



## Inspection Report on

**Reable Ltd**

**Forge Fach Community Resource Centre  
Hebron Road  
Clydach  
Swansea  
SA6 5EJ**

## **Date Inspection Completed**

18/12/2023

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## About Reable Ltd

Type of care provided	Domiciliary Support Service
Registered Provider	Reable Ltd
Registered places	0
Language of the service	English
Previous Care Inspectorate Wales inspection	8 June 2022
Does this service promote Welsh language and culture?	This service does not provide an 'Active Offer' of the Welsh language and does not demonstrate a significant effort to promoting the use of the Welsh language and culture.

### Summary

Reable Ltd is a domiciliary support service and provides supported living for adults over the age of 18. The service has a first floor lift accessible office, based in Clydach.

People receive a good service from Reable and are settled and happy with a consistent staff team supporting them. People can do things that they enjoy and are actively encouraged to develop their independence. Up to date personal plans are in place and these are reviewed and developed with people to align with their needs and progression.

Care workers enjoy their work and feel valued and supported in their roles. They receive regular supervision and appropriate training to support people effectively. All care staff are registered with Social Care Wales (SCW)- the work force regulator. There is a relatively new manager in post who is dedicated to learn and progress in their own development in the role. They are visible in the various schemes daily. They are well-respected by the care team and supported by the responsible individual (RI) and company director. The RI routinely works in the service and documents feedback from people and care workers to drive improvements. There are good systems in place to oversee the service on an ongoing basis.

## Well-being

People have a voice and are listened to. People can participate in the development of their personal plan and set their own goals and ambitions with a known and familiar key worker. They are supported to develop their independence and plan activities that they want to do. Personal plans are focussed on the goals and ambitions decided by the individual and are well written for each individual goal and need. People are encouraged to express their views on the service to drive improvements and contribute to decisions within their home.

People are protected from harm and neglect and receive a safe and dependable service from Reable. Care workers are recruited safely with background checks in place. Clear risk assessments are in place to support people effectively. There is a small and well-trained care team in place who know the people they support well and know how best to support them. Care staff are aware of the procedures to follow if they have any safeguarding concerns about people. There is a safeguarding policy in place which has been signed by all staff to confirm understanding.

People are treated with dignity and respect. People receiving the service are happy and settled and feel very comfortable with the care team supporting them. Similarly care workers feel content and valued in their roles. Supported living homes visited are very homely and there is a very positive atmosphere with people actively doing things that they want to do and enjoying each other's company.

People have good opportunities to socialise and develop safe, positive relationships. People living in the supported living schemes are friends with others living there and spend time together routinely. People have good relationships with care workers and have a named keyworker that they can talk to on a one-to-one basis if they have any worries or issues. Care workers spoken with were observed to be warm and relaxed in their approach with people.

People receive a service with good oversight. There is a very dedicated and newly promoted manager in post who has worked in the service a while. They know the supported individuals very well and are visible within the supported living homes daily. There is good oversight of the service and routine audits in place to maintain this. The RI works in the service on a weekly basis as a care worker. They also carry out their role as RI and obtain feedback from people and staff to drive improvements in the service. The manager told us they also receive good support from the RI in their role and from the other service director.

## Care and Support

People are encouraged to participate in the production of their personal plans and reviews to ensure the service continues to meet their needs. Personal plans are written with people's goals as the headings, with the rest of the plan detailing how care staff can assist them to achieve these. These plans are reviewed routinely and are amended as needed, following monthly meetings with everyone by their designated keyworker. Care plans are created and stored electronically. Daily records are detailed and give an overview of the person in real time. We visited supported living homes and spoke with several people receiving the service. All confirmed that they are happy and feel they can live the lives they want to live with the right support. Comments included "I really like it here; I get to go out and do things I want to do" and "they help me with the things I struggle with, and I'm getting better now and can do more for myself".

There are good systems in place supporting people with their health and medication. Staff turnover in the service is low and care staff employed have built up good relationships with the people they support. This familiarity of care staff enables them to take appropriate action on detection of any concerns with people's health. We looked at Medication Administration Records (MAR) and these are completed appropriately, with daily counts in place and weekly audits of medication by the senior care staff. Any medication discrepancies are investigated, and appropriate action taken. We saw documentation in care files in people's homes of medical appointments. Communication with healthcare professionals and any action required is recorded and acted upon appropriately.

There are mechanisms in place to safeguard people receiving the service. Care workers have completed mandatory safeguarding training and have a good understanding of their responsibilities to report any safeguarding concerns about people they support. There is a safeguarding policy in place, and this is currently being reviewed to include the Wales Safeguarding Procedures. People feel safe with the care staff supporting them and within the supported living schemes, comments included: *"I like living here, it's nice and safe, we all get along well, and we are friends"* and *"I'm safe and much happier and I can sleep at night knowing that"*.

## Leadership and Management

The provider has systems in place to support the smooth operation of the service. The newly appointed manager is very dedicated and committed to their role, to give people the best possible service. They told us the support received from the RI and director during this last year has been very good. Electronic care files have traffic light colour coding built into the system to monitor when certain things are due for review which is visible from all linked devices. This includes risk assessment and personal plan reviews. The service has policies and procedures in place and staff sign to acknowledge that they have been understood. The service's Statement of Purpose (SOP) which explains what the service does and how this is achieved continues to reflect the service well. Documents stored in supported living services are secure to maintain confidentiality.

The provider has good oversight of the service. The RI is visible in the service routinely and also works as a care worker in the service on a weekly basis. Both the RI and manager work together to ensure the service is operating well and effectively. The manager visits the various supported living homes daily and is available and approachable to people and staff. Senior care staff are in place to support the manager also. The RI speaks with people and staff to get their feedback on the service. Any identified issues are actioned to drive improvements. There are good logs in place for any accidents, incidents, and complaints in the service, these are very few. However, when they do occur these are investigated thoroughly, and the outcomes recorded.

There are good systems in place to safely recruit, support, and train care workers in the service. We looked at a sample of staff personnel files, safe recruitment, identity documentation and background checks are all in place. This includes up-to-date Disclosure and Barring Service (DBS) checks. We saw that care workers undertake multiple training courses including first aid, person centred care and food safety. All care staff are registered with the SCW. Care staff receive regular supervision and appraisals are shortly due to be completed. All feedback received from care staff is positive, comments included: *"It's really good here, we are a good team and the people we support are great" and Management and staff are great, I'm always active and doing something and never feeling uninspired"*.

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