



## Inspection Report on

**Radis Community Care (Cardiff Region)**

**Llys Enfys  
Smith Road  
Cardiff  
CF14 5FR**

**Date Inspection Completed**

21/06/2024

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## About Radis Community Care (Cardiff Region)

Type of care provided	Domiciliary Support Service
Registered Provider	GP Homecare Limited
Registered places	0
Language of the service	English
Previous Care Inspectorate Wales inspection	<a href="#">27 October 2022</a>
Does this service promote Welsh language and culture?	This service is working towards providing an 'Active Offer' of the Welsh language and demonstrates a significant effort to promoting the use of the Welsh language and culture.

### Summary

People are happy with the care and support they receive from care staff and managers. Staff are safely recruited, trained, and supported. They work effectively in collaboration with commissioners and health care professionals to meet a range of care and support needs. The agency provides services to people who live in their own self-contained apartments. They provide care and support to people who need it at scheduled times throughout the day. The frequency and duration of these calls depends on each person's individual needs. They also provide emergency support to all people who have a 'life-line' call button. The service enables people to continue living independently whilst having the care and support they need and/or having rapid access to support in the case of an emergency. People have personal plans and risk assessments are in place.

The service is well managed and overseen. Communication and record keeping is good, evidencing the support delivered. There are good processes in place to monitor the quality and effectiveness of the service. Policies and procedures ensure people and care staff have access to important information. A deputy and a senior manager support the manager. The Responsible Individual (RI) conducts their role as required.

## Well-being

Individuals receive the support they need and want. Feedback from people shows they have trusting relationships with the care workers who support them and they are assured staff are there to support them with what they need. We observed staff treat people with respect, and because they know people well, can anticipate their needs. People and their relatives have also built very good relationships with managers. One person told us “*Any problem, I come and see the manager.*” They explained the manager is always present in the building where their flat is. We observed the manager and their deputy have an open-door policy. What people want and need is recorded in their care documentation. We saw the service provider periodically seeks feedback from people by visiting them or ringing them to discuss the care and support provided. In addition the responsible individual (RI) speaks to a sample of people as required by the Regulations.

People are supported to remain physically and mentally as healthy as possible. They are supported to access services from external professionals and the provider ensures any issues around people’s health are addressed quickly. The provider works with district nurses, speech and language therapists, occupational therapists, and social services to ensure people receive the care and support they need. The positive relationships people have with staff, relatives and friends contribute to their mental well-being.

The provider has systems in place to ensure people are protected from abuse and neglect. Care staff are trained in safeguarding and have clear policies and procedures to guide them. The provider is proactive in reporting any concerns and works collaboratively with the local safeguarding board to keep people safe. We saw evidence of the provider taking appropriate action to keep the people they support as safe as they can be. This includes completing risk assessments and seeking advice from external professionals.

## Care and Support

People receive the care and support they need and want. People speak positively about care workers. One person told us “*Carers are marvellous.*” Another person told us they have had the same carers for a long time. They told us about the support they get from them; this includes support with personal care, meal preparation and accessing activities outside of their flat. We observed familiar, warm and supportive interactions between them. Discussions with care workers show they know people well and are concerned for people’s safety and well-being. We noted, when the service provider took over a number of packages of care from another agency, they ensured the changes did not affect people who use the service and individual care workers who deliver it. One person who uses the service told us nothing had changed for them and staff say they feel they have more support from Radis than they had previously.

The provider considers a range of information about prospective service users before they receive support. Each person has a set of care documentation which comprises plans drawn up by commissioners and personal plans and risk assessments developed by the service provider. All include information gathered from people, their relatives and other health professionals. People also have a ‘*One page profile*’ which summarises what is important to and for them, and how best to support them. We saw one person has a communication profile which clearly sets out how staff can best communicate with them. We saw plans are reviewed on a regular basis. Care staff record all the care and support they deliver each day in a daily record book. The provider told us a new electronic care monitoring system is being implemented across its service and it expects this will enable them to strengthen systems and processes in relation to care planning, ensure consistency across all services and the monitoring of care delivered.

Discussions with staff show they are aware of the issues associated with people’s rights to make choices which may not be in their interest and their duty of care as social care professionals. We noted when a person’s health and well-being may be comprised the service provider liaises with relevant external agencies and professionals to ensure any action taken is in the best interest of the person.

## Leadership and Management

The service provider has a robust management structure and established systems in place to support the smooth operation of the service. The RI oversees the services provided by the agency and its progress and developments. A manager responsible for the day-to-day operation of the service is in post and they are registered with Social Care Wales (SCW). They are supported by a deputy manager, an area manager and by other senior staff, each with defined areas of responsibility. All play a part in checking the quality of care provided. We saw evidence of the activities taking place to review the quality of the service provided. These included spot-checking care workers work, and audits of the systems and processes in place. The RI carries out visits to the service, collates the views of people who use the service, their relatives and staff. The necessary reports are completed.

People are supported by staff who are vetted, trained, supported and developed. The records we examined show the provider carries out the necessary checks when recruiting staff. We saw new staff receive an induction and all staff receive training relevant to their roles. Care workers are registered with the workforce regulator, SCW and are supported to achieve the necessary qualifications. Staff say they are supported by the manager and their deputy. They demonstrate commitment and interest for their roles. When staff have previously worked abroad, their induction includes an introduction to the Welsh culture and having 'work buddies' to support them and help them learn about local customs and practices.

### 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.

### Area(s) for Improvement

Regulation	Summary	Status
N/A	No non-compliance of this type was identified at this	N/A

	inspection	
73	The RI has not visited and meet with members of staff, and people who receive a service on a quarterly basis.	Achieved
80	The responsible individual must review the quality of care and support as often as required but at least every six months and prepare a report.	Achieved



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