

BRIDGEND COUNTY BOROUGH COUNCIL

REPORT TO SUBJECT OVERVIEW AND SCRUTINY COMMITTEE 2

17 JUNE 2021

REPORT OF THE CORPORATE DIRECTOR SOCIAL SERVICES AND WELLBEING

CARE INSPECTORATE WALES (CIW) INSPECTION OF BRIDGEND COUNTY BOROUGH COUNCIL'S (BCBC) DOMICILIARY CARE IN ADULT SOCIAL CARE

1. Purpose of report

- 1.1 The purpose of this report is to provide the Committee with the outcome of the published report dated 21 December 2020 in respect of the Care Inspectorate Wales (CIW) Inspection of Bridgend County Borough Council's (BCBC) Domiciliary Care in Adult Social Care (attached as **Appendix A**).

2. Connection to corporate well-being objectives/other corporate priorities

- 2.1 This report assists in the achievement of the following corporate well-being objectives under the **Well-being of Future Generations (Wales) Act 2015**:
- **Supporting a successful sustainable economy** – taking steps to make the county borough a great place to do business, for people to live, work, study and visit, and to ensure that our schools are focussed on raising the skills, qualifications and ambitions for all people in the county borough.
 - **Helping people and communities to be more healthy and resilient** - taking steps to reduce or prevent people from becoming vulnerable or dependent on the Council and its services. Supporting individuals and communities to build resilience, and enable them to develop solutions to have active, healthy and independent lives.

3. Background

- 3.1 Bridgend County Borough Council Domiciliary Care Services (the service) was inspected by Care Inspectorate Wales (CIW) in October 2020. This was the first inspection of the service since being registered under the Regulation and Inspection of Social Care (Wales) Act 2016 (RISCA). The inspection was conducted in line with the CIW Code of Practice for Inspection of Regulated Services, to evaluate the service's adherence to legislative and regulatory requirements, principally the Regulated Services (Service Providers and Responsible Individuals) (Wales) Regulations 2017 and the meeting of conditions of registration and the Statement of Purpose. The inspection also evaluates the service's ability to provide the Welsh Language active offer. In doing so, CIW are aiming to ensure that people using the service are supported to achieve the best possible outcomes, are not placed at risk and do not experience harm.

- 3.2 The domiciliary service provides support to people over the age of 18 years in their own homes, whether that be as an individual, within a supported living setting, or an Extra Care facility. The inspection process considers the wellbeing of individuals receiving care and support, the quality of care and support provided to individuals, and the leadership and management of the service, including the organisational arrangements for the provision of care and support.
- 3.3 This inspection was conducted during a period of Covid-19 restrictions and, due to this, was mostly conducted on a virtual basis. The inspector requested some advance information including policies, Statement of Purpose, written guides, complaints information, incident reports, call logs, supervision data, training data, safeguarding referrals and quality assurance reports. This information was supplied to the inspector over a period of two weeks from 7 October 2020. The inspector attended the premises at Ty Penybont on 20 October 2020 to inspect staff and individual files. Some staff and individual files were also provided to the inspector electronically. The inspector was able to meet virtually with managers and staff working within the service using the Microsoft Teams platform. The inspector also met with some individuals via Microsoft Teams and was able to speak to other individuals and family members on the telephone.
- 3.4 A draft of the inspection report was received on 25 November 2020 and the final report was published on 21 December 2020 (attached as **Appendix A**). A further inspection can be expected within 18 months.
- 3.5 There is a requirement under RISCA to have a nominated Responsible Individual (RI) which for this service is the Head of Adult Social Care. The RI is accountable for the provision of the domiciliary care and is required to have oversight of the running of the service. In addition, there are also four registered managers (RM) employed, who are suitably qualified and registered with Social Care Wales as required.

4. Current situation/proposal

- 4.1 The report highlighted the positive feedback from people about the care and support they receive and praised the clear management structure, the good support and development opportunities for staff, and the positive feedback from staff who said they felt valued and supported. It highlighted the additional challenges during the coronavirus pandemic. Inspectors said people receiving care and support told them they were confident in having care workers coming into their homes because they were careful with hygiene practices. Inspectors also praised the detailed and recorded care plans.

