



Inspection Report on

Living at Home Swansea

**Henley House
The Queensway
Fforestfach
Swansea
SA5 4DJ**

Date Inspection Completed

05/02/2024

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About Living at Home Swansea

Type of care provided	Domiciliary Support Service
Registered Provider	Living at Home Ltd
Registered places	0
Language of the service	English
Previous Care Inspectorate Wales inspection	19 December 2022
Does this service promote Welsh language and culture?	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

People are very happy with the service they receive from Living at Home and those spoken with are very complimentary of the service and hold it in high regard. People have up to date personal plans in place that reflect their needs well and are reviewed with them routinely. People have developed good relationships with the care staff who support them and consider them friends. Care staff can support people in the way they like to be supported and are not rushed.

Care workers are recruited safely, receive regular training and are supported in their roles, receiving regular supervision and annual appraisals. The service supports the care team to register with the work force regulator. There is a caring and respected manager in post who is supported by an approachable and compassionate responsible individual (RI). Both are visible in the service daily. There is a consistent drive to improve systems in place in the service on an ongoing basis. The RI visits people regularly to obtain their views. People and staff are encouraged to complete satisfaction surveys bi-annually. These are used to determine any areas the service need to improve and inform the bi-annual quality of care reviews.

Well-being

People are provided with lots of information from the service to understand the support available to them. Living at home have a well thought out brochure with details and images to explain the service to people. There is also a well written Service user guide (SUG) which people are given during the first assessment. People can read their personal plans in their own home and have access to their own information on the electronic app in use by the service where all care plans and records are logged. which has all updates available to them in real time. This app also has the persons call schedule on it, so they can anticipate who to expect on each visit.

People have a voice and can participate in developing and evaluating their care. Personal plans are written in the first person with information shared by people in the initial assessment. Regular face to face reviews take place with people to ensure these plans continue to address their needs appropriately and are updated as required. People are visited by the RI routinely to obtain their feedback about the service and drive improvements. People are encouraged to participate in bi-annual surveys about the service. People are complimentary of the communication with the office and feel that they are listened to. One person said, *“they’re very good at empowering X to be involved, X gets a say in what X does every time they come”*.

People are treated with dignity and respect by a care team who they have developed friendships with. Care workers are held in high regard by those requiring their support and there is a great deal of trust between them. People told us they feel respected and are able to receive the support they need at a pace that suits them. Care workers complete mandatory training, suitable for their roles and are supported with regular supervisions annual appraisals, team meetings and an approachable and understanding management team.

People are protected from the risk of harm and abuse. Safeguarding training is mandatory for all care staff. Although the number of staff who have completed the official training is low, safeguarding is covered as part of the induction process and all staff spoken with understands their responsibilities and how to report this. There service has policies and procedures in place that are reviewed as required to ensure care staff support people safely. There are good procedures in place for safe recruitment of care staff.

People can sometimes receive the service in the language of their choice. The provider has made a good effort to recruit Welsh speaking staff so that some aspects of the service can be delivered in Welsh. Despite this, it is still a working process as not all calls to Welsh speaking people can be delivered in Welsh at this time. The provider continues to include the ability to speak Welsh as desirable on job notices.

Care and Support

People are involved in the development of their personal plan and consistent reviews. We had feedback from twelve people receiving the service and all confirmed their involvement to develop their personal plans from the initial assessment. We looked at four care files and found personal plans are written in the first person and give care workers good information about the support needs of people and how these needs can be met. Personal plans are reviewed quarterly, and changes updated on the personal plan as required. As all care plans are stored on electronic devices, the updated information is visible to care staff immediately through the app on their devices. Care workers told us that the personal plans are easy to follow and understand. Feedback from people regarding their personal plans and their involvement in these was very positive, comments included: *“they come out to the house every three months for a review face to face and we discuss the care plan. If there’s anything I want changed then it gets changed”* and *“they have a 3-month review, come out to x’s home and speak face to face with us about how everything is”*.

The provider has mechanisms in place to safeguard people receiving the service. Care workers complete the All-Wales Induction Framework (AWIF) for social care workers a workbook on safeguarding is covered as part of induction training which all staff must complete. Staff meeting minutes and evidenced a dedicated section on safeguarding each meeting as a reminder to everyone of their roles and responsibilities in the process. All care workers spoken with have good understanding of this and know what to do if they have any concerns about people they support. We saw the service’s safeguarding policy which reflects the Wales safeguarding procedures. People told us that they feel very safe with the care staff who support them.

There are good systems in place to support people with their healthcare needs. People who require support with medication are supported by trained staff who have undertaken competency tests. We saw that medication is logged on electronic medication administration records (MAR) on the services app. Each medication is noted on the personal plan, so staff know when it is required and ensure it is logged. We saw this in place for both for oral medication and topical ointments. Medication logs and records are audited by the management team frequently. People are supported by consistent care workers who they have built good relationships with and who know them well. Any changes in people’s health is recognised quickly and prompt action be taken to seek medical support. People confirmed this and communication with the office is very good.

Leadership and Management

People have access to information about the service to enable them to have a clear understanding of what the service can support them with. We saw the service has invested in high quality brochures and leaflets for people to understand the services they can offer and how they can access this. There is also a service user guide which is in an easy read format for people to understand how their needs can be met. We also viewed the service's Statement of Purpose (SOP) document which continues to accurately reflect the service.

There are good governance arrangements in place to support the smooth operation of the service. The service delivery is monitored with an electronic call monitoring system which is viewed from the office and on call for the duration of the staff working. This minimises the risk of missed calls and alerts the management team of any issues so that they can be followed up. All care plan documentation, including daily notes and records is on an app which is accessible by staff. People and or their families are also able to log into their care section of the app where they can see who is calling and when, and to view their care documentation and records for the day. We saw that the service's policies and procedures are reviewed routinely, and staff told us that these are accessible to them.

Care workers supporting people are suitably vetted, recruited, and trained to meet their needs. We viewed four staff files where documentation for safe recruitment and background checks are mainly in place. This includes identification documents, up to date Disclosure and Barring Service (DBS) checks and references. Care workers are supported in their roles and receive supervision and appraisals to support them in their development. The service supports care staff to register with Social Care Wales (SCW) the workforce regulator. Feedback from care staff about working for Living at home was positive. Comments included: *"Living at home is a fantastic place to work"* and *"They encourage, support, and acknowledge your efforts, you feel valued and part of a family"*.

There are good systems in place for the effective oversight of the service through ongoing quality assurance. The RI is visible in the office daily and is supported by a respected manager, office, and senior care team. The RI visits people on a regular basis to obtain their feedback on the service to drive improvements. Staff and people are encouraged to complete feedback surveys on all aspects of the service. This feedback is summarised in the services bi-annual quality of care reviews. The RI is aware of the need to send regulatory required notifications in the required timescales.

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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N/A	No non-compliance of this type was identified at this inspection	N/A
16	Personal plan reviews are not completed quarterly as required.	Achieved

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