great; I get on with all of them."* Staff turnover at the service is low, which means the service can provide good continuity of care. Care workers know the people they support well and are familiar with their needs, wants and routines. People confirm this saying they have regular care workers who provide their care and support.

There are systems in place to keep people safe. Policies and procedures that underpin safe practice contain up to date information and are kept under review. Care workers have access to a plentiful supply of personal protective equipment (PPE) and follow the latest guidance on testing for Covid-19. Care workers told us they are aware of their safeguarding responsibilities and know the procedure for raising concerns. People who require support with medication have appropriate plans in place. Care workers complete medication recording charts (MAR) to ensure medication is given as prescribed. We examined a number of MAR charts and found they were filled in correctly.

People were supported to maintain contact with their family or other significant people in their lives, and to be active in the community. We saw the service supports people's health needs where appropriate. We also noted that the service develops and uses innovative ways to improve support, for example with a quick response team, modern technology, and well-being assessments.

We examined call records from the domiciliary service and found them to be accurate and that adequate travel time was built into the call schedule.

## Environment

The environment is not inspected as part of a domiciliary care service inspection, other than the suitability of its office premises:

The service operated from a suite within the borough council's office complex. The offices were easily accessible, with level entrance suitable for wheelchairs, and close-by parking. Records and documents were kept securely, and there was space available for meetings, private conversations, staff training and supervision.

We did, however, visit the extra care service. This service comprises of independent apartments with on suite bathroom and kitchen. The apartments are housed in a building that provides an on-site restaurant, lounge areas, cinema room, hair and beauty salon, spar room, roof terrace and secure communal gardens.

These areas were light, tastefully decorated and furnished.

## Leadership and Management

We were unable to view recruitment records as these are kept centrally in the human resource (HR) department. However, the department is developing a recruitment checklist to confirm that all regulatory requirements have been met. This will be signed by a member of the department.

We saw evidence that new employees must complete a structured induction and shadow experienced members of the team. Care workers we spoke to told us this was useful as it provided them with practical experience and gave them the opportunity to meet the people they would be supporting.

Training is now being provided following the removal of COVID restrictions. As well as core training, significant numbers of staff are undertaking the Quality and Credit Framework (QCF) training in preparation for registering with Social Care Wales. Staff told us they felt that the training provided enabled them to meet the complex range of needs the services support.

Staff receive regular 3 monthly supervision from line managers in line with regulation. Staff told us they found this useful, and they felt well supported. Regular team meetings are held across the services.

Governance and quality assurance measures are being strengthened. The Responsible Individual (RI) is required to meet with people connected to the service on a three-monthly basis in order to maintain effective oversight of service delivery. However, the service has been without an RI for over 3 months, an RI has been identified and is in the process of registering with us (CIW). We understand the next 3 monthly visit is planned for June 2022.

Every six months the service is required to produce a quality-of-care report. We examined the last report and found it to be comprehensive, including information relating to the service's strengths and any areas identified for improvement. The report met all the regulatory requirements. We found that the service notified CIW of notifiable incidents including outbreaks of infectious diseases.

The service provides good information. A comprehensive, up-to-date statement of purpose sets out the service's aims, values, and how it intends to deliver the service to people. It also contains information about processes and policies for advocacy, complaints or safeguarding issues. Easy-read written guides were available for people and their representatives, containing practical information in relation to the services provided. The service also provides opportunities for people and their representatives to ask questions and receive feedback.

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



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