Arolygiaeth Gofal Cymru
Care Inspectorate Wales

Inspection Report on

Pobl Care & Support West Glamorgan Regional Partnership Area

Pobl Group
Exchange House The Old Post Office
High Street
Newport
NP20 1AA

Date Inspection Completed

25/03/2024

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About Pobl Care & Support West Glamorgan Regional Partnership Area

Type of care provided	Domiciliary Support Service
Registered Provider	Pobl Care and Support Limited
Registered places	0
Language of the service	English
Previous Care Inspectorate Wales inspection	
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

People are happy with the care and support they receive from all staff. We found they consistently receive very good support to do the things they like, to lead active lives, and to remain as healthy as possible. We observed staff know people well, treat them with dignity and kindness and they offer reassurance when necessary. In addition, staff work effectively in collaboration with external professionals to manage risks and to meet people's needs.

The agency has established systems in place to enable them to plan, deliver and review the care and support provided to each person. They also have excellent systems to recruit, induct, train and develop staff. We noted all these systems involve people who use the service. This includes seeking people's views about their own care and support and people taking part in staff recruitment.

The service is effectively managed and overseen. Established managers and senior staff are in post. They are well regarded by people and staff teams. Staff feel valued and supported in their role. The Responsible Individual (RI) visits people who receive a service and completes the required regulatory reports. The provider has many other quality of care oversight procedures in place to ensure that the service is the best it can be for people.

Well-being

People have choices about the care and support they get and about doing the things they like. People spoke to us about what matters to them, how they spend their days and about the support they receive from care staff. Our observations and discussions with staff show they cater for people's preferences and because they know them well, can anticipate their needs. We saw evidence of positive relationships between them. We noted staff support people to engage in a range of activities within their own homes and in their local area. Records show people are involved when their personal plans are set up and then regularly reviewed. When applicable, their relatives or other representatives are involved. The RI seeks feedback from people when they visit and acts when something needs to change. The Welsh language and culture are promoted in the service.

People are supported to remain physically and mentally as healthy as possible. We noted they receive varying degrees and types of support according to their own needs. We saw this can include support with personal care needs, to attend routine health appointments, to take medication, or to talk about worries they may have. People are also supported to stay physically active, to maintain meaningful relationships with family and friends, and for some to pursue volunteering or work opportunities. When people's needs change, referrals to relevant health professionnals are made. Discussions with people and a review of their care documentation shows they are supported to have control over their day-to-day lives and also to make plans for the future. This contributes to people's mental well-being.

People are protected from abuse and neglect. There are excellent recruitment processes in place. There are robust systems to induct and train staff so that they know what to look out for and how to raise concerns if they suspect someone's well-being is compromised. They have clear policies and procedures to guide them. On an individual basis, there are risk management plans in place to keep people as safe and as independent as possible. Senior staff work very well with external agencies when issues arise. People are given information about the service they can expect, how they can give feedback and who they can contact if they wish to raise a concern. This information is available in Welsh, English and in 'easy read' versions.

Care and Support

People receive the care they require. We saw the agency provides varying levels and types of support. Some people receive 24 hour support which covers all aspects of their daily living needs. Other people receive support at specific times and in the areas where they need help. People speak positively about the support they receive, they talk about doing the things they want to do and about getting the help they need. We observed staff consistently interact well with people and saw evidence of staff knowing people's needs and having very good relationships with them. One person told us "*Staff look after me, I feel safe and I am happy*". In one instance, we observed a member of staff observing the gesture of a person who does not express themselves verbally. We saw how they interpreted the gesture and provided support accordingly. In another instance, we spoke to a person who moved to a new house and recently started using the service. They spoke about the challenges of these changes and about the support they have received from staff. What they told us and their body language strongly indicated they had already built a trusted relationship with the member of staff who was supporting them.

Each person has a set of care documentation which contains information about them and how staff can best support them. It includes information gathered from them and from significant others, including health professionals. Their documentation gives a real sense of who they are, what they like, dislike, and what they want to achieve in life. It also outlines how best to support them. One of the plans we reviewed clearly listed what a person who cannot communicate verbally does and what it means. Risks are acknowledged and ways to manage these are listed. We saw people's documentation is regularly reviewed which ensures it remains current. The documentation we reviewed is good and some is very good. The model used to plan people's care reflects best practice in health and social care. The RI and senior staff explained work continues and includes a move to electronic records and additional training for staff to ensure personal plans are consistently of a high quality.

People are protected from abuse and neglect as care staff know what to look out for and how to raise concerns if they suspect someone's well-being is compromised. Care staff are trained in safeguarding and have clear policies and procedures to guide them. There are risk management plans in place to keep people as safe and as independent as possible. When necessary, staff work in collaboration with external professionals to manage risks and to meet people's needs. The service provider consistently reports notifiable events to the service regulator and relevant agencies.

Leadership and Management

People benefit from an experienced and highly effective leadership and management team. There is a robust management structure and established systems in place to support the smooth operation of the service. The RI oversees the services provided by the agency. They oversee progress and developments, they ensure required checks and analysis are carried out and collate the views of people who use the service, their relatives, and staff. The agency has a team of assistant directors, managers and other senior staff with defined areas of responsibility in post. They are responsible for the day-to-day operation of the service and play a part in checking the quality of care provided. We saw evidence of regular quality of care reviews and evidence of ongoing audits which take place. Reports are completed as required by the regulations and are of high quality.

There are excellent systems in place to recruit, induct, train and support staff. The records we examined show the provider carries out robust checks when recruiting staff and this includes checking employment histories, obtaining references and carrying out an enhanced Disclosure and Barring Service (DBS) check. New staff receive an induction, and all staff receive training relevant to their roles. Staff told us, and records show, they receive one-to-one supervisions. They are supported to achieve recognised care qualifications. The service provider ensures staff are registered with Social Care Wales (SCW), the workforce regulator.

We found the service provider provides highly individualised care and support packages to people who use the service. The agency has a dedicated member of staff who looks for any technology which may increase people's levels of independence. They organise trials for them to decide for themselves whether a product is beneficial. In addition, we noted the service provider continuously looks at ways people who use the service can be involved in the running of the agency. We saw the RI involves people who use the service in their monitoring activities by jointly carrying out visits. They explained how "*Experts by experience'* gives them a different perspective on what they see and what they are being told. People are also involved in the review of policies, recruitment of staff and their training. Overall, these practices are aligned with recognised best practice in health and social care.

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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