



Inspection Report on

Castllecare Supported Living Limited

**22 Market Street
Dowlais
Merthyr Tydfil
CF48 3HL**

Date Inspection Completed

25/10/2023

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About Castllecare Supported Living Limited

Type of care provided	Domiciliary Support Service
Registered Provider	CASTLECARE SUPPORTED LIVING LIMITED
Registered places	0
Language of the service	English
Previous Care Inspectorate Wales inspection	04 August 2022
Does this service promote Welsh language and culture?	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

People receive care and support from a staff team who facilitate them to make progress towards their desired outcomes. The service has supported living accommodation and delivers domiciliary support calls to people in the community. People receiving support have access to educational courses and activities organised and run by staff. People are involved in their support plans, identifying their own goals to work towards independence. Support plans and risk assessments are in place, identifying people's needs and the intervention required from care staff to meet these. These are reviewed regularly.

Care staff are safely recruited and vetted for their roles. Training and supervision sessions are up-to-date to support care staff to be knowledgeable and capable in their work. There are well-being initiatives for care staff to make the service an enjoyable and supportive place to work. The manager is very involved with the day-to-day events of the service. The Responsible Individual (RI) completes quality monitoring visits and produces quality of care reports informed by monthly management audits.

Well-being

People can voice their opinions about their goals and their long-term outcomes. These are reflected in their personal plans and risk assessments. Support staff discuss people's progress towards their goals with them regularly. People are asked to give feedback both about the support they are being provided with and about community activities or groups they think would be beneficial to themselves and others. There is a complaints policy in place if a formal complaint is made.

Depending on people's identified goals, support staff facilitate people to complete pathways to independence in areas such as medication and finances, which are risk assessed and reviewed regularly to determine what progress has been made. The service provider works with a local housing association to provide smooth transition for people moving out of the supported living scheme to independent living. Although people in the supported living scheme have their own flats, there is a communal room available for socialising and informal meetings.

The manager is passionate about community networking and has set up initiatives such as a local football team and a litter picking group which is open to all members of the community, not just to people receiving support from Castlecare. People are encouraged to participate in voluntary work and community groups to build their confidence and make a valuable contribution to their local area. There are plans to build upon these community links further.

People are safeguarded from potential harm and abuse. Risk assessments and care plans identify potential triggers for risky or distress related behaviour, including the type of intervention required from support workers and the threshold for intervening. Support workers have all completed safeguarding training and there is a safeguarding policy at the service that can be referred to for guidance if needed.

Care and Support

We received positive feedback from people about the care and support they receive from Castlecare. Comments included: *"[The staff] have really welcomed me and made me feel comfortable"*, *"They've been great, I've done some courses at the drop-in centre which were brilliant"*, *"The staff are really nice."*

Professionals involved in people's care have also given good feedback about the service: *"The carers who call to [person] have built up a great rapport with them and it's lovely to see"*, *"The team are very flexible in their approach, and I'm always kept up to date with the daily recordings. There is great communication"*, *"I have found the carers to be very hands on and will contact the GP/district nurses on [person]'s behalf if needed."*

There is clear information in people's personal plans and risk assessments for support staff to ensure they are providing people with the right support at the right time. Personal plans are person-centred and reflect the goals people have set for themselves. Risk assessments identify any potential issues that could cause harm to the person, or to others, and the intervention required by support staff to minimise this risk. These are reviewed regularly and updated as needed.

People are supported to be as healthy as they can be. The manager and support staff work as part of a multidisciplinary team involved in people's care, including community mental health team, GPs, community nurses and social workers. We saw evidence of regular communication with these other professionals to ensure support delivered by the staff team is aligned with whatever treatment people may already be receiving. People are given the level of support with their medication they are assessed as needing, following a pathway towards independence where appropriate. This follows a risk assessment and recordings are in line with the service's medication policy. Medication is stored and administered as prescribed.

Leadership and Management

People are supported by a team of staff who are knowledgeable in their roles. Feedback from staff about working for Castlecare is positive. A newly employed member of staff told us: *“I don’t have a background in care, but the training here is good, and I’ve shadowed almost every member of staff.”* Another staff member told us: *“We do our best for people, it’s good to see their progress.”*

All staff are safely recruited, trained, and supported in their roles. All the required recruitment information is collected prior to employment starting and all staff work with a current Disclosure and Barring Service (DBS) check. We saw the staff training matrix showing all staff were up to date with both mandatory training and training in areas specific to the needs of the people they support. Supervision sessions are held regularly for support staff to have one-to-one time with their line manager to discuss any personal issues and their professional progress. Staff’s well-being is given high priority. The manager considers personal circumstances when organising people’s rotas. Staff have regular team nights out to socialise and build closer connections within the team. The well-being of support staff delivering domiciliary care calls is considered; they are given vouchers for coffee and car tyres to support them in their roles in the community.

There are quality assurance processes in place to monitor the care and support being provided, and act on any areas that require development. The RI visits the service to complete quality assurance reports as required and uses these to feed into a bi-annual quality of care report. The manager completes monthly audit reports to identify any patterns or trends in the events that have occurred with people using the service, or the staff.

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
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