



## Inspection Report on

**Llewelyn Support Services Ltd**

**Allied & Nationwide Development Ltd  
146-147  
St. Helens Road  
Swansea  
SA1 4DE**

**Date Inspection Completed**

08/05/2024

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## About Llewelyn Support Services Ltd

Type of care provided	Domiciliary Support Service
Registered Provider	Llewelyn Support Services Ltd
Registered places	0
Language of the service	English
Previous Care Inspectorate Wales inspection	<a href="#">First inspection following registration under RISCA 02 February 2024</a>
Does this service promote Welsh language and culture?	The service is working towards providing an 'Active Offer' of the Welsh language and intends to become a bilingual service or demonstrates a significant effort to promoting the use of the Welsh language and culture.

### Summary

Llewelyn Support Services is a new domiciliary provider having only registered three months ago to provide services across the Swansea Bay region. People told us they receive a good standard of person centred and responsive care. Currently the responsible individual (RI) and manager both provide direct care to people. Recruitment is on-going to ensure the service grows and is able to meet demand in the future. The manager and RI take an active role in ensuring service delivery is of a good standard. There are generally robust and thorough governance and quality assurance procedures in place. Assessment and personal planning documentation needs improvement to fully meet regulation.

## Well-being

People told us they are happy with the care and support provided by Llewelyn Support Services. They told us they value the support the service provides and the people providing the care are polite, respectful and very caring. The service is currently small only being operational for a period of three months since registration. The RI, manager and one care worker are providing all the direct care and support. The RI told us the service is actively recruiting and they are keen to ensure any new staff have the necessary values to ensure a good quality service is provided and maintained. The RI told us of plans to ensure the service becomes fully compliant with the Welsh language 'Active Offer' by supporting staff to access Welsh language courses etc.

People contribute to and have a voice in decisions that affect them. People said there is good contact and communication with the service. Being a small service, it is able to be very personal, flexible and responsive. The RI and manager stated they want this to continue when the service grows and develops. There are assessments and personal plans which people contribute to, and care workers actively follow. We completed a support file audit and saw care planning documentation in place including personal plans and initial assessments. The documentation needs further development to ensure full compliance with regulation and while no immediate action is required, this is an area for improvement we expect the provider to take action. There is a support file in people's home containing key documents and contact details.

People are protected as far as possible from abuse and neglect. There are detailed and thorough policies and procedures to help guide care workers, including safeguarding. The RI and manager told us they understand their responsibility in relation to reporting any concerns to external agencies. The provider has an online training system and also facilitates taught training around some subjects including safe manual handling. There are robust staff recruitment and retention procedures and checks in place.

## Care and Support

People spoke very highly of the standard of care and support they receive. We visited people in their homes. A person told us, *“Nothing but praise and nothing is too much for them. Really positive and particularly careful care provided. My overall health is much improved.”* Another person told us, *“Happy with everything, good company polite and respectful.”* The RI told us currently it is only himself, the manager and a care worker that are providing support to a small number of people. The RI is confident the service will grow and more potential care workers have recently been interviewed.

People have a personal plan for how their care is to be provided in order to meet their needs. We completed an audit of two support planning files. The service uses an electronic support planning online system. We saw basic information documented in personal plans. We discussed how this needs strengthening to ensure any risks to people’s wellbeing are fully documented with associated actions to minimise risk as appropriate. We have also requested improvements in relation to documenting and strengthening person centred information and outcome planning. The provider completes initial assessments to ensure they can fully meet people’s care and support needs. However, this needs further development to ensure the assessment builds on commissioner information such as care plans, risk assessments etc. While no immediate action is required, this is an area for improvement and we expect the provider to take action. We also saw detailed and informative files containing copies of personal plans and contact information kept in people’s homes. We saw thorough daily care worker records documented on the care system.

People are safe and risks to their health and wellbeing minimised as much as possible. The manager is a registered general nurse who has oversight of all health related issues and needs in the service. We saw healthcare records with detailed information regarding people’s health needs. There are detailed and thorough safeguarding and whistleblowing policies in place. The Statement of Purpose (SoP) details care worker staff training and includes; safeguarding, basic life support, manual handling, pressure area care etc. The manager told us of future plans to strengthen training including utilising one of the office rooms as a dedicated staff training facility.

## Leadership and Management

There are good oversight and governance arrangements in the service. The RI works in the service on a daily basis alongside a dedicated manager. The service has been in operation for three months and both the RI and manager are providing direct care and support to people. The RI told us this will change when successful recruitment of care workers takes place over coming months. A new deputy manager has been recruited and is awaiting a start date. The manager told us the deputy when in post will further enhance the service with support provided regarding administration and training tasks. The RI and manager told us they are keen to ensure there are appropriate checks, regular audits and oversight is robust in the service as it grows and develops. The RI also informed us they are currently exploring future commissioning arrangements with the local Council.

Because the service is not yet fully staffed we were only able to complete an audit of one care worker file. We saw good compliance with safe recruitment including a current Disclosure and Barring Service (DBS) check, two references and proof of identification documentation. We saw staff induction processes are in place and advised the RI these should follow guidance provided by Social Care Wales, the workforce regulator, and the All Wales Induction Framework for Health and Social Care. The RI told us this will be actioned over the coming month.

### 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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15	The provider needs to ensure that personal plans fully detail people's personal outcomes, identified risks and associated actions.	New
18	The provider needs to ensure their assessment takes into account the individuals care and support plan, health or other relevant commissioning assessments.	New



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