



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

# Inspection Report on

**106 Splott Road**

## **Date of Publication**

**Tuesday, 12 September 2017**

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## **Description of the service**

This residential home is located in the centre of Splott, Cardiff. The service is registered to provide accommodation and personal support for a maximum of five people with learning disabilities, who may also have physical disabilities or mental health needs. The registered provider is Heatherleigh Care Limited, a family owned business based in Tredegar. Heatherleigh also owns other social care services. The organisation has nominated a responsible individual to oversee the operation of the service. The registered manager is Simon Jones. This is a service that does not provide an 'Active Offer' of the Welsh language.

## **Summary of our findings**

### **1. Overall assessment**

People are safeguarded and their rights are promoted. Safe recruitment procedures are in place to help ensure people are protected. Individuals are encouraged to be independent and they enjoy suitable activities. The home provides healthy food and people are encouraged to be active. Staff are skilled in a range of communication methods and they treat people with respect and kindness. Care records are reviewed and updated as necessary to ensure people's changing needs are met. The house is clean, well maintained and suits people's needs. A new management and staff team are making beneficial improvements and the manager monitors the quality of the service. Staff are supported and like working at the home.

### **2. Improvements**

There was evidence that the following matters had improved since the previous inspection:

- action had been taken to ensure a safe exit route in the event of fire;
- a new manager and staff team were making positive improvements to the service;
- the manager had registered with CSSIW;
- the responsible individual had carried out quarterly visits and produced appropriate reports;
- individuals had been supported to make very positive changes to their health and wellbeing
- the manager had set up a quality assurance monitoring system and introduced new processes and documentation to provide improved care for people.

### **3. Requirements and recommendations**

Section five of this report sets out our recommendations to improve the service and the areas where the care home is not meeting legal requirements. These include the following:

Requirements:

- The statement of purpose, service user guide and complaints procedures require improvements to be in line with regulations. This had been highlighted in the two previous inspection reports.
- Regular fire drill practices should be established immediately.

Recommendations:

- Deprivation of Liberty Safeguard (DoLS) applications should be renewed annually;
- the manager should refresh himself regarding DoLS processes/system;
- updated personal emergency evacuation plans should be provided for individuals;

- the annual quality assurance report should include an action plan;
- a risk assessment should be done to ascertain if staff require behaviour management training;
- safeguarding policies should be revised to include details of external bodies;
- prompt action should be taken to carry out the wishes of the individual who wants to hold a front door key and
- personal development plans for staff and manager should be completed.

## 1. Well-being

### Summary

People are safeguarded and their rights are promoted. However, the safeguarding policy requires some updating. Safe recruitment procedures ensure that staff are suitable to work with vulnerable people. People's right to freedom is protected, though some legal paperwork needs renewing. Staff encourage people to be independent and make decisions. Suitable activities are provided both inside and outside the house.

### Our findings

People's rights are upheld and they are protected from abuse and neglect. Staff were familiar with the home's safeguarding policy and knew what this meant for them and the people they supported. Care workers were confident about reporting any concerns: one care worker said, *"I would never hesitate."* When another care worker was asked if they had any concerns to report to us they said, *"No! And I wouldn't have waited this long to do it!"* However, although staff knew which external bodies to contact regarding concerns, these details were not in the home's safeguarding policy. We have made a recommendation regarding this. Risk assessments were in place for a variety of situations, to ensure that people could do what was important to them whilst controlling and managing any risk. Pre-employment checks were carried out to verify that staff were suitable to work with vulnerable people. Evidence seen during the inspection demonstrated that the service took appropriate steps to ensure the personal freedoms of people living at the home were protected. However, this legal safeguard should be renewed annually and some people's applications had not been renewed for two years. We discussed this with the manager and have made a recommendation regarding this. Overall, we found that people are safe and protected from abuse, harm and neglect but also have freedom to take risks.

