



## Inspection Report on

**RSD Social Care Ltd**

**R S D Technology Ltd**  
**Kingsway Fforestfach**  
**Swansea**  
**SA5 4DL**

## **Date Inspection Completed**

10 & 14 November 2022.

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## About RSD Social Care Ltd

Type of care provided	Domiciliary Support Service
Registered Provider	RSD Social Care Ltd
Registered places	0
Language of the service	English
Previous Care Inspectorate Wales inspection	<a href="#">12 March 2021</a>
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

RSD Social Care Ltd is a domiciliary support service providing support to people in their own homes and in the community in the western bay area of Swansea. The service is registered to provide this service to both adults and children. Overall, people are satisfied with the service they receive from RSD social care. People are supported with up-to-date personal plans that reflect their needs well. Care workers are recruited and trained appropriately and feel supported in their roles, however improvements are required to ensure formal supervision and appraisals are completed at required intervals. There is a visible management team in place who are based in the office premises daily. The responsible individual (RI) is aware of their role and responsibilities and visits people to obtain their feedback to drive improvements in the service. Required regulatory reports are completed appropriately and give a good overview of the current status of the service, and improvements identified.

## Well-being

People have a voice and are listened to. Personal plans reflect people's needs well and give a good overview of what is important to the individual. Reviews take place routinely with people, however revisiting the content of personal plans during these reviews would enhance this process. The RI routinely visits people to obtain their feedback about the service to drive improvements and questionnaires are completed to highlight any areas of poor performance. This information drives the improvements in the service highlighted in the quality-of-care reviews.

People are protected from harm and neglect. Care workers are up to date with safeguarding training and are aware of their responsibility to report any concerns appropriately. The service has policies and procedures in place which are reviewed routinely. The service is following the updated guidance for minimising the risk of transmission of Covid-19. People's personal data is stored electronically on password encrypted devices to prevent data loss.

Care workers are recruited and vetted appropriately with pre-employment checks in place. Systems are in place to ensure safe recruitment takes place in the service. Care workers receive the necessary training to carry out their roles, and to register with the workforce regulator. Staff feedback overall was positive with staff feeling valued and supported in their roles. However, spot checks and supervision records seen are not completed quarterly and there were no appraisals in staff files viewed. This is an action for improvement and will be followed up at the next inspection.

There is good oversight of the service. The responsible individual (RI) is visible in the office on a daily basis. There is a consistent manager in post who is supported by a structured office team with their designated roles and responsibilities. Quarterly visits are carried out to obtain feedback from people to drive improvements. Quality of care reports are completed bi-annually as required and give a good picture of the current performance of the service.

## Care and Support

Overall, people are satisfied with the service received by RSD care staff. We visited and spoke with six people receiving the service and most comments were positive. People told us that they usually received care from care workers they know but also understood that there has been a lot of staff leaving and new ones coming on board more recently. People were complimentary of the care workers who visit them, comments include *“they are very good, most of them are brilliant”*, *“I think they’re very good”* and *“we’ve got to know them now, they come at good times for us and they are great for our needs”*. People also told us that usually their call times were okay, but sometimes care workers were running late or early and they are not informed. General feedback indicated that communication from the office in these scenarios could be improved.

People are provided with the quality of care and support they need. However, the personal planning process could be explained better so that people understand the purpose of it and can participate more. We looked at six care files and all have been reviewed within the last three months as required. Most contain a detailed “who am I” section which gives care workers a good background to the person and what matters to them. Although all documentation is stored electronically in the service, hard copies are available in people’s homes. We looked at these and saw that none were signed and, on asking people if they had read them, most said no. On discussing the content of the personal plans people agreed that they did accurately reflect them, and their care and support needs well.

People are supported to maintain their health and well-being. The service has systems in place for the management of medication. Care workers who support people with medication have all completed medication training and competency tests and those who haven’t are not able to assist with medication until this has been achieved. Care workers complete the Medication Administration Records (MAR) charts in place from the local authority which details the level of support required. On completion, these are audited within the service before being sent to the local authority medication management team. When possible, care workers support the same people to build up good relationships. As a result of this, they can recognise any signs of ill health and seek medical support promptly if required.

The service has mechanisms in place to safeguard vulnerable individuals to whom they provide care and support. All care staff have completed up to date safeguarding training and are aware of their responsibilities to report any concerns. Care workers spoken with are aware of the procedures to follow to safeguard people they support. There is a safeguarding policy in place which reflects the Wales safeguarding procedures. People told us they feel comfortable with the care staff supporting them and are confident that any concerns they may have would be addressed appropriately.

## Environment

The environment is not a theme which is applicable to a domiciliary support service. However, we saw that the office is on the first floor of the building with a training room and kitchen and toilet facilities in the downstairs area. Documentation is stored electronically on password encrypted devices and hard copies of paperwork are stored appropriately and sent to the local authority for auditing purposes. We saw that environmental risk assessments take place with people prior to the commencement of care, which ensures a safe working environment for care staff.

The service promotes hygienic practices and manages risk of infection. The manager told us that there is a good stock of personal protective equipment (PPE) available for care workers to use when providing personal care to people. The service is following the up-to-date guidance in relation to minimising the risk of covid-19 transmission.

## Leadership and Management

The provider has arrangements in place for the effective oversight of the service through ongoing quality assurance. We saw records of visits to people undertaken by the RI to obtain their feedback on the service received, and additional completed questionnaires. There was a summary of this feedback and questionnaire responses in the service's quality of care report which was used to identify areas of improvement for the service. We saw that these reports are completed bi-annually as required by the regulations and include successes of the service and things in need of improvement with appropriate timescales to complete these actions. We saw the updated Statement of Purpose (SOP) which accurately reflects the service. There are suitable policies and procedures in place in the service which are reviewed as required.

There are good procedures in place to ensure care workers are suitably vetted and recruited to meet the needs of people they support. Four personnel files were viewed and all required documentation for safe recruitment is in place, this includes identification documents, background checks and up to date Disclosure and Barring Service (DBS) checks. Records and files are stored electronically and can be updated as and when required. Most care workers in the service are registered with Social Care Wales (SCW), the workforce regulator, or are working towards this/ waiting for their registration number. There has been a high turnover of staff over the last year primarily due to the pressures of working in social care. The provider has sought sponsorship for foreign workers to assist with filling these vacancies due to difficulties in recruitment in the sector.

Care workers are well trained, feel content in their work and feel supported, however improvements are needed to ensure routine supervision and appraisals take place in line with the requirements of the regulations. We looked at four staff files and saw significant gaps in quarterly supervision and annual appraisal records. The manager was aware of this and was looking into it as a priority at the time of inspection. While no immediate action is required, this is an area for improvement and will be followed up at the next inspection. The training matrix was seen, and mandatory training is up to date by most staff with exception of some who require medication competency checks. The provider has already addressed this, and a senior staff member has completed train the trainer training to deliver this in-house and this is currently being planned. Feedback from staff overall was positive with care staff appreciating the ability to work "*flexibly*" and "*generally work within the same area*". Some staff mentioned the travelling time given and the lack of payment for this. The manager is aware of this and explained they are always looking at ways to address this and ensure this is done fairly and competitively.



### Summary of Non-Compliance

Status	What each means
<b>New</b>	This non-compliance was identified at this inspection.
<b>Reviewed</b>	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.
<b>Not Achieved</b>	Compliance was tested at this inspection and was not achieved.
<b>Achieved</b>	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
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36	Supervision and appraisal is not being completed at the required timescales to meet the regulations	New
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**Date Published** 20/12/2022