



## Inspection Report on

**Hospice of the Valleys - Hospice at Home**

**Trade Team Distribution Depot  
Festival Drive  
Ebbw Vale  
NP23 8XF**

**Date Inspection Completed**

**06/07/22 & 02/08/22**

06/07/2022

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## About Hospice of the Valleys - Hospice at Home

Type of care provided	Domiciliary Support Service
Registered Provider	The Hospice of the Valleys
Registered places	0
Language of the service	English
Previous Care Inspectorate Wales inspection	This is the first visit to the service since registration under the Regulation and Inspection of Social Care Wales Act 2016.
Does this service provide the Welsh Language active offer?	No. This is a service that does not provide an 'Active Offer' of the Welsh language. It does not anticipate, identify or meet the Welsh language needs of people /children who use, or intend to use their service.

### Summary

Hospice of the Valleys provides palliative care services to people within their own homes via their Hospice at Home domiciliary team. Care workers provide day and night care and support to people with a life limiting illness. People can access an additional service which prevents their admission to hospital due to being unwell or carer crisis with support from the Hospice at Home domiciliary team. We spoke with people who use the services, their relatives and care workers who were highly complementary. We found individuals receive good quality end of life care and support from the agency.

An initial assessment is carried out which gathers key information about people using the service. This supports care workers to develop close relationships with the person and their family from the onset. People who work at the service are dedicated, trained and skilled to perform their duties. The manager is experienced and registered with the workforce regulator, Social Care Wales. The service is operated as a charitable organisation. A responsible individual (RI) is responsible for the oversight of the service. We identified improvements are needed to people's personal plans to ensure they reflect each person's needs, likes and preferences as currently this information is missing. The regulations require the RI to complete a six monthly quality review of the care and support to be conducted for the service which has not been completed. In addition, the RI must undertake three monthly visits to the service which have not been carried out.

### Well-being

People's voices are heard and listened to. The service promotes positive relationships between care workers and people using the service and their family. Feedback is sought to check the effectiveness of the service. We were provided with testimonials from people and their loved ones to support people receive individual, dignified and respectful end of life care and support. Care workers are trained to carry out their duties in a caring and sensitive manner.

People are supported with their physical, mental and emotional health. The agency works collaboratively with health professionals and allied services. Care workers can refer individuals to healthcare professionals both within the Hospice of the Valleys organisation and external services. People can access additional support services such as holistic therapists and welfare rights experts.

People are safe and protected from harm and abuse. Monthly audits of accident and incidents are considered. The service has policies in place to safeguard individuals and manage people's complaints. Sound staff recruitment practices and staff training and development further protect individuals. A staff handbook sets out the expectations for care workers who work at Hospice at Home.

## Care and Support

The agency considers individual's circumstances and risks before providing a service. A comprehensive pre assessment of the individual's needs is compiled. This sets out an individual's likes, dislikes and preferences which is in keeping with the statement of purpose and is vital for the person receiving services. Care workers compile the information over a five day period which enables them to capture important personal information. The service promotes continuity of care workers which enables familiarity with people and their families.

People's personal plans do not reflect the level of detail necessary to enable care workers to support individuals in accordance with their wishes. Care workers know people's needs well but these are not clearly documented in personal plans. The personal plans contain generic information about how to support an individual which conflicts with the services' individual, person centred ethos. Given the importance the service sets for people to maintain their independence for as long as possible we have identified the lack of detail in people's personal plans as an area for improvement. The service provider is expected to take the necessary action and we will follow this up at our next inspection.

The service promotes hygienic practices and manages risks of infection. An infection control policy is in place to inform those working at the service. Staff have received infection control training in accordance with guidance. Staff have access to sufficient stocks of personal protective clothing. Care workers are trained to support individuals with their medication. Care workers refer individuals to healthcare professionals when necessary.

The service does not provide the active offer. A translator can be offered if people require it.

## **Environment**

This domain is not considered as part of a domiciliary inspection. The agency offices are suitable for their intended use with secure storage facilities.

## Leadership and Management

There are governance arrangements in place to support the operation of the service. The manager is experienced having run the service for a number of years. The service is part of the wider Hospice of the Valleys Organisation. The other parts of the organisation provide healthcare clinicians and associated services to support people who require end of life care. Hospice at Home is able to draw upon the other services to access information and promote people's comfort and wellbeing. We noted audits are conducted of the Hospice at Home service however, the service is reviewed as part of the organisation as a whole. The SOP sets out how other parts of the organisation are responsible for the governance of the service. The regulations place responsibilities upon the RI for overseeing the management of the service and providing assurance it is safe, well run and compliant. This includes a three monthly visit from the RI which enables them to have oversight of the service. We asked to view a record of the last visit. We were told the RI has not conducted visits of the service. We have identified this as an area of improvement. The service provider is expected to take the necessary action and we will follow this up at our next inspection.

The responsible individual is responsible for putting arrangements in place to establish and maintain systems to monitor, review and improve the quality of care and support. The systems established must make provision for the quality of care and support to be reviewed every six months. We asked to view the quality of care and support for the service. A review was unavailable as it had not been conducted. We have identified this as an area of improvement. The service provider is expected to take the necessary action and we will follow this up at our next inspection.

The agency has satisfactory staff selection and vetting processes in place to safeguard people using the service. The relevant staff recruitment checks have been carried out. Satisfactory references from previous employers are sought and authenticated. Staff are trained and developed to carry out their role. Hospice at Home employs care workers who have achieved a recognised care qualification (QCF). Care workers receive specific training in palliative care and are registered with Social Care Wales. The agency employs bank staff to supplement the staff team who are direct employees of the organisation and subject to the same qualification and training requirements. Staff receive regular supervision which provides them an opportunity for discussion with line managers about people using the service and staff training. Staff are proud to work as part of the Hospice at Home team.

### 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
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15	The personal plan is not person centred it does not reflect an likes, dislikes, preferences or how the service intends to meet an individuals outcomes.	New
73	The regulations require the responsible individual to visit the service in person to monitor the performance of the service in relation to the statement of purpose and to inform the oversight and quality of the review. This visit should take place every three months.	New
80	The service has not compiled a six monthly review of care and support since registration under RISCA.	New

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