Arolygiaeth Gofal Cymru
Care Inspectorate Wales

Inspection Report

South Wales Community Service - Western Bay

Glamorgan House Autism Centre, Monastery Road, Neath Abbey, Neath, SA10 7DH

02920629300

Date(s) of inspection visit(s):

Service Information:

Operated by:	National Autistic Society
Care Type:	Domiciliary Support Service
Provision for:	Supported Living
Registered places:	0
Main language(s):	English
Promotion of Welsh language and culture:	The service provider is not meeting the Welsh language and culture needs of people and this requires improvement.

Ratings:

Well-being	Good
Care & Support	Good
Leadership & Management	Good

Summary:

South Wales Community Service – Western Bay provides domiciliary care and support to people living in their own homes in West Glamorgan. The service has an administrative office in Neath, which staff may attend for meetings and training. There is a new manager in post who has responsibility for two other small services. Additional leaders are being appointed within the team to support the manager with day-to-day operations. There has been a change of Responsible Individual (RI) since the last inspection.

People receive good quality care and support which promotes their health and well-being. Care staff encourage people to lead a healthy, independent lifestyle. People enjoy meaningful activities and have positive interactions with care staff. The manager runs the service well and is respected by the staff team. Care staff receive the necessary training and support to undertake their roles effectively. The manager and RI closely monitor the quality of the service and drive forward improvement.

Findings:

Well-being — Good

The service upholds people's rights. The manager and care staff regularly reflect on their approach to care, ensuring people have as much control over their lives as possible. Care staff support people in the least restrictive way and empower them to make decisions for themselves. People are involved in developing personal plans and work with care staff to identify goals they would like to achieve. The manager and RI consult people about their experiences and use feedback to develop areas of the service further. People are given written information about what they can expect from the service. This includes a statement of purpose, which is currently being revised to reflect more clearly how domiciliary support is arranged and provided. The service does not currently support people who speak Welsh and does not actively promote the Welsh language and culture.

People have formed good bonds with care staff. They know in advance who will be supporting them and when. Care staff are familiar with people's risk assessments and personal plans and understand how people need and want to be supported. People are active participants in their care, with care staff prompting and reassuring them in a respectful, compassionate way. People enjoy good humour with care staff which visibly lifts their spirits.

The service promotes people's health, safety and well-being. Care staff encourage people to keep active and to maintain a suitable diet. People consistently receive their prescribed medicines, which are managed safely. Care staff monitor people's health closely and report concerns to the relevant professionals. The service manages incidents appropriately and develops support strategies with input from the Positive Behavioural Support (PBS) team. Care staff understand their safeguarding responsibilities and receive the training and support they need to deliver safe care. Additional leadership roles are being introduced to support the smooth running of the service.

People enjoy meaningful activities. They regularly meet with care staff to plan various leisure activities. We saw people's hobbies and interests reflected clearly within personal plans. People confirmed they often spend time with care staff doing things they enjoy. Visual activity timetables are used for people who like structure, although care staff respond flexibly to people's daily activity choices. People told us they are looking forward to an upcoming concert and holiday, which they have planned with care staff. People often spend time in the community and are encouraged to try new things.

Care & Support — Good

The service develops detailed personal plans which provide a good insight into who people are. People and their representatives are consulted as part of the process and existing care plans are accounted for. Personal plans identify what is important to people and how care staff can cater for their needs, preferences and goals. We saw signature sheets confirming that care staff have read and understood people's risk assessments and personal plans. People meet with their keyworker every month to reflect on what they have achieved and how they can work towards new goals. Personal plans are kept under review to ensure they remain suitable, although people's input is not always documented. The service is introducing an electronic care planning system in September 2025, which will help staff maintain full and accurate records more easily.

People receive a consistently good standard of care and support. Care staff monitor people closely and keep daily diaries which reflect on their health and well-being. This helps care staff recognise health changes or concerns, so they can refer these promptly to medical and specialist services. We saw that documents containing essential health information are available for when people need to attend hospital. People are encouraged and supported to attend health reviews, the outcomes of which are recorded and shared with the staff team.

