



Care Inspectorate Wales

Care Standards Act 2000

Inspection Report

Mae'r adroddiad hwn hefyd ar gael yn Gymraeg / This report is also available in Welsh

Recovery Care Limited

Cardiff

Type of Inspection – Full

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Summary

About the service

Recovery Care Ltd is the registered provider of a domiciliary care agency based in Cardiff. The agency is registered to provide a range of services to support people with mental health needs and learning disabilities. These services include supported living (providing support to people living in six houses across Cardiff and The Vale of Glamorgan), domiciliary care (at the time of the inspection the service was not providing any domiciliary care services) and a step down service, (providing support to people to develop greater independence).

The registered manager is Andrea Williams. There is a responsible individual who oversee the operation of the service.

What type of inspection was carried out?

We, Care Inspectorate Wales, (CIW) carried out an unannounced full inspection at the agency's offices in Cardiff on 16 August 2018, followed by discussions with service users or their representatives on 17 August 2018. This inspection was part of the annual inspection cycle. To inform our report we considered the following:

- A review of information held by CIW about the service.
- Discussions with people using the service or their representatives.
- Discussion with the registered individuals.
- Examination of four care files and related documentation.
- Examination of three personnel files and information relating to training and supervision of staff.
- Examination of quality assurance information including a service user survey, and a quality assurance report.
- Examination of statement of purpose, service user guide and staff handbook.

What does the service do well?

The percentage of staff holding qualifications and the frequency of staff supervision exceeds national training targets and national minimum standards.

What has improved since the last inspection?

The agency has extended their Missing Persons Policy to include a pathway to follow to manage incidents where individuals do not have any next of kin.

What needs to be done to improve the service?

There were no regulatory non-compliance notices issued at this inspection

However, we recommend the following improvements:

- The organisation should build upon their work in relation to the 'Real Tenancy test' and with particular reference to service users having access to all areas of their home.
- The manager should ensure that all staff have a recognisable photograph on their personnel records.

Quality Of Life

We found that people who receive support from Recovery Care have choice and influence over their lives. We spoke with service users who told us that they are supported to pursue healthy lifestyles and are consulted at all times. Service users told us:

- *'staff are great, they make sure I am supported to stick with my plan to reach my goals, they are not 'in your face' but help me in an equal way'.*
- *'staff always really try to stick to our planned times, and if I want anything out of those times, they make the time to help me'.*
- *'I can ask them anything and I am comfortable to talk to any of them about any problems I might have'.*
- *'I feel safe here'.*

We saw positive interactions between staff and service users, with staff offering encouragement and good humour when assisting people. We observed staff members supporting people gently and clearly to access the activities they had chose to pursue that day.

Service users can be assured they are able to access opportunities to learn, follow interests and develop skills. Whilst visiting services we observed people preparing to get involved in activities; some were preparing to go out to engage with vocational activities, others were going out to leisure activities such as swimming, shopping, going to the gym, whilst others chose to stay in and relax or engage in other tasks at home. We saw that service users have access to a wide range of community based activities depending upon their interests and aspirations. These included voluntary work in a community café, in a cinema and shop work. It was also evident from reviewing service delivery plans that each person had their own set of goals to work towards. All plans included recordings of the progress they had made towards their goals. People are able to feel a sense of self worth by achieving progress within their chosen goals and lifestyles.

