Inspection Report on

13 Caerau Park Road

13 CAERAU PARK ROAD
CARDIFF
CF5 5JG

Date of Publication

Wednesday, 12 December 2018
Description of the service
This service is located on the outskirts of Cardiff. The registered person is Margaret Twine. The service is registered to provide support for a maximum of three people with mental health needs.

Summary of our findings

1. Overall assessment

The service provides a stable home with good relationships with the manager and their family. People are treated with respect and kindness. People at the home are independent and enjoys community based activities and opportunities are encouraged. People are happy living at the home and with the care they receive. The environment is homely, secure and clean. However, improvements are required to ensure that the service meets its legal requirements with the regulations.

2. Improvements

This was the services first inspection under the Regulation and Inspection of Social Care (Wales) Act 2016.

3. Requirements and recommendations

Section five of this reports sets out where the service is not meeting legal requirements, and recommendations for improvement.
1. Well-being

Summary

People are happy and value the care they receive at the home. The home provides continuity of care, and people are made to feel part of the family. People’s independence is encouraged and supported. Access to the community is encouraged to provide suitable activities for the individual, which they enjoy.

Our findings

People have good relationships with those at the home. It was clear from our conversations with the manager that they had the person’s best interests at the forefront of their care and support. We observed that they communicated well and one individual told us that they liked living at the home. Those living at the home also commented: “I love living here.” We observed one individual being offered a choice of food for evening meal. They further commented: “I like living here, I love the food and I don’t have any issues with the care provided”. The manager told us that they sat down together for meals, as this provides a more homely environment. People’s routines were respected, and the manager was knowledgeable about the people’s lifestyle choices and preferences. This demonstrates that people feel they belong and have safe, positive relationships.

People are encouraged to be involved in community activities and have opportunities to socialise with people. We spoke with the manager and one person living at the home, and were told that people had daily opportunities to participate in a wide range of community based activities such as day centres, and spending time away from the home with friends. We conclude that people are supported to engage in a range of activities which promotes wellbeing.

People are encouraged to be involved in community activities and have opportunities to socialise with people. Another registered care provider, provides respite care when the registered persons go away. One person at the home commented that they enjoyed going there as they saw their friends. People are able to access the local community and participate in activities which they enjoy, such as working on an allotment and enjoying local walks. One person enjoyed a range of activities provided at the day service, and also participated in a gardening group. Therefore, it is evident that people do things which they enjoy.
2. Care and Development

Summary

Local authority care plans are reviewed regularly, and professionals involved were knowledgeable of current care needs. Although the home consult with those living at the home, the home does not regularly review and update its own care planning documents. Important information relating to people’s risk assessments and behaviour management plans are not assessed or documented.

Our findings

People can be assured that they will receive continuity of care from the manager of the home (who is the sole care worker). We spoke with the manager who informed us that only herself as manager had been employed at the service. Therefore we conclude that people receive continuity of care.

People are encouraged to live as independently as possible. We spoke with the manager who informed us that people living at the home are responsible for their own medication, attending appointments and are free to make choices about their day to day lives. On person at the home commented: “I go out for walks when I want too. I like to get out and about.” They also told us how they liked to spend time in the home too, and liked the home’s two small dogs. We observed that those living at the home had the freedom to go where they wished. This demonstrates that people’s independence is maximized and the home are supporting them to be as independent as possible.

People cannot be assured that the home has appropriate and up-to-date care documentation in place. We examined the care plan for one person living at the home, whilst we saw a local authority care plan that had been recently reviewed; the homes own care plan had not been reviewed since January 2018. The care plan lacked information on likes/dislikes and was not person centred. It is a legal requirement that care plans should be reviewed at least every three months. We requested a copy of the persons risk assessment and behaviour management plan. These are documents that better enable care workers to safely support the people in their care. We were told by the manager, that these are not in place. Although we could see that there had been regular visits from the social worker, there was no documentation to reflect the updates in care. Therefore we conclude that the service in not meeting legal requirements in this regard.

People can be assured that their views are taken into account in the care planning process, however this is not always documented. We examined one care file and noted that this person or their representative had not been consulted in relation to the care they would receive. We discussed this with the manager, who informed us that they had regular meetings with the individual to discuss their care. It’s important that the person receiving care is involved in decisions that affect their day-to-day lives. One person told us that the
manager spoke with them regarding their care and updated them, however, this was not documented. We conclude improvement is required in this regard.
3. Environment

Summary

People live in a well decorated home, where they are able to spend time in their bedrooms, within communal areas and the garden.

Our findings

People have the benefit of living in a homely, clean and well decorated home. During our visit, we had a tour of the home which was found to be clean, spacious, decoratively well maintained with a pleasant garden area at the rear. We saw that the home is secure by means of lockable doors to the front and rear. Those living at the home had full access around the home and clearly felt comfortable. There were two small dogs at the house and the individual clearly enjoyed having them around. They told us “I love the dogs, they’re lovely.” There were no malodours from the dogs and the manager maintained a hygienic and clean environment. Therefore we conclude that people live in an environment that is welcoming, clean and well presented.

People are free to spend their time where they wish within the home. They have the benefit of several communal areas, in addition to private bedrooms. We saw that the home had a communal dining room, with ample space. We also saw that the home had a welcoming lounge and conservatory that people living at the home could freely use. People’s right to privacy was respected by means of private bedrooms. However the bedroom we saw did not have a lock on the door. From speaking with the individual, they did not want a lock on their bedroom and felt secure without one in place. Therefore, people live in a home which allows them to spend their time as they wish.

