



Inspection Report on

Walsingham Support Domiciliary Service Wales

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

Date Inspection Completed

25th and 27th October 2022

27/10/2022

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About Walsingham Support Domiciliary Service Wales

Type of care provided	Domiciliary Support Service
Registered Provider	Walsingham Support
Registered places	0
Language of the service	English
Previous Care Inspectorate Wales inspection	9th December 2020
Does this service provide the Welsh Language active offer?	The service provides an 'Active Offer' of the Welsh language. It anticipates, identifies and meets the Welsh language and cultural needs of people who use, or may use, the service.

Summary

Walsingham Support Domiciliary Service Wales provides a high standard of care and support to people. We spoke to a wide range of people to gain feedback including; people supported, relatives, care workers, managers, commissioners and the new Responsible Individual (RI) who is in the process of registration with Care Inspectorate Wales (CIW). We found very robust and thorough support planning processes and documentation across the service. The provider ensures people are fully involved and participate in all levels of the organisation. We saw support provided is person centred and outcome focused. There are robust and clear quality assurance processes across the service. The RI and Registered Manager (RM) take an active role and are present and directive in the service. Care workers access a wide range of both core and specialist training. Some staff appraisals have not taken place. Care workers told us managers are very supportive. There are detailed policies and procedures in place to guide staff and the Statement of Purpose (SoP) is reflective of the service provided.

Well-being

People contribute to decisions that affect them and participation, choice and inclusion is actively promoted and upheld by the provider. We saw a high standard of documentation across the service. This includes people's support plans, risk assessments, health information, reviews and record keeping. We saw records clearly evidencing people's achievement of their personal outcomes. People and relatives gave us consistently positive feedback about the quality of service provision provided. We read minutes of regular meetings with people to discuss service provision and different themes in social care such as cost of living, staff pay etc. Communication across the service is highly effective and relatives informed us managers and staff are very supportive and helpful.

There are experienced, knowledgeable and well trained care workers working in the service. We saw well ordered staff files evidencing good compliance with regulation in respect of required checks. Care workers receive a good range of core and specialist training to ensure they can carry out their work roles effectively and to a high standard. Whilst nearly all care workers receive regular planned supervision we noted many have not received an appraisal over the previous few years.

The service is well run and managed. There have been service changes in relation to operational managers roles. We were told these are working well and a review will be undertaken to check this in coming months. There is clear oversight from the RI and senior management team. Quality checks are completed appropriately and according to current guidance and legislation. The latest quality of care review report completed by the RI contains detailed and thorough information regarding feedback from people, relatives, quality audits and safeguarding. All care workers told us they have a positive working relationship with their manager's feeling supported and listened too. We saw RI checks are completed, senior management meetings are taking place regularly and staff meetings are planned and documented. Staffing levels reflect people's needs as documented in care plans and assessments.

People are protected from abuse and neglect as care staff know what to look out for and how to raise concerns if they suspect someone's wellbeing is at risk. Care workers receive regular and updated training in safeguarding and have access to clear and detailed policies and procedures to guide them. There are very robust risk management assessments and plans in place to keep people safe and promote independence as far as possible. Care workers receive training in relation to infection control and Covid 19 and there are good supplies of personal protective equipment (PPE).

Care and Support

People receive a very high standard of person centred care and support. We visited four supported living settings and spoke to people, managers, care workers and relatives. We also received five feedback questionnaires from staff. All feedback received is extremely complimentary about the quality and standard of care and support provided. A person told us *“the staff are nice”* and another; *“I like to be independent. Own washing, hoovering, have some help with cooking”*. All people told us or indicated they are happy living in their homes. A relative told us; *“they have been excellent. They are patient, and I can’t ask for better people for him to be honest they are so good ... I couldn’t ask any more of them really”*. Another in relation to communication stated; *“marvellous, they send me messages...they tell me about it straightaway and phone”*.

The service has an accurate, up to date support plan which is regularly reviewed and is complimented by detailed and thorough health, risk assessment and good record keeping. We completed an audit of eight support files across different supported living settings. We found strong evidence of person centred planning, participation and inclusion. We found that where able, people are fully involved and consulted in relation to support planning and choice. Where we saw people’s ability to be fully involved is compromised we saw consideration of best interest planning and the Mental Capacity Act (2005) principles are followed. We read ‘easy read’, photographic and ‘picture symbol’ records of ‘Wales Involvement Group’ meetings. These are meetings that involve people supported and promote participation in decision making across the organisation. We saw separate healthcare files with extremely detailed and thorough 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.

People are safe and risks to their health and wellbeing minimised as much as possible. There are detailed and thorough safeguarding and whistleblowing policies that are in date and updated as necessary. We saw evidence of discussion and learning from safeguarding investigations documented in quality reports by management and discussed regularly at board meetings. All care workers spoken to told us that they had received safeguarding training and this is updated annually. We saw that information and reporting details regarding safeguarding and whistleblowing are held in each of the supported living settings. Care workers spoken to have good knowledge regarding the importance of safeguarding and their responsibilities. We saw robust infection control measures are in place along with good stocks of PPE.

Environment

The quality of environment is not a theme that is applicable to a domiciliary support service. However, the service operates from a self-contained office with good facilities for staff and some off road parking. Rooms seen are clean and well equipped, with suitable space for record keeping, meetings and locked filing cabinets for the storage of confidential information.

Leadership and Management

There are very robust and thorough governance and quality assurance arrangements in the service. The RI and RM have a strong presence in the operation and running of the service. The RI is due to retire and a new RI has been appointed and is in the process of registering with Care Inspectorate Wales (CIW). There is also a board of Trustees who meet regularly with managers. Since the last inspection there have been changes to the way the operational management of the services function. Also, there has been a new quality assurance framework introduced across the organisation to aid reporting and communication. The RM and RI told us these appear to be working well and the changes are gradually being embedded. The RM told us he is monitoring this and a review will be completed over coming months to check progress. The RI completes three monthly checks of the service provision and six monthly detailed quality of care reports. The most recent three monthly check completed by the RI includes discussions with; people using the service, care workers, operational and senior managers, safeguarding audit information and external commissioners and regulators. An easy read version is available for people who use the service. Copies are also available for all staff. Safeguarding referrals are analysed at quarterly board meetings. Managers complete detailed monthly audit checks in areas such as staff absence, training and supervision. We read the latest Statement of Purpose (SoP) and found it aligns with service delivery and outcomes.

The provider ensures care workers are suitably fit and have the required knowledge, skills, competency and qualifications to provide a high standard of care and support. We viewed an overall staff training plan and saw nearly all training for care workers is current and in date. We spoke directly with eight care workers who all confirmed their training is current and covers a broad range of core and specialist areas. Some care workers told us accessing some training (Qualifications and Credit Framework) has been difficult with some delays in starting. We spoke to the RM regarding this who told us this is an external issue with the training provider but will make further enquiries. We looked at twelve staff files and all recruitment documentation is in place including Disclosure and Barring (DBS) checks, which are all current. Nearly all care workers are now registered with Social Care Wales (SCW). We saw care workers receive documented regular supervision. However; we noted gaps in relation to appraisals taking place. While no immediate action is required, this is an area for improvement and we expect the provider to take action. Care workers gave us consistently positive feedback about the support they receive. A care worker told us; *“management are helpful and the team are very supportive...it’s a great place to work”*. Another told us; *“managers really support staff and we have a really good senior management team”*. The RM told us although recruitment continues to be challenging it is improving. Where necessary the provider accesses agency staff but this need is reducing as recruitment improves.

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
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36	A staff file audit and overall matrix provided by the service shows not all care workers have received an annual appraisal.	New
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