Service users in receipt of support from the agency can be assured that they will receive an excellent standard of person centred care, with encouragement to look after themselves, and support to become fit and well. This was evident from examining a sample of service users care files. We found that the language used in the records seen was person centred, with the voice of each individual service user being evident within their documentation. Service delivery plans were consistent with the care and treatment plans provided by the Local Authority, which provided staff with detail to enable them to meet service user's needs. People were consistently encouraged to be as independent as possible. This included personal hygiene tasks as well as household management tasks, such as laundry, cleaning, shopping and cooking. There were rotas and plans in place to assist service users to manage these tasks, as well as opportunities for them to communicate with each other to ensure tasks were completed fairly. We observed in the care records that service users were supported to attend all medical appointments and to follow up any actions agreed at the appointments. These were backed up with diary notes, which documented appointments for each service user within the settings on a day by day basis. We saw evidence that service delivery plans were monitored and revised as needed. We saw evidence to show that service users and or their representative had been involved in the writing of and reviewing of these and their voice

was clear throughout the care documents. Some people had refused to sign their paper work; however this had been recorded clearly and showed agreement with the content of the documents. The service were about to scan older documents which were stored in each file to enable them to be removed, making navigating the care documents easier. We found the documentation kept in peoples homes reflected the documents kept in the office. This shows that people have involvement and an element of control in the care they receive and within their recovery journey.

We found that people being supported by the service receive support that promotes their safety and wellbeing. We saw there were risk assessments in place, with plans and details as to how staff should support people with for example, inappropriate behaviours and or behaviours that could challenge themselves or others. We saw recorded strategies for staff to use to provide consistent support. These gave staff information as to how to assist people who need support to manage situations they find difficult. We saw that the effectiveness of these plans were monitored and changes made as needed, to ensure that service users were able to reduce risk and lead full and active lives. These plans were comprehensive, person centred and clear.

Service users had been given the opportunity to build warm relationships with the care staff supporting them. Service users we spoke to told us that they were able to feel confident, relaxed and safe with the care staff, who knew them well. They told us that this was important to them as they felt that care staff valued them as individuals. People felt able to trust the staff and organisation to assist them in managing their finances. We looked at peoples finance files and saw that there were clear records of service user's individual finances, with receipts of money spent and records of expenditure. These cross referenced accurately with bank statements, and all receipts and invoices seen were in place. People can feel safe and have trust in the staff who are supporting them.

Quality Of Staffing

People can be confident that they will receive consistent and high quality care from care workers who are competent and confident in meeting their particular needs.

We found that people are cared for by familiar staff as there was no use of employment agency workers and evidence of low staff turnover. The care workers worked as part of a small team, in specific houses or services, which enabled them to build strong and consistent relationships with service users and each other. The service offered a key working system where by all service users had an allocated member of staff who they worked with. People told us that they trusted the staff working with them and that the staff member knew them well. We were also informed that they had some choice as to who supports them and can change their key worker if they need to. People therefore receive consistent support from staff they know well and who are familiar with their care needs and how they like them to be met.

We found that recruitment practices within the agency were robust. We viewed a sample of four staff personnel files. All four staff files had full employment history, with no gaps in service. All four had up to date Disclosure and Barring Service (DBS) checks, and mostly had correct identifying information on their personnel files. However we found that one member of staff did not have a recent photo on their file and the manager was advised to ensure that all staff files had photo id on staff files

People benefit from a service where staff feel well-supported and have access to the training for the roles they undertake. We reviewed the staff training schedule for the service and found that all staff received not only the mandatory training sessions but also a large array of other training courses both on line and face to face which could enhance their role. Staff felt well supported by the organisation with training and supervision, which enabled them to do their jobs with confidence and skill. Supervision in this context refers to a staff member meeting with their line manager on a confidential basis in order to discuss their performance, training needs and any concerns they may have. We reviewed the agencies supervision schedule and found that staff had access to regular supervision, which often took place more regularly than is recommended within the National Minimum Standards for Domiciliary Care in Wales.

People can be confident that they receive care in a relaxed way. We found that when we spoke with people receiving services they informed us that they did not feel rushed. When we visited people in their homes, one person said that '*I have a great team of care workers, who I know and trust*'. Another said '*I am happy with the service I get*'.

Quality Of Leadership and Management

People can be assured that the service is well led with attention paid to minimum standards and regulations.

