



Inspection Report on

Dimensions Cymru- Swansea Bay

**The Beacon Centre
Harrison Drive St. Mellons
Cardiff
CF3 0PJ**

Date Inspection Completed

9 + 10 February 2022

Welsh Government © Crown copyright 2022.

You may use and re-use the information featured in this publication (not including logos) free of charge in any format or medium, under the terms of the Open Government License. You can view the Open Government License, on the National Archives website or you can write to the Information Policy Team, The National Archives, Kew, London TW9 4DU, or email: psi@nationalarchives.gsi.gov.uk
You must reproduce our material accurately and not use it in a misleading context.

About Dimensions Cymru- Swansea Bay

Type of care provided	Domiciliary Support Service
Registered Provider	DIdimensions Cymru Limited
Registered places	0
Language of the service	English
Previous Care Inspectorate Wales inspection	
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 who use, or intend to use their service.

Summary

Dimensions Cymru- Swansea Bay is a domiciliary support service that provides support to adults over 18, who live in supported living settings within the western bay area. The office base is in St Mellons in Cardiff. Consistent care workers know the people they support well and know how best to support them. Personal plans are written in consultation with family members and people are encouraged to build on their independence where possible and participate in things that matter to them. People engage with community and in-house activities that are tailored around their interests and enjoyment. Up to date personal plans give good, detailed information about people's support needs and risk assessments are in place to correspond with these. Dedicated care workers are well-trained and supported by a management team who is committed to making a difference to people's lives. The management team promotes a culture of openness, flexibility and integrity at all levels. The responsible individual (RI) maintains governance and oversight of the service through robust quality assurance systems and processes.

Well-being

People have a voice and are treated with dignity and respect. People or their representatives are involved in the development of their personal plans, which are reviewed routinely to ensure they consistently meet their needs. Encouragement is given to people to progress with their goals and ambitions and they are challenged to maintain and improve their independence where possible. People appear happy and settled in the schemes and have good rapport with care workers supporting them.

People's physical, mental health and emotional well-being is promoted. People are supported to manage their medication. Care plans contain indicators to assist care workers to recognise if people are displaying any signs of change in mental health and to adapt their approach to support them effectively. Medical advice is sought promptly when required and routine appointments are attended and logged with any actions required shared with care workers accordingly.

People are supported to maintain relationships. People have good relationships with care workers who know them well. The service encourages relationships between people and their families whenever possible. People are encouraged and supported to access the community where possible and participate in activities that are important to them. We saw genuine warmth and kindness between people and the care workers supporting them.

People are protected from harm and neglect. Care workers are up to date with safeguarding training and are clear about their responsibilities and the procedures to follow if they have any concerns about people they support. There are good procedures in place to minimise the risk of Covid-19 infection in the service and care staff follow good practices to manage infection control.

There is good oversight of the service. The responsible individual (RI) actively seeks the views of people and their care workers when they routinely visit the schemes, which enables people to get involved. There are many different systems in place which informs the RI of the quality and effectiveness of the service. Regulatory required reports are completed to demonstrate the ongoing improvements and monitoring of the service. Care workers are content in their roles and receive routine supervisions and appraisals and are supported in their personal development by a dedicated and consistent management team. Policies and procedures are in place for the day to day running of the service and the statement of purpose accurately reflects the service being provided.

Care and Support

People or their representatives are involved in the planning of care to ensure they are provided with the quality of care and support they need. Relatives and professionals spoken with are content with the service delivered to people. Comments included *“they discuss the care with me and are pretty good with communication”* and *“Their needs are currently being well met and they are getting a fantastic level of care”*.

We looked at two care files and found that personal plans are focussed on people’s goals, what matters to them and how best to support them. We saw that these plans are reviewed routinely with new goals set once others were achieved to build on people’s independence. Up to date risk assessments are in place to provide care workers with adaptable approaches to deliver care and to minimise risk to people.