In summary the report provided key findings against three key areas, those being:-

- **Wellbeing:** People receiving care from BCBC receive care from staff who are generally happy in their roles, feel supported, and have the opportunity to undertake appropriate training to do their jobs.
- **Care and Support:** People have accurate and up to date personal plans that detail their individual care needs. People and their representatives are complimentary about the positive relationship they have with care workers and are happy with the service provided.

- **Leadership and Management:** The service has effective governance arrangements in place to ensure people receive good quality care and support, and management are extremely proud of the staff teams for their commitment and dedication through the current pandemic.

4.2 The report advised that some improvements are needed to ensure the service meets all of its regulatory requirements; however, this has minimum impact on the service delivered to people.

4.3 An extract from the report concluded that:

People are happy with the care they receive and have positive relationships with staff. We spoke with people using the service and they told us “*The staff are my best friends*”, “*I get the support I need*”, “*Staff are really good*” and “*They help me to do whatever I need*”. Everyone we spoke with was complimentary of the care staff and feel they provide a service that meets their needs. A relative told us “*Without their support, she wouldn’t be able to stay at home*” and “*they notice the little things*”.

4.4 The key inspection findings for the area of Wellbeing include:-

- People have input into their care and support;
- There is a clear management structure for the service;
- Care documentation is to a good standard and consistent overall, with reviews undertaken regularly;
- Personal plans and risk assessments are detailed and guidance for staff is clear;
- The inspectors received positive feedback from people about the care and support they receive;
- Care workers told us they have a sufficient supply of personal protective equipment (PPE);
- Staff receive good support and development opportunities, in a variety of different ways due to Covid-19;
- The inspectors received positive feedback from the staff who advised they feel valued and supported;
- There are effective systems for monitoring and auditing standards of support and record keeping throughout the service, overseen by management;
- The statement of purpose shows a clear vision, values, and ethos for the service and the service provided is consistent with this;
- The RI told us that training provision, supervision, and spot checks of care workers has been affected by the pandemic; however, these are being addressed and we saw evidence of positive progress with these during the inspection;
- Systems are in place to protect people from abuse and neglect;
- The service provider safely recruits and vets staff before they start their employment;
- Staff have training appropriate to their role and they understand their responsibilities to safeguard vulnerable adults;
- Staff are aware of their safeguarding responsibilities and relay any concerns to the management team;
- Relevant policies and procedures are available, some of which require review;

- Staff access medical and other professional advice for people in a timely manner, and the service actively identifies potential risks;
- Quality assurance and audit tools are in place to improve outcomes for people in the home.

4.5 The inspectors reviewed nine care files and evidenced that information available to care workers is detailed, up to date and reflects the current needs of the people. Other key inspection findings for the Care and Support area include:-

- Care plans and reviews consider people's personal outcomes, as well as the practical care and support they require;
- People have an accurate and up to date personal plan and risk assessments for how their care is to be delivered;
- Care workers said they feel they are told everything they need to know to provide good daily care;
- People (and relatives) felt that they were included in writing and updating the personal plans, evidenced by their signatures;
- The plans were detailed and recorded people's likes and preferences;
- Monthly reviews with people to discuss progress and plan future goals;
- Staff confirmed care records are easily available and they are always informed of any changes;
- There are appropriate infection control measures in place, which work to keep people safe from the transmission of Covid-19 and that care staff understand the requirements of Personal Protective Equipment (PPE);
- People receiving care and support had confidence in care workers coming into their homes because they are careful with hygiene practices;
- The service has taken all reasonable steps to identify and prevent the possibility of abuse and care workers recognise their personal responsibilities in keeping people safe and undertaken appropriate training;
- Staff were aware of the whistleblowing procedure, and felt confident to approach the manager if they needed to.

4.6 The key findings for the Leadership and Management area include:

- There is a range of information available to people considering using the service and their relatives.
- There is a statement of purpose that sets out information about the agency, it ensures that people who are seeking care from the agency are clear in what the agency can and cannot provide. It was easy to read and informative and can be available in Welsh if required.
- There is a written guide for each service area, which contains relevant information for people using the service and includes information on how people can make a complaint should they wish to do so.
- Staff have the necessary checks before being offered a job.
- Systems are in place to ensure staff receive regular supervision and support.
- Since March 2020 the service has provided ongoing support to all staff in a variety of new ways. Care staff advised they were happy in their work and complimentary of the management of the service.
- Management are very approachable and operate an 'open door' policy.
- The service provider has effective governance arrangements in place to ensure people receive good quality care and support.

