CAERPHILLY COUNTY BOROUGH COUNCIL

DIRECTORATE OF SOCIAL SERVICES - COMMISSIONING TEAM

CONTRACT MONITORING REPORT

Name/Address of Provider: Pobl Care & Support Ltd.

Exchange House, Old Post Office, High Street, Newport,

NP20 1AA.

<u>Date Of Visit:</u> Tuesday 25 February, 2020, 10.00 a.m. – 11.30 a.m.

Visit to Libanus House offices, Blackwood

Visiting Officer(s): Andrea Crahart, Contract Monitoring Officer, CCBC

<u>Present:</u> Louise Cross, Regional Manager

1. Background

- 1.1 'Pobl Care & Support Ltd.' provide supported living services to people in their own homes in either a shared accommodation situation or on an individual basis. Support workers who are employed by Pobl assist people to live as independently as possible in their own homes, where they hold a tenancy agreement with their landlord, and Pobl provide a flexible service to meet people's support needs.
- 1.2 During 2020, 6 safeguarding referrals were submitted by Pobl to the CCBC Safeguarding Team, and 4 were submitted during 2021. These were dealt with in accordance with the safeguarding process.
- 1.3 The latest Care & Inspectorate Wales (CIW) report was viewed via the CIW website as part of the monitoring process. The report was published in July 2021 and included positive remarks made by the inspector about the service, with no Non-Compliance Notices issued during this inspection.
- 1.4 Dependent on the findings within the report the provider will be given corrective and developmental actions to be completed. Corrective actions are those, which must be completed (as governed by legislation etc), and developmental actions are those, which are deemed good practice to be completed.

2. Previous Recommendations

Corrective/Developmental actions

2.1 There were no actions to re-visit from the previous visit(s) made.

3. Responsible Individual

3.1 The Regulation and Inspection of Social Care (Wales) Act 2016 (RISCA) places expectations on the 'Responsible Individual' (RI) of the service to hold accountability

- for service quality, compliance and performance. Part of the duties of the RI are to visit their service(s) on a quarterly basis to have this oversight.
- 3.2 The RI had completed reports based upon the visits made, and these were requested for visits in 2021. It was clear that comprehensive visits had taken place, with many references to conversations having been held with staff and the individuals supported, to understand how well the service is being delivered. Indeed, the RI had captured how during the challenges of the Covid-19 pandemic people had been supported to keep occupied and assisted to keep in touch with family and friends. Staff also praised the support they had received from colleagues and their managers. Another area highlighted was how the pandemic had interfered with training and supervision of staff, but plans had been put in place to re-gain compliance in these areas.
- 3.3. The provider's mandatory Policies and Procedures were provided electronically to view. It was relayed that the Covid-19 pandemic had impacted upon the organisations ability to review these as often as necessarily, however it was noted that the majority did not require reviewing until 2023/2024 and it was communicated that some which are overdue are currently being reviewed, with a view to signing off early this year.

4. **Manager's questions**

- 4.1 The Regional Manager was asked a number of questions during the monitoring visit in 2020, one of which related to the administration of medication. It was confirmed during the conversation that no one being supported within the properties were having their medication administered covertly.
- 4.2 Staff continue to receive training via E-learning as well as classroom based learning, and a training room in the Head Office (Exchange House) is made available for this purpose.

5. Complaints and compliments

- 5.1 Pobl's Quality Assurance Team collect information relating to complaints and compliments on an ongoing basis for each property. This information is communicated to the Quality Assurance Team via the Team Managers who are responsible for each property. In addition, other important information is communicated e.g., any medication issues that have occurred, safeguarding referrals submitted etc., and themes that arise are monitored by the Quality Assurance team.
- 5.2 People supported are enabled to make a complaint via the 'Easy Read' version of Pobl's Complaints Policy, and the Monitoring Officer is aware that the outcome of complaints can be communicated face to face if felt necessary.
- 5.3 Where a complaint is informal, feedback to the complainant is communicated via the Team Manager, however, where this is formal these are communicated via the Quality Assurance Team.
- 5.4 Pobl seek to learn from feedback received via the complaints process, and some practices that have previously been changed as a result have included a system for reminding staff of processes (these are undertaken via team meetings, supervisions,

communication book), in addition to requests to re-read relevant policies.