People are encouraged to be independent as possible. We observed individuals carrying out household chores. We were told that when one person first came to the home they were not used to doing housework or taking care of themselves, but staff encouraged them to be independent. This person's care plan showed that developing independence was one of their goals. People also did their own shopping, supported by staff and one person went to a local shop successfully on their own. One of the people living at the home told us that they make their own decisions about their daily lifestyle. This evidence shows that people's potential and independence is maximised.

The service provides people with opportunities to take part in activities at the home and off the premises. People also had things to look forward to - for instance, they told us how much they had enjoyed a caravan holiday with staff and were hoping to go again. One individual showed us that they went shopping to collect things that were important to them and displayed them in their bedroom. Staff also encouraged people to be as active as

possible and we found individuals visited the gym, went for walks and loved attending a local dance centre. This demonstrates that people can do things that matter to them.

## **2. Care and Support**

### **Summary**

People benefit from healthy food and physical activities. Staff are skilled at communicating in different ways. Care records are regularly reviewed so staff have up to date knowledge about people. Support is delivered in a person centred way as people are involved in making decisions about their care. People's changing needs are anticipated and met. Staff support people to manage their feelings and treat them with warmth and kindness.

### **Our findings**

Staff encourage people to be active and eat healthily. People told us that they were offered healthy meals and that the food was, 'good.' We found that people went food shopping with staff to choose what they liked to eat. Records and photographs showed that one person reduced their weight significantly by being encouraged to eat healthily and do physical activities, such as walking and bike riding. People's weight was monitored where necessary and a review of one person's health reported that, "*X's well-being continues to improve.*" We concluded that people are supported to be as healthy as they can be.

Staff are skilled and competent and understand people's needs. For example, they know how to communicate in a variety of ways. One care worker had been trained in specialist communication methods, including sign language. We saw that individuals were successful in making their views and choices known to staff. Staff liaised with health care professionals to ensure people's needs were met. One person demonstrated how their mobility had improved as a result of their key worker arranging a physiotherapist assessment and exercise programme. The key worker also arranged for their mobility equipment to be replaced to better suit their needs as an adult. Care documentation we examined provided staff with the details they needed to support people in the right way. Risk assessments and care plans were regularly reviewed to meet people's changing needs. The service also planned in advance to make sure people were appropriately supported. Before one person arrived at the home staff had specific training to be able to support them effectively. This shows that people's individual needs and preferences are understood and anticipated.

Staff support people to manage difficult emotions. From discussions we found that care workers had a good value base and accepted people as they were. However, a member of staff told us that they had not received training in managing behaviour that challenges the service. The manager said this was because the home does not provide a service for individuals who are not compatible with others living at the home. We were provided with an example of this practice. We have made a recommendation regarding this. As part of the home's person centred approach we found that positive behaviour was encouraged and people were supported to deal with their feelings. An individual living at the home told us about their experience of this. They said that staff had talked them through a stressful situation and this made the person realise their behaviour had been inappropriate and had impacted negatively on others. They added that since that time there had been no further incidents and we found this was the case. This demonstrates people are treated with dignity and respect.

People are treated with warmth and compassion and are respected by staff. We observed staff and people living at the home got on well together. Staff provided people with warm, tactile care with smiles, humour, teasing and laughter on both sides. Individuals told us that they liked the staff and one person told us, *"It's a really nice house to live in, boys are nice, staff are really nice."* We saw how one person smiled when their key worker mentioned the names of some of the staff working at the home. The key worker said, *"X's face lights up when he hears them at the front door!"* We observed that individuals were relaxed and staff were calm, patient and responsive to people's requests and needs. This shows that people have good relationships with staff.

Staff support people to have control over their lives. We observed that people were offered a range of choices, and documents we examined detailed people's preferences which were in line with our observations. We saw several examples of key paperwork, such as risk assessments, which people had signed to show their agreement with, and involvement in, decisions about their care and support. This demonstrated good practice in promoting person centred care. The outcome is that people benefit from a service where people are involved in making decisions that affect their life.