- The RI has regular contact with managers to oversee the services and that people can be confident though that ongoing monitoring and quality assurance takes place. The managers carry out regular reviews and audits of the service, captured in a monthly report, which is checked for progress.
- Care staff advised that they felt suitably trained to undertake their role.

4.7 The report identified two areas where improvement is required, these being:-

Areas where improvement is required	
The service provider must notify CIW of a serious accident, injury to or illness of an individual.	Regulation 60 Schedule 3 (17)
The service provider must keep policies and procedures under review.	Regulation 12 (4)(c)

4.8 The report detailed that there is a current safeguarding policy available for all staff to access and follow. Incidents are appropriately reported to the local safeguarding team and information shared on a need to know basis. However, such incidents have not always been forwarded to CIW as required by regulation. The service has addressed this area for improvement and all incidents are now reported in line with the regulations. This is monitored via the RI visits and the quality assurance processes in place.

4.9 The report detailed that BCBC have a corporate system for highlighting any policies that require a review and had recently reviewed their safeguarding policy. However, CIW found they had not all been formally reviewed on a regular basis. CIW expect the service to take action to address this and will follow this up at the next inspection. The area for improvement is being addressed within the service and with corporate services.

5. Effect upon policy framework and procedure rules

5.1 There is no impact on the policy framework and procedure rules

6. Equality Act 2010 implications

6.1 The protected characteristics identified within the Equality Act, Socio-economic Duty and the impact on the use of the Welsh language have been considered in the preparation of this report. As a public body in Wales, the Council must consider the impact of strategic decisions, such as the development or the review of policies, strategies, services and functions. This is an information report, therefore it is not necessary to carry out an EIA in the production of this report. It is considered that there will be no significant or unacceptable equality impacts as a result of this report.

6.2 The information contained in the report positively describes support being made available to those providing care.

7. Well-being of Future Generations (Wales) Act 2015 implications

7.1 The implementation of the duties and responsibilities under the Social Services and Well-being (Wales) Act 2014 (SSWBA), in turn, supports the promotion of two of the seven goals of the Well-Being of Future Generations (Wales) Act 2015 within the County Borough of Bridgend. By promoting an environment that maximises people's physical and mental well-being and by supporting children, young people, adults and their carers and families to fulfil their potential no matter what their circumstances, the wellbeing goals of a healthier and more equal Bridgend and Wales are supported.

7.2 The Well-being of Future Generations (Wales) Act 2015 provides the basis for driving a different kind of public service in Wales, with five ways of working to guide how the Authority should work to deliver wellbeing outcomes for people. The following is a summary to show how the five ways of working to achieve the well-being goals have been considered in this report:

- Long Term – Social Services is demand led and the SSWBA focusses on sustainable prevention and wellbeing outcomes for the future. There is a requirement to meet the needs of people in the longer term and, because of rising demographics and increasing complexity, the remodeling and transformation of services continues to be a priority.
- Prevention – the report is about the new approaches adopted by the Directorate in line with the SSWBA, for example, the provision of assistance to enable people to remain independent for as long as possible. This will ensure that need is anticipated and resources can be more effectively directed to better manage demand.
- Integration – the implementation of the SSWBA requires local authorities to work with partners, particularly the NHS and the Police, to ensure care and support for people and support for carers is provided.
- Collaboration –the strategic planning and local delivery of integrated support and services are developed with partners such as Registered Social Landlords in order to provide the best possible intervention to people.
- Involvement – the key stakeholders are the people who use social care. There is considerable engagement including surveys, stakeholder meetings, feedback forms and the complaints process. The provision of accessible information and advice helps to ensure that the voice of adults, children and young people is heard.

8. Financial implications

8.1 There are no financial implications associated with this report.

9. Recommendations

9.1 The Committee is recommended to:-

- Note the contents of this report;
- Note the contents of the final inspection report (attached as **Appendix A**).

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May 2021

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Background documents:
None