5.5 Any complaints and compliments were requested to form part of the monitoring process, for the previous 6 month period. The Contract Monitoring Officer was informed that no complaints had been received for the period specified, though a log of compliments had been received. One such compliment from a family member of a person supported included the following..... 'My brother resides in this house, and I cannot overstate how supportive the manager has been to me. I am hoping that maybe Pobl has some sort of recognition policy, and I would love to nominate the manager. J adores all the staff at his house, and it is so well managed. The manager is truly an asset to your company'.

6. Staffing information

6.1 Pobl have been successful in supporting their staff to register as carers with Social Care Wales, which is now a requirement of all carers/support staff.

7. Staff files

7.1 <u>Supervision</u>

- 7.1.1 It was evident from 2 staff files viewed that support workers had a 1:1 Supervision Agreement in place that they had signed up to, outlining the agreement between the 2 parties in terms of how often sessions would take place etc.
- 7.1.2 Supervision sessions are organised every quarter on a 1:1 basis with the staff members supervisor, and it was evident from the staff files that formal sessions were taking place frequently in 2019. The records were comprehensively documented, with many areas being discussed on a regular basis e.g., performance, updates relating to the people supported, health and safety, learning and development, quality/achievements, and a personal discussion.
- 7.1.3 Further evidence of supervisions taking place were provided in January 2022 (when requested) which showed that staff had received a recent supervision and that further sessions were planned for in 2 to 3 months' time, in line with RISCA regulations.
- 7.1.4 It was evident that staff had completed a documented named 'My Plan for 2019/20' which is an appraisal to record what achievements have been made within the current year, areas to develop, and individual/service area goals to be set. Both files viewed had a plan in place.

7.2 **Staffing issues**

7.2.1 Two staff files were viewed at the start of the monitoring period, where it was noted that their previous employment histories had been captured, with no gaps identified, and proof of ID was present. However, due to the increasing rates of the Covid-19 coronavirus it had become difficult to visit Pobl's head office to view electronic files which would have provided further information (references, application forms,

- interview records etc.). Therefore, arrangements would be made for the Contract Monitoring Officer to visit when it was safe in the future, and if deemed necessarily.
- 7.2.2 At the start of the monitoring episode (February 2020) 32 staff had left their roles as support workers in the last year. The reasons given at the time included e.g. moving to a new job, ill health, family responsibilities, retirement, unsatisfactory probation period, and 15 staff members had been recruited from February 2019 to February 2020 (approx.).

7.3 Induction and training

- 7.3.1 Pobl continue to use the Social Care Wales Induction framework, where all newly appointed staff would need to be familiar with this.
- 7.3.2 Pobl use a training matrix to record when staff training has been undertaken and to plan for when training is due again. It was evident from the matrix received early in 2022 that mandatory training has been undertaken e.g. Manual Handling, Food Hygiene, Safeguarding, Infection Control, First Aid, Medication Awareness. It was also evident that some non-mandatory training such as Health and Safety, Professional Boundaries, Deprivation of Liberty Safeguards, and the Mental Capacity Act had been undertaken by staff also.
- 7.3.3 People supported have also previously been involved in the selection process for appointing new staff, however this is limited and mainly involves introductory visits, and the gradual induction of new staff members into the home.

8.0 <u>Corrective / Developmental Actions</u>

8.1 There were no actions to address on this occasion.

9. Conclusion

- 9.1 Unfortunately, it has not been possible to undertake full monitoring visits due to the onset of the Covid-19 pandemic in March 2020, therefore much of the information contained in this report was compiled from electronic records provided as an alternative to visiting various bases.
- 9.2 Pobl Care & Support have operated, and continue to operate through a very challenging time, and have sought / followed WG and LA guidance where it was required, and supported the individuals and staff members throughout this difficult time.
- 9.3 The Contract Monitoring Officer would like to thank the Regional Manager and Senior Quality Assurance Business Partner for their time in assisting with this monitoring period.

Author: Andrea Crahart

Designation: Contract Monitoring Officer

Date: January 2022

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