People can be assured that they living in an environment which is secure. Although people can come and go from the home as they please, they do not have a key to the home. However, this was due to issues of safeguarding the key. We spoke with one person told us that they did not need one, “I can go out and come back when I want, so there was no need for one.” The property was secure with doors locked when we attended and we were asked for our identification upon arrival. We also signed the visitors book which was in place. Therefore, we conclude that the home provides a secure environment for those who live there.
4. Leadership and Management

Summary

The home has an accident book in place to record all accident/incidents at the home and are able to deal with complaints appropriately. However further work is required to ensure that the home meets its legal requirements in relation to policies, quality assurance, statement of purpose and health and safety.

Our findings

Complaints will be dealt with in an appropriate manner. We were told by the manager that there had been no complaints about the service. The complaints procedure had been reviewed in July 2018, however required some information to be updated. For example the name of CIW. There was a range of professionals involved in the person’s life who were knowledgeable about the person’s needs and would take action if anything needed addressing. One person told us that they were happy living in the service, and had no complaints, but could go to the manager at all times. Therefore, this demonstrates that people are able to express their concerns.

People cannot be assured that they will be supported by care workers who have received up-to-date training. We examined the training certificates for the manager who is also the sole care worker, and saw that training in First Aid, Safeguarding, Medication, Manual Handling, Mental Health and how to carry out assessments, had either lapsed, or had not been undertaken. It is essential that care workers are appropriately trained in order to be able to safely deliver care. Although, we have been informed that the relevant training will be booked for the New Year, at the time of inspection, it had not been completed. We conclude that the service in not meeting legal requirements in this regard.

Some policies are in place to ensure that there are safe systems of working, however, this needs further attention. We saw evidence of the homes complaints and privacy policy, which were both dated July 2018. We requested copies of the homes medication, safeguarding, food hygiene, training, health and safety, admissions and incident policies. We were told by the manager that they do not have these in place. We examined the complaints policy and found that it contained information that was out of date. We examined the homes Statement of Purpose which we found to contain information that was factually incorrect in relation to what the home carries out in relation to:

- The completion of people’s risk assessments and risk management plans;
- Recording information of people’s likes/dislikes
- The frequency of care reviews
The statement of purpose also stated a number of training courses that the manager had completed. However, this training was found to be out of date, and therefore references to this should be removed until such time the manager had completed mandatory training. We therefore conclude that the service is not meeting legal requirements.

People cannot be assured that satisfactory health and safety checks are carried out by the home. We requested records relating to fire evacuation drills and was told by the manager that these were not carried out. However, we saw evidence of a recent visit by the fire authority, who had made some recommendations, which were currently being risk assessed and implemented by the manager. We note that although this was actioned, we noted that no risk assessments were in place for the property, which needs to be addressed. We viewed the homes accident and incident book, however, this contained no entries, this was because there had been no reportable accidents/incidents at the home. We therefore conclude that there is further work required to ensure that home is meeting its legal requirements.
5. Improvements required and recommended following this inspection

5.1 Areas of non compliance from previous inspections

This is the first inspection under the Regulation and Inspection of Social Care (Wales) Act 2016 and therefore there was no outstanding non-compliance.

5.2 Areas of non-compliance identified at this inspection

We advised the registered person that improvements are required to ensure:

- That care plans are reviewed at least every three months, are person centred and fully comprehensive to include risk assessments – Regulation 16 (1)
- That the person working at the home has received training appropriate to the work they are to perform - Regulation 34 (1)
- That the registered person ensures that any risks to the health and safety of individuals are identified and reduced as far as reasonably practical – Regulation 57
- That the homes statement of purpose accurately reflects the service provided – Regulation 7
- That the registered person ensures that policies and procedures are in place for the prevention of abuse, neglect or improper treatment – Regulation 27 (1)

Non compliance notices were not issued in respect of the above, as we judge that there has been no direct impact on residents; and we were provided assurances by the service that these will be addressed. These will be followed up at the next inspection.

5.3 Recommendations for Improvement

- Ensure that conversations with people regarding their care are documented within their care files.
- To ensure that care files are organised to show when care plan reviews have taken place.
6. How we undertook this inspection

This was a full inspection undertaken as part of our inspection programme. We made an unannounced visit to the home on 24 October 2018 and again on the 19 November 2018.

The following methods were used:

- We spoke with people living at the home on the telephone and face to face at inspection;
- We spoke with the manager and owner of the home;
- We looked at the following documentation:
  - One person’s care plan;
  - Case record book – including daily notes;
  - Local authority care plans and risk assessments for one person;
  - The statement of purpose;
  - The service user guide;
  - Visitors book;
  - Accident book;
  - Policies made available;
  - Fire report dated November 2018.
- We spoke with the manager of the respite service;
- Observation of the home environment.

Further information about what we do can be found on our website: www.careinspectorate.wales
### About the service

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<tr>
<th>Type of care provided</th>
<th>Care Home Service</th>
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<tr>
<td>Registered Manager(s)</td>
<td>Margaret Twine</td>
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<tr>
<td>Registered maximum number of places</td>
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<td>Date of previous Care Inspectorate Wales inspection</td>
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<td>Dates of this Inspection visit(s)</td>
<td>24/10/2018 and 19/11/2018</td>
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<td>Operating Language of the service</td>
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<tr>
<td>Does this service provide the Welsh Language active offer?</td>
<td>No, they do not currently provide the active offer.</td>
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**Additional Information:**