The service manages medicines safely and arranges medication reviews when needed. We found that care staff maintain clear records in relation to medication administration. These show people receive the right medication at the right time. There are protocols in place for the use of 'as required' medicines, which care staff follow consistently.

People experience responsive care. The PBS team works closely with people to ensure they are supported in the least restrictive way. The team also holds workshops to help care staff understand PBS plans, particularly when needs change. Where required, the manager liaises with the relevant professionals to ensure people's liberty is not restricted without legal authorisation. Care staff document incidents to help identify trends, so support strategies can be adjusted if needed. The manager has worked with care staff to improve how they report incidents, and we found records to be of an overall good standard. The service plans to introduce an electronic database to allow managers to track and review incidents in real time. The manager reflects on incidents with care staff, so they can learn from the experience and develop their practice. The manager ensures recommendations following safeguarding concerns are acted upon and included in the relevant risk assessments.

People receive good continuity of care. The service has a small team of staff who are familiar with the people they support. Although challenging, they work together to cover staff absence without the need for agency input. We saw visual aids being used to inform people about which staff are due to support them each day/night. People confirmed they know the manager and care staff well.

Leadership & Management — Good

There is a positive culture within the staff team. The manager has achieved this by challenging long-standing practices and changing staff's approach to care, so people feel empowered to make decisions for themselves and live as independently as possible. The manager and RI regularly contact people to check the service is meeting their needs and expectations. Care staff support people to complete surveys about their experiences to help identify whether any changes to their care and support are needed. Families are also asked to contribute their views through quality surveys. Survey results indicate that people, and their representatives, are highly satisfied with the service. The RI completes reports following formal visits and six-monthly quality-of-care reviews; these identify how the service is performing and what improvements are needed.

The manager and staff team are required to work extra hours to cover any staff absence. This puts pressure on the small team, particularly for those who have other commitments. Senior managers have agreed to fill the vacant deputy manager post and appoint a senior support worker, which will boost morale and provide more stability to the team. There are plans to build a team of bank staff who can provide additional cover during staff absence. A new recruitment process led by the HR team will also reduce the administrative work undertaken by the manager. The service wants to attract local interest and explore better pay incentives as part of its recruitment and retention strategy. Senior managers are also accessing additional resources through Social Care Wales to support their recruitment campaign.

The service recruits and trains staff appropriately. Staff undergo robust recruitment checks prior to employment. They are required to join the Disclosure and Barring Service (DBS) update service, so the provider can carry out vetting checks easily. The manager and staff team register with Social Care Wales and are supported to complete recognised care qualifications. The service has comprehensive induction and training programmes relevant to the needs of the people being supported. Staff told us *"They really are spot on with their training"* and *"I think we cover everything. I can't think of anything that's missing"*. The manager tracks the training each staff member completes and ensures it is regularly updated.

The service supports staff to fulfil their roles effectively. Care staff find the on-call system easy to use and feel the manager is very approachable. The manager holds frequent meetings for care staff to discuss their work and any policy changes. Care staff also receive regular formal supervision and annual appraisals, providing further opportunities to reflect on their performance and development. The staff team use a communication book and handover meetings to share information and updates about people's care. Care staff complete safeguarding training yearly and know how to report concerns via safeguarding and whistleblowing procedures.

Areas identified for improvement

Where we identify **Areas for Improvement** but we have not found outcomes for people to be at immediate or significant risk, we discuss these with the provider. We expect the provider to take action and we will follow this up at the next inspection.

Where we find outcomes for people **require significant improvement** and/or there is risk to people's well-being we identify areas for **Priority Action**. In these circumstances we issue a Priority Action Notice(s) to the Provider, and they must take immediate steps to make improvements. We will inspect again within six months to check improvements have been made and outcomes for people have improved.

CIW has no areas for improvement identified following this inspection.

CIW has not issued any Priority action notices following this inspection.

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