



Arolygiaeth Gofal a Gwasanaethau Cymdeithasol Cymru
Care and Social Services Inspectorate Wales

Inspection Report on

Graig Road

Hengoed

Date of Publication

Thursday, 7 September 2017

Welsh Government © Crown copyright 2017.

You may use and re-use the information featured in this publication (not including logos) free of charge in any format or medium, under the terms of the Open Government License. You can view the Open Government License, on the National Archives website or you can write to the Information Policy Team, The National Archives, Kew, London TW9 4DU, or email: psi@nationalarchives.gsi.gov.uk
You must reproduce our material accurately and not use it in a misleading context.

Description of the service

The care home is situated in Ystrad Mynach. It is registered with Care and Social Services Inspectorate for Wales (CSSIW) to provide accommodation and personal care for up to four younger adults with learning disabilities. At the time of our inspection we were told that there were three people living at the home.

The home is operated by Caerphilly Borough Council. There is a nominated person (responsible individual) to oversee the management of the home on behalf of the provider. The registered manager is Claire Mullenger. The registered manager was present throughout our inspection visit.

Summary of our findings

1. Overall assessment

People living at the care home appear to be settled at the home. People make decisions about aspects of their lives and are encouraged and supported to make choices about how they spend their time. Care workers at the home are competent, caring and familiar to people living at the home. The home is well looked after, welcoming, clean and meets the needs of the people living there. The home is managed well and provides a good quality of care.

2. Improvements

There were no areas of non-compliance or improvement recommendations identified at the last inspection.

3. Requirements and recommendations

There were no non compliance notices issued following this inspection.

1. Well-being

Summary

We found that people are content living at the care home, and are treated with respect. People relate well and have good relationships with the staff that care for them. People are able to make decisions about their everyday life and are encouraged and enabled to make choices about how they spend their time.

Our findings

We found that people living at the care home relate well and have good relationships with the staff that care for them. We observed care workers assisting and supporting people with their care needs. We saw staff and people living at the home undertaking daily household routines together, and generally chatting. We observed that interactions between care workers, the manager and people living at the home were relaxed and positive and people were consistently treated with dignity and respect. The home has a calm, welcoming and relaxed atmosphere and genuine sense of community. One person was keen to show us around the newly refurbished kitchen and wet room and demonstrated a sense of attachment to, and pride in their home. We saw that people living at the home felt at ease with staff. Some people had limited verbal ability to express themselves however we observed that staff were skilled at communicating with people using various skills and tools to meet their individual communication needs such as British Sign Language (BSL) and Makaton. People living at the home appeared happy, and settled.

People living at the care home are enabled to do things for themselves, and have their individual identities recognised and valued. We observed that people were supervised and supported by staff according to their individual needs, and that staff were aware of and encouraged individuals in pursuit of their individual interests. On the day of our visit people living at the home were supported by staff to engage in a range of activities both in the home and within the community. One person was at a day service on the day of our visit which they regularly attended. One person told us about a recent holiday they had taken with care workers and another person living at the home. They also told us about their interests including watching soap operas on the television. Individuals were involved in planning their activities, and we saw that the activities individuals had participated in were recorded in word and pictorial format in their daily diaries. Care workers we spoke with told us about individual's interests and the activities they enjoyed, and we saw that this was reflected in the care records we examined. We observed through their interaction with people that care workers were aware of individual people's interests and that they supported people to be positively occupied either actively or passively throughout our visit. We concluded that people are provided with sufficient opportunities to feel involved in life at the home and to participate in social/recreational activities in order to enhance their overall well-being.

People are able to exercise some choice and control over their every-day lives. We observed people moved freely throughout the home, and were able to choose where they wanted to spend their time. We saw that people were involved in making decisions, and care workers asked people how they wished to spend their time. Staff we spoke told us about the ways they ensured people had a sense of control over their day to day lives by facilitating informed and appropriate decision making. Therefore, people's views and opinions are acknowledged promoting a sense of belonging and value.

2. Care and Support

Summary

People benefit from care that is planned and delivered in a person centred manner by caring and familiar care workers. People's needs are anticipated and they get help when they need it. People are safe and protected from harm.