### **3. Environment**

#### **Summary**

The home is clean, attractive and well-maintained. There is a security system and where appropriate, people living at the home are asked if they want to hold a front door key. The layout of the home helps people to be independent and mobile. However, although there is a fire safety system, people have not had the opportunity to take part in fire drill practices.

#### **Our findings**

People are cared for in an environment that is comfortable, homely, clean and secure. The house is spacious, with a choice of three lounges. It was modern and tastefully furnished and decorated to a high standard. People living at the home had been involved in making decoration choices. Opaque material had been applied to the lower half of one person's bedroom windows to protect them from public view to promote their dignity. The house displayed a good standard of hygiene. There were no malodours and the atmosphere was fresh and airy. Infection control practices were in place. Staff were trained in food hygiene and the manager monitored food safety practices.

The premises are safe from unauthorised access. People are kept safe as the front door is locked and visitors asked for identification before they are admitted. We experienced this for ourselves. One person living at the home told us they felt safe because, *"Staff go to door and ask for ID, if they don't have ID they don't come in, basically!"* The previous inspection report had highlighted that people should be offered a front door key. One person told us that they would like a key and that this had been agreed several months previously, but they had not yet been given one. During our visit they asked the new manager for a key and the manager confirmed to us that there was no valid reason why this person should not hold a key. We have made a recommendation regarding this matter.

People can do things for themselves because the layout helps them to maintain their mobility and independence. For example, people using wheelchairs have space to manoeuvre. People were free to choose whether to spend time in the privacy of their own

bedroom or to socialise. There is technology in the house that allows people to enjoy things that are important to them, such as watching TV and DVDs, or using electronic tablets.

During our inspection we saw that an electrician was carrying out portable appliance tests, to ensure electrical appliances were safe for people to use. Records showed that staff were provided with fire training. Fire safety had been improved since the previous inspection. The back gate is no longer kept locked which provided people with a safe fire escape route from the rear of the house. People's files we examined contained individual personal emergency evacuation plans that were developed in 2014. However, we were told that they had not been reviewed since then. Nor had such a plan been written for the latest individual to move into the home. We have made recommendations regarding these matters. We also found that regular fire drill practices had not been established to ensure that people were aware of the procedure to follow in the event of a fire.

However, overall, evidence shows that people live in accommodation which meets their needs and supports them to maximise their independence.

## **4. Leadership and Management**

### **Summary**

The new management and staff team are making positive improvements to the service. Files are organised and it was easy to find information. The responsible individual regularly visits the home to seek the views of people and staff about the service. There are quality assurance systems in place, though the quality assurance report needs an action plan. The home produces guides to the service but they require improvements. Staff are trained and supported to carry out their job and are happy at the home. However, their personal development plans require completing.

### **Our findings**

The management have systems in place to monitor the quality of the service, including an annual quality of care review. Since the new manager had taken over at the home it is evident that positive changes had taken place. We anticipate that these will continue. The manager was in the process of reviewing and organising care documentation so that key information was easily available for staff and emergency services. The responsible individual (RI) inspected the home regularly to monitor the service and provide quarterly reports. Discussions with people and staff showed that the RI visited the home frequently. A care worker told us, "*X visits us quite regular, so she's here quite a lot.*" The manager had developed a weekly checklist to monitor the quality of the service and an annual quality of care review had been carried out. The report showed that staff and people using the service had been involved in the review. However, the report would benefit from the inclusion of an action plan. This demonstrates that people receive high quality care from a service which sets high standards for itself, is committed to quality assurance and constant improvement.

People using the service, working in the service or linked to the service can be reasonably clear about what it sets out to provide. The organisation had produced a statement of purpose and service user guide. However, we examined both documents and found that they required improving. We also found that the service user guide was not easy for some people to read and understand. The complaints procedure also required improvements. Overall, though, people know and understand the care, support and opportunities which are available to them.

