



Inspection Report on

Achieve Together Ltd - DSS West Glamorgan

**6 Tredomen Gateway
Tredomen Business Park
Ystrad Mynah
Hengoed
CF82 7EH**

Date Inspection Completed

18/11/2024

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About Achieve Together Ltd - DSS West Glamorgan

Type of care provided	Domiciliary Support Service
Registered Provider	Achieve Together Ltd
Registered places	0
Language of the service	English
Previous Care Inspectorate Wales inspection	23 November 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 supported living services to people who hold their own tenancies. The care and support delivered by the service consistently provides excellent outcomes for people. People are supported to make their own choices, promoting their independence and can do the things that matter to them. People get the right support at the right time to help them stay as healthy as possible. Appropriate systems are in place to help protect people from abuse and neglect. People have detailed person-centred plans to assist care staff to meet their needs and promote their well-being. Infection control measures help reduce the risk of transmission of potential sources of infection. Systems are in place to support people with their medication. Governance, auditing, and quality assurance arrangements are in place to support the service to be well run. Care staff are recruited safely and are suitably trained. Care staff are happy working for the service and feel supported in their role. The service provides good information to the public.

Well-being

People are supported to make their own choices, promoting their independence. The service support people's communication needs, using various methods and ensuring people have communication passports in place. This means people can make their choices and wishes known as far as possible. Where people cannot make their own decisions, this is done in their best interests, working closely with families and health and social care professionals and evidenced in care documentation. Care staff have up-to-date information about people's decision-making capabilities and what their preferences are. Care staff know the people they support well, meaning they have consistent support. People are involved in reviews of their care and support.

People do the things that matter to them and are able contribute to their community. People take part in activities of their choosing and access the community, reducing the risk of experiencing social isolation. People told us they can make their own choices about the things they do, can see their friends and family, and are supported to do so by care staff.

People are supported to stay as healthy as possible, getting the right help at the right time. Issues and concerns are reported to external health professionals, with the service following relevant guidance. We saw an abundance of evidence of ongoing work with health and social care professionals, which significantly promotes people's well-being and enabling them to continue to live in the community. Detailed behavioural support plans are produced by the service in partnership with people, their families, and health and social care workers. Care staff receive specialist training where this is needed, for example in supporting people to manage epilepsy. People are supported to receive their prescribed medication as directed and attend routine appointments.

Systems are in place to help protect people from abuse and neglect. Risk assessments promote positive risk taking and help keep people and care staff safe. Care staff understand their safeguarding responsibilities and how to report issues if they are concerned for a person's well-being, with policies and procedures in place to support this. Care staff feel confident if they raised an issue with their managers, it would be responded to appropriately. Recruitment is effective, and regular staff supervision supports continued development. Incidents and accidents are documented, with actions taken by the service in response. Ongoing quality assurance checks ensure systems remain effective and improvements are identified and addressed.

Care and Support

The care and support delivered by the service consistently provides excellent outcomes for people. People told us *“they work hard”, “they’re very kind and caring”, “I like living here”, “they’re amazing, really good”,* and *“they always check on me, but give me my space too”*. Professionals working closely with the service told us *““they’ve developed very positive and enabling relationships”,* and the staff have a *“nurturing and empowering approach”*. We saw care staff treating people with kindness, respect and positive regard. The same core teams of care staff work for the same people, which helps promote continuity of care. Because care staff know people well, they can, for example, recognise changes in people’s health and well-being and act quickly. This is particularly important where people are unable to reliably communicate issues they may be experiencing. We saw several examples of close multi-disciplinary working with health and social care professionals that helped people to settle very well and live successfully in the community.

People have detailed person-centred plans to assist care staff to meet their needs and promote their well-being. Assessments are completed prior to the commencement of a service, drawing on a range of information from different sources. Personal plans use an ‘easy read’ format and focus on strengths and the positive aspects about people, giving detailed direction to care staff around how best people like to be supported. Risk assessments direct care staff to support people to stay safe. Care documentation is produced in partnership with people and their representatives and is reviewed regularly with them. Daily recordings and monitoring charts are extremely robust and detailed, capturing important information about people’s progress and helping identify changes in care needs.

Infection control measures help reduce the risk of transmission of potential sources of infection. An appropriate supply of Personal Protective Equipment (PPE) is available to staff and used as needed, such as supporting with personal care tasks. An infection control policy and associated training supports staff to understand their responsibilities. People are supported to maintain their homes environments, with all properties visited appearing clean and tidy.

Systems are in place to support people with their medication. Medication is administered as prescribed, with records giving clear instruction and being free from errors. Medication is stored safely. Care staff receive training on how to manage and administer medication. A medication policy is in place, which underpins care staff practice.

Leadership and Management

Governance, auditing, and quality assurance arrangements are in place to support the service to be well run. Information gathered from these processes help identify what is working well and where improvements are needed. We saw the service provider's electronic reporting system enables quick reporting and responses to issues, contributing to the smooth running of the service. The Responsible Individual (RI) oversees the service, undertaking three-monthly visits to meet with people and staff, and completing six-monthly Quality of Care review reports. The views of people and staff are sought to help inform the running of the service. The required policies and procedures are in place, giving guidance to care staff about important areas of care such as medication and safeguarding. Procedures are in place to deal with complaints, with the service evidencing actions taken to resolve these. The service is open and transparent, making the legally required notifications to Care Inspectorate Wales (CIW) regarding occurrences with the service.

People can be assured care staff are recruited safely and are suitably trained. Care staff files confirm the correct recruitment arrangements have been undertaken, containing all legally required information such as proof of identity and employment references. Care staff are registered with the workforce regulator, Social Care Wales. New care staff complete an induction when starting with the service. Training records show care staff have up to date training in core areas of care, which is an improvement acted upon since the last inspection. Additional training is in place for specialist health conditions where required. Staff told us they feel well trained, they can perform their duties safely and effectively and could request extra training if needed.

Care staff are happy working for the service and feel supported in their role. They told us *"it's lovely – the people are lovely"*, *"it's good"*, and *"the managers are easy to talk to"*. Turnover of care staff is relatively low, helping facilitate continuity of care and consistent support. Care staff have regular supervision and a yearly appraisal which supports their performance and professional development. Staffing levels are based on the number of hours the service has been commissioned to provide, and appear sufficient.

The service provides good information to the public. The Statement of Purpose sets out the service's aims, values, and how it delivers support. A written guide contains practical information about what people can expect from the service and includes the complaints procedure.

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	Core and specialist refresher training has not been provided to all staff.	Achieved

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