Our findings

People are as well as they can be, because their individual needs and preferences are understood and their care needs are anticipated. We examined two people's care files and found updated and reviewed documentation on each file. We saw that care files detailed essential information in relation to people's individual preferences, personal care needs, medical conditions and medication requirements. A written plan of care provided guidance on relationships, personal likes and dislikes, social interests, daily routines, as well as all the aspects of life the person needed support with. Care plans detailed the support staff should provide in order to meet people's physical and emotional health needs. For example individual records included detailed information to assist staff to recognise and interpret a person's changing behaviour and detailed the way in which care workers had communicated difficult information to the individual so that the information was understood and retained. Another record contained information regarding the care and support to be provided for a person who was at risk of choking. Staff we spoke to were aware of people's individual care needs, this was consistent with care delivery we observed, and with the information in peoples' care files. This told us that care workers had a good understanding of individual people's needs. Therefore people receive person centred care focused on individual needs.

People are supported to maintain their health and well-being. We saw from individual care records that people were referred to health professionals for specialist assessment and treatment when required such as optician, dentist, audiology, speech and language therapy, hospital visits and medical reviews. We found that documentation was updated and reviewed regularly in the care files we examined. We therefore concluded that people receive the right care at the right time.

People are treated with warmth and compassion in their day to day lives. We observed positive interactions between staff and people living at the home. Throughout our visit we observed staff consistently responded to peoples care needs in a kind and caring manner. We observed that interactions between care workers and people were friendly and relaxed. We observed care workers interacting and communicating with peoples in a manner appropriate to people's individual needs. We concluded that people have good relationships with care workers who are caring and familiar to them.

We found that peoples' medication is managed safely. We reviewed peoples' medication administration records (MARs) and saw that they had been completed correctly, and show that staff follow safe medication administration practice. We saw that medications are stored securely. We concluded that overall people are safeguarded by the home's medication procedures.

People are offered healthy nutritious meals. People living at the home were involved in menu planning during the home's weekly meeting. However, we were told that if people decided that they did not want to eat the meal planned they could choose an alternative

meal. Care workers shop for food supplies accompanied by people living at the home if they wish. Care workers prepared the meals and had undertaken the necessary food handling training. The home had been inspected by the Food Standards Agency in March 2016 and had been awarded a food hygiene rating of 5 which is 'very good'. We concluded overall that mealtimes are a positive experience, and that peoples' nutritional needs are being met.

3. Environment

Summary

People live in a home which meets their needs and supports them to maximize their independence. The home is light, tidy, welcoming and warm. The décor is homely and the home is generally well maintained. People are safeguarded by the health and safety checks and measures at the home.

Our findings

People are supported within a safe, clean and secure environment, the layout of which enables them to easily spend time privately or communally. We saw that the home had lounge, a separate kitchen, and a dining room. The décor in the communal areas was homely and welcoming, and the home appeared generally well maintained. The rear of the home had been recently refurbished which included the kitchen and the creation of a wet room which had already been of significant benefit to one particular person living at the home. There was an outside area which comprised a paved area which had been recently painted. We were told that the top garden area was not used as the steps were unsafe for people living at the home. The access to the front of the home was via a steep driveway which we were told that all people living at the home were able to manage safely. People living at the home have their own bedrooms, which were decorated in themes they had chosen. We saw there were sufficient washing and toileting facilities for the people that live and work at the home. General housekeeping, cleaning and cooking was undertaken by the home's care workers. We found the home to be clean and tidy. We observed, during the inspection, that people were using the environment safely and freely, spending time both in private and communally as they wished. People using the service therefore have access to a clean, tidy and safe indoor and outdoor living environment which is nicely decorated.

People are protected and their safety is maintained. We found the entrance to the home was secure and visitor identity was checked before entering the property along with signing of the visitor book. We saw medications were stored securely in a locked cabinet. Therefore, people are protected from exposure from hazardous substances. We saw that all health and safety checks and measures in relation to fire certificates, hoists, and portable appliance testing (PAT) were satisfactory and up to date. All confidential files including care and staff files were stored securely. People's right to privacy is therefore respected within a secure environment.

4. Leadership and Management

Summary

The home benefits from a consistent, efficient and effective management team. Care is provided by sufficient numbers of skilled and competent staff who are supported by effective leadership from the management team. The registered manager and staff are people focused and are committed to ensuring that people receive the care and support they need from staff at the home. The home has effective systems in place to promote safe practice.