Staff receive the training they need to carry out their work and are supported by colleagues and management. Records showed that staff had up to date training in topics relevant to the people they supported. However, examination of staff files showed that their personal development plans were blank, including that of the manager. We have made a recommendation regarding this. Evidence showed that the manager and some staff had completed the appropriate qualification for their role. Staff felt that they were supported by the new manager and told us that he was, *“Brilliant!”* They said they were very happy working at the home and experienced good team work and support from their colleagues. A care worker told us, *“I feel 100% confident and competent in operating my job role.”* They added that this was confirmed by the manager during their supervision sessions. This person told us that they, ‘definitely’ had enough time to do their work and that they took pleasure in working at a small home. We observed that staff were motivated and happy and had a good working relationship. Staff were at ease with each other which helped to create a relaxed environment for people. The manager also felt that he was well supported by the responsible individual and his deputy manager. We concluded that people benefit from a service where the well-being of staff is given priority and staff are well led, supported and trained.

## **5. Improvements required and recommended following this inspection**

### **5.1 Areas of non compliance from previous inspections**

At the previous inspection we advised the provider that improvements were needed in relation to the statement of purpose (regulation 4), service user guide (regulation 5), availability of required records (regulation 17), complaints procedure (regulation 23) and fire precautions (regulation 24 (4)) in order to fully meet the legal requirements. Action has been taken with regard to regulations 17 and 24.

### **5.2 Areas of non compliance identified at this inspection**

We have also advised the registered person that improvements are still outstanding in relation to the statement of purpose, service user guide and complaints procedure in order to fully meet the legal requirements. This has been highlighted in the previous two inspection reports.

A notice has not been issued on this occasion, as there was no immediate or significant impact for people using the service. We expect the registered persons to take action to rectify this and it will be followed up at the next inspection.

Additionally, we advised the registered person that fire drills should be established immediately and carried out regularly in line with regulation 24 (4)(e).

### **5.3 Recommendations for improvement**

The following are recommended areas of improvement to promote positive outcomes for people:

- Safeguarding and whistleblowing policies/procedures should be revised to include details of all external bodies to be contacted with any concerns.
- The manager should refresh himself with the details of the Deprivation of Liberty Safeguard process to ensure people’s right to freedom is upheld.

- Prompt action should be taken to carry out the wishes of the individual who wants to hold a front door key.
- To help ensure people's safety, their personal emergency evacuation plans should be reviewed. A plan should be written immediately for the individual who has most recently come to live in the house.
- A thorough risk assessment should be carried out to ascertain if staff should be provided with a recognised training programme on positive behaviour management. This is to ensure that individuals and staff are not subject to harm and people's well-being is promoted.
- The quality of care report should include an action plan for the forthcoming year.
- Personal development plans for staff and the manager should be completed and maintained.

## **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 30 May 2017 between 1:20pm and 7:15 pm.

The following methods were used:

- We spoke with three of the four people living at the home.
- We spoke with the registered manager, the deputy manager and a care worker.
- We looked at a wide range of records. We focused on people's files, staff files, guides to the service, the quality of care report and operational records.
- We observed daily life and care practices at the home and how staff spoke with and interacted with people living there.
- Observation of the home environment

Further information about what we do can be found on our website [www.cssiw.org.uk](http://www.cssiw.org.uk)

## About the service

<b>Type of care provided</b>	Adult Care Home - Younger
<b>Registered Person</b>	Heatherleigh Care Ltd
<b>Registered Manager</b>	Simon Jones
<b>Registered maximum number of places</b>	5
<b>Date of previous CSSIW inspection</b>	1 June 2016
<b>Dates of this Inspection visit(s)</b>	30/05/2017
<b>Operating Language of the service</b>	English
<b>Does this service provide the Welsh Language active offer?</b>	<p>This is a service that does not provide an 'Active Offer' of the Welsh language. It does not anticipate, identify or meet the Welsh language needs of people who use, or intend to use their service. We recommend that the service provider consider the Welsh Government's, <i>'More than just words follow-on strategic framework for Welsh language services in health, social services and social care.'</i></p> <p>However, we were told that the home employs one member of staff who is a fluent Welsh speaker.</p>
<b>Additional Information:</b>	