



## **Inspection Report on**

**Adferiad Recovery Crossroads Powys Domiciliary Support Service**

**Unit B3  
Lakeside Technology Park  
Llansamlet  
Swansea  
SA7 9FE**

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## About Adferiad Recovery Crossroads Powys Domiciliary Support Service

Type of care provided	Domiciliary Support Service
Registered Provider	Adferiad Recovery
Registered places	0
Language of the service	English
Previous Care Inspectorate Wales inspection	First inspection post registration under Regulation and Inspection of Social Care (Wales) Act 2016.
Does this service provide the Welsh Language active offer?	Yes. 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

Adferiad Recovery Crossroads provides care and support to people in their own homes within the community. People are happy with the care and support they receive and speak highly of care workers and the management team. The service adopts a person-centred approach to care delivery. Personal plans highlight people's personal outcomes. However, these are not always clear. Risk assessments provide guidance on how to keep people safe. All care documentation is reviewed in line with regulation. Care workers are recruited safely and are trained to meet the needs of the people they support. There are systems in place, including supervision and appraisal which ensure care workers are supported in their roles. We found improvements are required to ensure 'as required' (PRN) medication is administered in line with best practice guidance and that discussions regarding service delivery with staff members and people using the service are better evidenced in the responsible individual's (RI) quarterly reports.

## Well-being

People have control over their day-to-day lives. Care and support is delivered in a person centred way. People are fully involved in the care planning process and are regularly consulted on the care and support they receive. This ensures they have the opportunity to express their preferences regarding their care delivery. People provided us with positive feedback on the standard of care they receive and are complimentary of care workers and the manager.

People are treated with dignity and respect. People reported positive relationships between themselves and care workers. People told us care workers treat them with kindness and respect. The service offers good continuity of care. There is a stable consistent team of care workers who are familiar with peoples needs, wants and routines providing care and support.

There are systems in place to safeguard vulnerable people. The recruitment process is robust and ensures staff suitability before commencing employment. Care workers are supported by the management and have access to a range of development opportunities. There are relevant policies in place that reflect the Wales Safeguarding Procedures. Governance and quality assurance measures are effective, and the management oversee arrangements for the monitoring of incidents/accidents, complaints and safeguarding matters. The provider notifies all relevant agencies of reportable occurrences.

## Care and Support

People are pleased with the care and support they receive. We spoke to a number of people and their relatives all of whom provided positive feedback regarding the service. One person told us *“I have a main carer; we get on really well. She is absolutely fabulous, so friendly, we have a lot in common”*. A relative of a person receiving a service said *“The carers are very good; we have a timetable that they stick to. They are never late. I couldn’t wish for better”*.

People’s care and support needs are set out in their personal plans. Personal plans are person centred, meaning they are specific to the person’s individual needs. We examined a number of personal plans and found although they contained a good level of information, people’s personal outcomes are not always clearly documented. We discussed this with the manager who agreed with our findings. While no immediate action is required, this is an area for improvement, and we expect the provider to take action. Personal plans also contain risk assessments that identify people’s vulnerabilities. Plans and assessments are reviewed frequently to ensure information recorded in them is current.

The service adopts measures to keep people safe. There are policies and procedures that underpin safe practice. Care workers are trained to spot the signs of abuse, neglect and changes in people’s health and well-being. We spoke to a number of care workers all of whom are aware of their safeguarding responsibilities and the procedure for reporting concerns. Strict infection prevention and control systems reduce the risk of cross contamination. There is an infection control policy and risk assessment that is aligned with current guidance. Care workers have access to a plentiful supply of personal protective equipment (PPE) and regularly test for Covid-19. People told us they feel safe when care workers enter their homes as they always wear PPE. Support is available for those who require assistance with medication administration. We looked at the service’s medication policy and found it did not contain information regarding the administration of ‘as required’ (PRN) medication. While no immediate action is required, this is an area for improvement, and we would expect the provider to take action. Care workers fill in a medication recording chart (MAR) after each administration. We examined a number of these and found they are filled in correctly with no gaps. This suggests people receive their medication in line with the prescriber’s recommendations.

## Environment

As this is a domiciliary support service, we do not consider the environment theme, however the office premises appeared 'fit for purpose' during our site visit.

## Leadership and Management

Care workers feel supported in their roles and valued as employees. Care workers we spoke with provided complimentary feedback regarding the management team. One said, *“I’ve got a good relationship with the manager; she is very accommodating”*. Another said, *“The manager is very good, approachable and understanding”*. We examined records relating to supervision and appraisal. We found all care workers have received an annual appraisal. This is important as it gives care workers the opportunity to reflect on their performance and identify development opportunities. Supervision sessions are held regularly, and care workers told us there was an open-door policy, meaning they could request additional support as and when required.

Care workers have access to an ongoing programme of training and development that equips them with the skills needed to provide good quality care and support. We looked at the services training records and found most care workers are up to date with their core training requirements. We could see that training had been booked for care workers who required refresher training in certain areas. Care workers we spoke to told us the standard of training offered by the service was good, and as well as core training they are able to access specialist training when needed.

There are arrangements in place for effective governance and oversight of service delivery. We saw the latest quality of care report and documented evidence of RI visits. The quality-of-care report is completed every six months and describes what the service does well and identifies any areas where the service can improve. The RI is up to date with their specific duties and there is documented evidence that shows the RI has considered areas of service delivery such as staff training, care file audits, safeguarding matters, complaints and concerns to inform improvements. We did not see written evidence that the RI has met with people and staff every three months as required. While no immediate action is required, this is an area for improvement, and we would expect the provider to take action by the next time we inspect.

The agency's aims, values and services they provide are detailed in the Statement of Purpose and User Guide. We examined these documents and found they contained lots of useful information and they are reflective of services being provided. Other written information we looked at included a cross section of policies and procedures which we found to be detailed and aligned with current national guidance.

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



15	The provider is not compliant with regulation 15(1)(b). This is because people's outcomes and how people are supported to achieve their outcomes is not always clearly documented in their personal plans.	New
58	The provider is not complaint with regulation 58(3) this is because care workers administer PRN medication to some people using the service and the services medication policy does not contain information relating to the administration of PRN medication.	New
73	The provider is not compliant with regulation 73(3). This is because meetings with people who use the service and staff members are not documented in regulation 73 reports.	New

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