Our findings

People living and working at the home benefit from the stability provided by an experienced and well-established registered manager with a visible presence. We observed that interactions between the manager and people living at the home and staff were relaxed and friendly but respectful. We saw that people living at the home and care workers appeared able to approach the manager with ease. Care workers spoke positively of the support and training provided at the home. We concluded that the management is visible and approachable.

People are supported by a stable and dedicated team of staff sufficient in numbers. We examined a sample of three weekly staffing rotas and found that staffing numbers were consistent with the needs of people living at the home. Staff we spoke to told us that they thought that it was a beautiful home and that it was a privilege to work there. We observed that care workers appeared to have sufficient time to spend with people to enable them to engage in activities.

People consistently receive care and support from staff who are appropriately appointed, trained, and supported. We examined two staff employment files which contained the required information to confirm their suitability and fitness. Staff we spoke to told us that they had sufficient training to undertake their role competently. One member of staff we spoke with talked about the induction programme they were undertaking which included a period of 'shadowing' in preparation for the role. Staff we spoke with felt supported by the registered manager. We saw that staff had regular group or individual supervisions with the registered manager, and an annual appraisal which reviewed their work over the previous year. We saw that the home had regular staff meetings where information is shared. Overall we concluded that there is a robust process in place which ensures staff are recruited, and sufficiently vetted, and trained and supported in a way that improves outcomes for people.

People can be sure that there are robust, transparent systems in place to assess the quality of the service they receive. We saw minutes of meetings which involved people living at the home. We saw that people's views were taken into account and general discussions were undertaken about matters such as activities. We saw that the home had undertaken a review of the quality of care provided at the home, and that a report had been prepared concerning that review. We saw that the home had received generally positive feedback through the completed questionnaires from people living at the home and staff. We saw that policies were available to support practice at the home. We saw that three monthly quality monitoring visits were undertaken by the responsible individual, and we saw that a report followed each visit. The reports demonstrated that the opinion of people living and working at the home was sought with regard to the standard of care provided at the home in accordance with regulatory requirements. People are provided with opportunities to be consulted

about the service, and are actively involved in developing the service in order for them to feel valued and listened to.

There were no people currently living at the home who spoke Welsh. The registered manager told us that the registered provider had in place measures to anticipate, identify and meet the Welsh language and cultural needs of people who may use the service. This means that people who need it could receive a service in Welsh (“Active Offer”).

The home’s statement of purpose meets regulatory requirements. This is an important document which should be kept under review. The home’s statement of purpose should provide people with information about the service, including the facilities available at the home. We saw the home’s statement of purpose had been reviewed in January 2017, and that it contained all the required information. We saw that the values and principles of care provided were clearly documented, and had been provided to individuals living at the home. We concluded that people are generally informed of their rights and services available to them.

5. Improvements required and recommended following this inspection

5.1 Areas of non compliance from previous inspections

There were no areas of non compliance identified at the last inspection.

5.2 Areas of non compliance identified at this inspection

There were no areas of non compliance identified at this inspection.

5.3 Recommendations for improvement

There were no recommendations for improvement identified at this inspection.

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 21 July 2017 between 10:45 and 14:30.

We used the following sources of information to formulate our report:

- Discussion with one person living at the home.
- Discussion with the registered manager and two members of staff.
- Observation of interactions between people living at the home and staff.
- Examination the care documentation relating to two people living at the home.
- Examination of the personnel files of two members of staff.
- Visual inspection of the building's interior.
- Consideration of the home's quality assurance systems
- Review of the home's previous inspection report.

Further information about what we do can be found on our website www.cssiw.org.uk

About the service

| | |
|---|--|
| Type of care provided | Adult Care Home – Younger |
| Registered Person | Caerphilly County Borough Council |
| Registered Manager(s) | Claire Mullenger |
| Registered maximum number of places | 4 |
| Date of previous CSSIW inspection | 31 March 2016 |
| Dates of this Inspection visit(s) | 21/07/2017 |
| Operating Language of the service | English |
| Does this service provide the Welsh Language active offer? | This is a service that provides an 'Active Offer' of the Welsh language. It provides a service that anticipates, identifies and meets the Welsh language and cultural needs of people who use, or may use the service. |
| Additional Information: | |