We viewed the service's Statement of Purpose and Service User Guide. These are important documents which should provide people with detailed information about the services and facilities offered within the home. This outlines the home's underpinning philosophy and approach to care delivery. We spoke with family members who agreed that they were clear about what the service sets out to do and felt that the information available was accessible and helpful. The Service User Guide was easy to read and provided guidance on how to make a complaint

We had sight of the Responsible Individuals visits and corresponding reports in accordance with Regulation 23. This is where the registered provider, or suitable person, visit the service at least annually and produce a report of their findings; this includes feedback from the people receiving support from the organisation. The purpose of these reports is to assess the quality of care provision, guide the operation of the service and identify improvements. This report demonstrated that the registered provider had oversight of the service to ensure positive outcomes for people they support.

We saw that the manager takes prompt action to address issues and that analysis of information held by CIW demonstrated that the registered persons had appropriately reported incidents affecting the health and / or wellbeing of service users. Examination of service user care documentation did not identify any incidents that were unreported.

The people who receive care and support from the agency who we spoke with told us that they knew who to contact if they had a concern or query, staff were generally very approachable and people felt able to complain if anything was worrying them. The manager was co-operative and open throughout the inspection and keen to improve the service provided. It was clear that they knew the needs of the service.

The care staff we spoke with were positive about the support and management they received. The staff we spoke to said that they were able to approach the manager and discuss issues and concerns as they arose.

Quality Of The Environment

This theme is not considered during inspections of domiciliary care agencies.

However we observed that staff and service user files were locked away securely in suitable cabinets.

We used the Real Tenancy Test, when visiting service users within their homes. This is a tool which was developed by the National Development Team for Inclusion (NDTi) as part of the Department of Health (DoH) project addressing issues of choice, control and community inclusion for people with learning disabilities and or mental health difficulties living in supported living settings. Cymorth Cymru commissioned an adaption of this to be used in Wales. This test assists us by indicating the extent to which real tenancy rights are being delivered to people living within their supported living settings. We found that in the supported living settings we visited, service users can be confident that the organisation are working to meet the real tenancy test, to ensure tenants have access to 'real tenancy rights'. We saw pro active work taking place to enable service user access to all areas of their home. However we found that some work was needed in one service, to personalise the 'quiet room' which was used as a staff sleep in room and office. Although service users informed us they could use the room as a quiet area, some further work is needed to make this space more relevant for tenants. The registered manager assured us that they were continuing to work to ensure that all of their settings met the Real Tenancy Test.

How we inspect and report on services

We conduct two types of inspection; baseline and focused. Both consider the experience of people using services.

- **Baseline inspections** assess whether the registration of a service is justified and whether the conditions of registration are appropriate. For most services, we carry out these inspections every three years. Exceptions are registered child minders, out of school care, sessional care, crèches and open access provision, which are every four years.

At these inspections we check whether the service has a clear, effective Statement of Purpose and whether the service delivers on the commitments set out in its Statement of Purpose. In assessing whether registration is justified inspectors check that the service can demonstrate a history of compliance with regulations.

- **Focused inspections** consider the experience of people using services and we will look at compliance with regulations when poor outcomes for people using services are identified. We carry out these inspections in between baseline inspections. Focused inspections will always consider the quality of life of people using services and may look at other areas.

Baseline and focused inspections may be scheduled or carried out in response to concerns.

Inspectors use a variety of methods to gather information during inspections. These may include;

- Talking with people who use services and their representatives
- Talking to staff and the manager
- Looking at documentation
- Observation of staff interactions with people and of the environment
- Comments made within questionnaires returned from people who use services, staff and health and social care professionals

We inspect and report our findings under 'Quality Themes'. Those relevant to each type of service are referred to within our inspection reports.

Further information about what we do can be found in our leaflet 'Improving Care and Social Services in Wales'. You can download this from our website, [Improving Care and Social Services in Wales](#) or ask us to send you a copy by contacting us