People are encouraged to do things that matter to them. During the inspection people were supported to access the community and we saw on daily logs that this was a frequent occurrence. We saw that when possible, people are encouraged to do domestic tasks to maintain the upkeep of their home and goals are set to encourage progression of this. People are actively encouraged to keep in touch with family and friends where possible. Family members spoken with were complimentary about the level of communication from the service especially when visits were restricted as a result of the Covid -19 pandemic. Professional feedback included: *“They put the individual firsts, they know them so well and they really do care about them and about giving them the best quality of life”*.

People are supported to maintain their health and well-being. We saw recordings of appointments and visits that evidenced that people have access to a wide range of health care services to monitor and support their health. Health concerns are promptly identified and actioned to ensure that people receive the right support at the right time. We saw that there are good procedures in place to support people to maintain their nutritional and hydration requirements and effective risk assessments are in place to monitor any deterioration in health. We saw that care workers know the people they support well and are able recognise when they need some time to themselves. Relatives spoken with confirmed this, one said *“I’m very, very impressed with the way they look after X as they are very much in tune with his disability traits, and can recognise when he needs some time out”*.

The service promotes hygienic practices and manages risk of infection. We saw care staff wearing appropriate personal protective equipment (PPE) whilst supporting people and saw plenty of supplies in place. There are effective infection control arrangements in place including negative lateral flow and temperature checks on arrival of visitors and staff to each scheme, plus routine multiple weekly testing for staff.

Leadership and Management

There are clear governance arrangements in place to support the smooth operation of the service. The responsible individual (RI) regularly visits the schemes to gain people's views and takes action to address any issues. People we spoke with told us that the RI and the management team are visible, approachable and supportive. Some comments include *"We often see the RI and they have such a lovely way with people"*, and *"there is open transparent communication between management and staff"*. We saw that the RI completes quarterly reports following visits and areas for improvement or action are noted and followed up on subsequent visits. We received some feedback from professionals identifying improvements needed in one of the schemes, however, the issues raised were also identified in the RI's three monthly reports for the setting and an action plan has already been implemented to drive these improvements accordingly.

There is effective oversight of the service. We found that there are robust systems in place to monitor the quality and effectiveness of the service which keeps the RI informed. These records include safeguarding referrals, concerns, accidents and incidents. We saw the last two bi-annual quality of care reviews (completed in December and June 21) and these detail feedback from people, staff and relatives regarding the service and improvements to be made. Policies and procedures are in place to support the effective management and running of the service including the statement of purpose which reflects the service well.

People receive support from care staff that are vetted and recruited appropriately, well supported and trained to understand people's needs. We looked at five personnel files and saw that all documentation for recruitment including references, identity checks and Disclosure and Barring Service (DBS) checks were all in place and up to date. We saw that all care workers in the Swansea team were up to date with all mandatory training and supervisions and appraisals were carried out routinely within the required timescales. We saw that over 70% of the care team are registered with Social Care Wales (SCW) while the remainder are either going through registration at present, or are new in post and completing the required competency units in preparation to register shortly. Care staff spoken with were complimentary of the support they receive, comments included: *"I feel well supported, they are brilliant"* and *"they've really supported me to progress in my role"*.

People are able to share concerns and have their voice heard. People using the service and care staff told us that they feel confident to raise any issues with the RI and management. We saw that concerns are acted upon in accordance with the complaints policy and effectively monitored to identify any patterns and trends. Regular engagement takes place to seek the views of people. Feedback is valued and evaluated to inform the future shaping of the service. Due to the complexity of needs this was often discussed with family or professionals in the person's best interest. Those spoken with confirmed this.

Environment

The quality of environment is not a theme that is applicable to a domiciliary support service. However, the service operates from offices in Cardiff with adequate space for record keeping. We found the office premises clean and spacious with no personal information on display. Most of the information of the service is stored electronically on password encrypted laptops and hard copies of files are stored in people's own homes.

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

Date Published 31/03/2022