Arolygiaeth Gofal Cymru
Care Inspectorate Wales

Inspection Report on

Active Care Group - Cwm Taf Morgannwg

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Kent
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Date Inspection Completed

14/07/2023

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About Active Care Group - Cwm Taf Morgannwg

Type of care provided	Domiciliary Support Service
Registered Provider	Staff Management Limited
Language of the service	English
Previous Care Inspectorate Wales inspection	24 November 2022
Does this service provide the Welsh Language active offer?	This service does not provide an 'Active Offer' of the Welsh language and does not demonstrate a significant effort to promoting the use of the Welsh language and culture.

Summary

We were unable to fully inspect the service as the provider is currently non-operational in this geographical footprint. The provider does operate in other areas of Wales, so we are able to consider the leadership and management arrangements for the service and the providers readiness to operate in Cwm Taf Morgannwg. There are policies and procedures in place for the running of the service which have been updated to include Welsh legislation. The Responsible Individual (RI) has good oversight of the service and visits regularly. The provider understands legal requirements of caring for vulnerable people and has procedures ready to monitor the service. Care staff are safely recruited and receive the required training and support to undertake their roles.

Well-being

We were unable to fully consider this domain as the provider is not currently operating in this geographical footprint but is currently operating in other areas of Wales. The provider is able to begin providing services in Cwm Taf Morgannwg. There is an appointed manager in place who is in the process of registering with Social Care Wales, the workforce regulator, and an RI who has good oversight of the service. The statement of purpose is up to date and kept under continuous review. Policies and procedures are robust and reflect Welsh legislation where required. The provider understands requirements for governance and quality assurance and has these processes in place ready for when the service becomes operational. Care staff are recruited safely with prep-employment checks completed and staff personnel files containing required information. Care staff are suitably trained and well supported by the management. People have access to a complaints process and the provider understands the requirements for safeguarding adults at risk of abuse.

Care and Support

The provider is currently non-operational in this geographical footprint and so we were unable to consider this theme of the inspection. We will consider this theme fully at the next inspection if the provider is operational.

Leadership and Management

There is suitable leadership and management in place. Active Care Group Cwm Taf Morgannwg benefits from an RI with good oversight of the service and an appointed manager who is in the process of registering with Social Care Wales. There are policies and procedures in place for the running of the service and improvements have been made to ensure documents reflect Welsh legislation. The RI monitors the service in line with regulatory requirements and engages with care staff working for the organisation. A report is produced to support the visits and to demonstrate good oversight of the service. Care Inspectorate Wales are notified of events as set out within the regulations. The provider understands the requirements regarding quality assurance monitoring and has governance arrangements readily in place. This indicates that the provider is committed to providing a quality service and making improvements when required. The provider has ensured that their statement of purpose is kept under review and up to date. This document is important as it outlines what services can be offered, to who, how and when.

Care staff working within the organisation are safely recruited. We examined a selection of staff personnel files and found that they all contain required information. Staff recruitment is safe and robust as pre-employment checks including references and Disclosure and Barring Service (DBS) certificates are applied for prior to employment commencing. These checks are important as they determine a person's suitability to work with vulnerable people. Care staff receive appropriate training, which is refreshed regularly, and they feel well equipped to undertake their roles. Care staff told us they are happy working for the organisation and feel well supported. All staff receive a formal supervision in line with regulatory requirements. Supervision is important as it is an opportunity to discuss practice issues or needs in a formal setting that is recorded.

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

N/A	No non-compliance of this type was identified at this inspection	N/A

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