Arolygiaeth Gofal Cymru
Care Inspectorate Wales

Inspection Report on

Achieve together Ltd - DSS Cardiff & Vale

46 Mackintosh Place
Cardiff
CF24 4RQ

Date Inspection Completed

06/11/2024

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About Achieve together Ltd - DSS Cardiff & Vale

Type of care provided	Domiciliary Support Service
Registered Provider	Achieve together Ltd
Language of the service	English
Previous Care Inspectorate Wales inspection	05 September 2023
Does this service promote Welsh language and culture?	This service is working towards providing an 'Active Offer' of the Welsh language and demonstrates a significant effort to promoting the use of the Welsh language and culture.

Summary

Achieve Together provides support to people living in supported living settings. 24-hour support is provided in individual or shared properties. The provider is in the process of withdrawing from its specialist deaf service and other outreach support services, which have not been considered as part of this inspection.

People are happy with the support they receive. Experienced care teams support people to live as independently as possible in the community and to achieve positive outcomes. People are at the centre of the support provision, which is provided flexibly to meet their preferences and needs. Key workers review people's personal plans with them to ensure they are up to date and relevant. Encouragement and support is given to set goals and make progress towards achieving these in ways that suit each person.

The service benefits from an experienced and committed management team. Care staff enjoy their jobs and feel well supported. The Responsible Individual (RI) visits the settings regularly and has effective oversight of the running of the service.

Well-being

Achieve Together supports people to improve their lives and their ability to live as independently as possible. The provider works with landlords of properties to ensure the most suitable accommodation is provided for each person. Individual tenancy agreements are respected, and support is provided to maintain these. People have been supported to make their own decisions about moving into a different property. One person who moved recently told us "*It was a great move for me coming here. I like to read, and it is more relaxing here. The staff are all brilliant."* People are able to choose the décor of both their own rooms and communal areas, we saw evidence of people being supported to paint their walls.

Each person has an allocated key worker who they choose. This is a dedicated member of the care team who they review their progress towards their goals with monthly. The key workers complete reports and liaises with the management team to ensure plans are up to date and reflective of the person, their needs, and wishes. Positive risk taking is encouraged where appropriate and effectively managed to ensure people are safe. People are supported to maintain relationships that are important to them. Care workers also support and encourage people to attend a wide range of activities, including college courses and voluntary work. We saw various hobbies are supported in people's homes, such as home baking, and mechanics.

People are kept safe from harm. Achieve Together works openly with outside agencies and has a safeguarding policy which is aligned to current guidance. Care staff know how to report concerns and receive regular training in keeping people safe.

Care and Support

People are treated with dignity and respect and support is delivered by caring, compassionate care workers. We saw people in different services relaxed and confident around care staff. People enjoy warm, friendly, and humorous relationships with the care staff. People are treated with understanding and encouragement to achieve their goals. People are communicated with in the best way for them individually and staff receive specialist training in this regard.

Detailed assessments are completed before any support is commenced to ensure the provider can meet the needs and aspirations of the person. Personal plans are produced with the person or their representatives, wherever possible. The plans inform care staff about the person, how they would like to be supported, and what goals they would like to achieve in each identified area. Plans are comprehensive, detailed, and clearly written. They are kept under regular review to ensure they are up to date. We saw plans had been updated promptly after a review from visiting health professionals. All care records are well organised and indexed for ease of reference. Care staff make frequent records to evidence that people are supported in line with their plans. Care notes are comprehensive and contain good detail of people's mood or wellbeing throughout the day.

Communication is good. Systems are in place to ensure relevant information is shared between the team and prompt referrals are made to healthcare professionals as required. Plans are updated to reflect any change in care needs as a result of advice given. Family members are kept informed in a timely manner. Effective medication management procedures are followed. Achieve Together has a medication management policy which is kept under review. All care staff are trained in how to support people with their medication safely, and senior staff carry out regular competency checks to ensure correct procedures are followed.

Leadership and Management

People benefit from effective leadership and management of the service. The manager is registered with Social Care Wales, the workforce regulator. They oversee services delivered in each setting and knows the people who use the service well. Each setting has a service manager who oversees the day-to-day running of the service. Effective systems are used to ensure all key information is captured for review by the management team. Regular audits are carried out and feedback sought to test the quality of the service and peoples experience. The RI completes detailed reports which evidence they have effective oversight of the management of the service. The statement of purpose for the service accurately describes how the service is delivered. The provider keeps the statement of purpose under review and submits any changes to the regulator in a timely manner.

Sufficient staff are deployed at each setting to ensure people are supported in accordance with their needs and preferences. Communication with care teams, and other agencies is good. Care staff enjoy their work, they told us they feel valued and well supported. One staff member said, "*I love working here, it is the people that make it. We have a great team and the manager is really down to earth and always available."* Another staff member told us "*We are expected to encourage the tenants to do things they enjoy and be as independent as they can which is good. I really enjoy my job and feel very well supported."*

Care staff are safely recruited, we reviewed a selection of staff files and found the required information. This includes references from previous employers, Disclosure and Barring Service (DBS) checks and registration with Social Care Wales, the workforce regulator. Staff are trained in a range of areas, including specific training for the setting they are usually employed at. Care staff have regular one to one supervision meetings with their line manager to review their performance. Monthly team meetings encourage all care staff to make suggestions and discuss openly how the service is managed and how the experience of people being supported may be improved.

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.

Area(s) for Improvement		
Regulation	Summary	Status
N/A	No non-compliance of this type was identified at this	N/A

	inspection	
36	Support staff in the specialist deaf service have not received all received specific training which is required or completed mandatory training refresher courses at the agreed intervals	Achieved

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