



# Inspection Report on

**Lifeways Support Options (West Wales)**

**Ground Floor  
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Mallard Way Riverside Business Park  
Swansea  
SA7 0AJ**

**Date Inspection Completed**

29/05/2024

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## About Lifeways Support Options (West Wales)

Type of care provided	Domiciliary Support Service
Registered Provider	Lifeways Support Options Limited
Registered places	0
Language of the service	English
Previous Care Inspectorate Wales inspection	<a href="#">23 August 2023</a>
Does this service promote Welsh language and culture?	This service is making a significant effort to promote the use of the Welsh language and culture or is working towards being a bilingual service.

### Summary

Improvement is needed in relation to the care and support people receive. People and care workers told us the current service is inconsistent due to low staffing levels and previous poor oversight from managers. A new recently registered responsible individual (RI) and service manager have been appointed. They are visiting the service regularly and have plans in place to improve the current provision including active recruitment to care worker posts. Care planning documentation needs improvement. Personal plans need reviewing and updating. There needs to be more evidence of the involvement of people in relation to care and support planning. Also, improved recording and evidence of people's achievements of documented goals.

## Well-being

Processes and documentation in the service need improvement and do not promote or evidence positive outcomes for people. We saw personal plan reviews are not always taking place withing regulatory timescales. Also, some care planning documentation needs updating to reflect presenting needs. Staff fire checks and review of fire risk assessments is not taking place. We received concerns from people, staff and external professionals about the inconsistent care and support currently being provided. The provider needs to ensure they have adequate and appropriate staffing resources in place to provide consistency to the people they support.

Governance and quality assurance arrangements in the service need improvement. The registered manager and service manager left at short notice. We received consistent feedback from care workers about low staff morale, lack of support, inadequate on-call arrangements and low staffing levels. Care workers have not been receiving supervision and appraisals within regulatory timeframes. A new service manager in the service is ensuring care worker supervision and support is in place. The RI is also visiting the service on a regular basis and a new registered manager is shortly due to take up post. There are regular planned meetings taking place between external agencies and the provider to monitor the current situation and safety of people.

Care worker recruitment and retention processes are generally robust. Care workers access appropriate core and service specific training in a wide range of subjects including safeguarding. There has been a general lack of effective service oversight which means some processes such as supervisions and team meetings are not taking place routinely. The RI and new service manager are fully aware of this and have plans in place including active recruitment to key posts.

## Care and Support

Improvement is needed in the standard of care and support received by people. We visited a service based in Llanelli and spoke to people, a manager, and care workers. A person told us; *“They are short staffed. Sometimes people do not get support all day.”* Another person stated; *“They are short of staff. Last manager has now gone. They are missing loads of shifts.”* A manager told us; *“I am covering shifts because we are so short of staff. I am trying to do my best but very busy.”* We discussed these concerns with the RI who told us they recognise the challenges and are actively recruiting for new care workers. This issue is made more difficult because some of the people who receive support have stated they do not wish to receive support from agency care workers because of previous poor experiences. The RI is looking at ways this can be overcome by possibly ensuring the same agency workers are utilised to provide consistency until new care workers are recruited. While no immediate action is required, this is an area for improvement and we expect the provider to take action.

Improvement is needed in relation to the standard of care planning documentation in the service. We were told in the last inspection that all paper care records were going to be transferred to a new electronic care planning system over coming months. This still has not taken place, although the RI informed us this is planned over the coming year. We completed an audit of two support files in the service. We found limited information regarding people’s achievement or otherwise, of goals and development. We also noted a lack of meaningful evidence supporting the involvement of people and appropriate others in relation to care planning. Personal plan reviews are not completed consistently and within regulatory timeframes. While no immediate action is required, this is an area for improvement and we expect the provider to take action. We saw separate healthcare records with detailed information regarding people’s health needs. These include specialist assessments where necessary such as epilepsy profiles, hospital admission information and behavioural support plans. We also saw recordings detailing health appointments, outcomes and actions. There are monthly dated books where care workers complete daily records. We viewed a selection of these and found them to be appropriately completed.

We spoke to care workers as part of the inspection. They informed us they have received safeguarding training and understand their duty to report any concerns about the people they support. There are detailed and thorough safeguarding and whistleblowing policies that are in date and updated as necessary. At the time of the inspection a new manager was visiting and providing support to care workers including completing supervisions.

## Leadership and Management

Governance and quality assurance arrangements in the service need improvement. The registered manager and service manager left at short notice. A new service manager and RI have recently been appointed. We met with the RI as part of the inspection who assured us they are visiting the service on a regular basis. We read reports and spoke to care workers who confirmed the RI is visiting and staff know their contact details.

Recruitment is on-going for a team leader and a new registered manager is due to start work shortly. We received mixed comments from care workers about the support they receive. Care workers also expressed low morale currently and some spoke about leaving. They also expressed concern regarding low staffing levels, having to work alone for extended periods and the challenges of increasing agency staffing levels. Some care workers told us their work rotas are often incorrect and they are having to arrange cover amongst themselves. Also, they do not always get a prompt response from the current on-call arrangements. A new service manager told us they are visiting often and providing support to care workers and people whilst continuing with recruitment to key posts. Despite this people told us there is no consistency of service and they do not always receive adequate support. While no immediate action is required, this is an area for improvement and we expect the provider to take action.

The provider ensures care workers are suitably fit and have the required knowledge, skills, competency and qualifications to provide care and support. We viewed an overall staff training plan and saw nearly all core training for care workers is current and in date. There is also specialist training available (mainly online) in relation to specific service settings and people supported. We spoke directly with care workers who all confirmed their training is current and covers a broad range of core and specialist areas. We looked at staff files and all recruitment documentation is in place including Disclosure and Barring Service (DBS) checks, which are all current. Nearly all care workers are now registered with Social Care Wales (SCW – the Welsh social care workforce regulator). We saw not all care workers are receiving supervisions and appraisals within regulatory timeframes. However at the time of inspection a manager was present and had arranged to complete supervisions with care workers.

### 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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34	A full inspection took place on 29th May 2024. As part of the inspection we spoke to people, care workers and a service manager. All gave consistent feedback about a lack of adequate staffing cover available in the service.	New
16	A full inspection took place on 29th May 2024. As part of the inspection we completed an audit of care planning documentation. We noted they have not always been completed within regulatory timeframes. They also do not sufficiently evidence the involvement of people or appropriate others and do not detail people's achievement of goals or support outcomes.	New
22	The provider needs to ensure there are adequate staffing arrangements in place to meet the support and care needs of people according to care plans and commissioner contracts.	New



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