



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

Inspection Report on

Highfield House

Denbigh

Mae'r adroddiad hwn hefyd ar gael yn Gymraeg

This report is also available in Welsh

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Description of the service

Highfield House is located on Highfield Park on the outskirts of the village of Llandyrnog. The registered providers, Mental Health (Highfield Park) Ltd, are registered to provide personal care for six adults with learning disabilities. On the day of the inspection five people were living in the home. The providers have nominated an individual to undertake the role of responsible individual and the registered manager is John Wynne Hughes.

Summary of our findings

1. Overall assessment

Highfield House offers people the opportunity to develop their independence skills. People are supported by a staff team who know them well and treat them with respect. Staff feel supported by the management and receive regular supervision. People feel safe and have positive relationships.

2. Improvements

This is the first inspection since the home was registered.

3. Requirements and recommendations

Section five of this report sets out our recommendations to improve the service. These include the following:

- Administration of medication.
- Providing an active offer of Welsh.
- More detailed care plans about physical and mental health.
- Authentication of care plans.
- Promotion of positive risk taking.
- Goals for people should be measurable and reviewed.
- Challenging behaviour policy should be reviewed.

1. Well-being

Summary

People are supported by staff who know them well and they feel comfortable with. Systems are in place to help ensure people's health and safety is protected. Improvements in medication administration are needed to reflect a person centred approach.

Our findings

People feel valued and are settled and comfortable with staff who know them well and who support them to make choices. We spoke with people living in the home who told us "*staff are great*" and "*they try to help when I am upset*". We observed friendly and light-hearted banter between people living in the home and staff. We saw people being supported by staff to engage in household activities such as vacuuming. We saw people being offered choice in what they wanted to do that day and they chose and made their own sandwiches at lunch time. We saw staff listening to people and offering support and reassurance. We observed one person speaking to a member of staff in Welsh; however this was a member of staff from another home. It is recommended the providers consider providing an active offer of Welsh to people living in Highfield House. Overall people have a sense of belonging and have safe positive relationships with the staff who support them.

People have choice in how they spend their time and are encouraged to pursue individual activities. We found people were enabled to be independent of the home's transport as bus and rail passes had been purchased for them. People told us of coach trips they had taken using a local coach firm. We saw people had individual activity planners which included educational, social and leisure pursuits. People with a particular interest, for example, in music were encouraged and supported to take part in musical activities. Another person wanted to take up part-time employment and although this had not been achieved a trial as a volunteer had been secured which they wished to pursue. We saw there were facilities for people to engage in communal activities for example; playing on an X Box in one lounge and there was a television in another lounge. People can do things that matter to them.

Systems are in place to protect people from harm and abuse. Care files evidenced risk assessments had been undertaken for all individuals. Staff we spoke with were able to tell us their role and responsibility in ensuring people are kept safe from harm. People told us they would speak to staff or the home manager if they were unhappy about the way they were treated.

Records viewed showed appropriate health and safety checks were being completed, for example, fire safety and electrical testing. We saw various audits had been undertaken including medication and infection control which evidenced where faults or issues had been raised these were addressed promptly.

We conducted a medication audit which showed that systems were in place to help ensure staff awareness of the medication and how it should be administered. Correct procedures were in place for the ordering, storage and disposal of medication. We saw people are expected to sit on a chair in the corridor to wait being called into the medication room for their medication. It was recommended the procedure for administration of medication was reviewed to reflect a person centred approach. People are protected from avoidable harm.

2. Care and Support

Summary

People are supported by a staff team who treat them with dignity and respect and are aware of their individual needs.

Our findings

Individual needs are identified through assessment by the home and other professionals. Care files evidenced pre-admission assessments had been conducted, though not always dated, and care plans had been devised from those identified needs. We found the plans were written in a person centred way and contained details of how best to support people. There was no evidence people had agreed to the plans as neither they nor their representatives had signed them. Some people told us about their additional mental health conditions however this was not evidenced within the care files. They were receiving medication and monitoring by an appropriate medical person, however to help ensure staff can support them fully, information should be available within the care plan about the condition and signs and symptoms of relapse. We saw risk assessment and management plans had been completed and were up to date. Staff we spoke with were able to describe individuals' needs and the type of support they were required to provide. We spoke to relatives and friends who told us *"the staff are brilliant"* and that their relative was very happy living in the home. They told us they were informed of any changes with their relative and were involved in their care. We saw progress review documents which indicated plans had been reviewed however, the documentation was confusing in that it could not easily be seen what individuals goals had been agreed and the specific plans required to achieve these goals. It is recommended that where goals are set with people these are clearly written, are measurable and progress against them reviewed. People are receiving the right care at the right time and in the way they want it however, improvements in care plan documentation is required.

People living in Highfield House are fully involved in the running of the home and their care. We saw different colour samples of paint had been put on the walls in the lounges to enable people living there to express their opinion regarding which should be chosen. We saw people took an active part in household activities including washing the dishes after lunch and people told us they looked after the garden and flowers. Care files demonstrated people had been asked to identify the type of staff they would like to support them using a "matching tool". People told us about their keyworkers and how this enabled them to say what they wanted to do with their time and to talk about things which worried them. People told us they had access to an advocate who visited and talked with them. People feel and are involved in making decisions that affect their lives.

People are supported to maintain and improve their physical and mental health. People told us they use the services of a local GP, dentist and optician. In addition they told us they have access to specialist services such as psychiatry. Care records showed people had attended these various appointments supported by staff and had individual health action plans and hospital passports. These documents assist staff and other professionals to provide the correct support to the individual concerned. People told us of the support they had received in relation to maintaining a healthy lifestyle for example, quitting smoking and

reducing weight. We saw these had been identified as outcomes for people in their care reviews and actions had been taken to support people achieve these. We reviewed the menus on display and found these contained basic details of what was to be eaten, e.g. chicken burgers. Staff told us this was supplemented with other food to provide an overall balanced diet. People told us they have vegetables, potatoes, salad and fruit in addition to what is written on the menu. We saw fruit was readily available and people helped themselves to this during the day. People told us staff asked them on a Sunday what they wanted to have on the menu and that they could have something different if they wanted. We saw people who did not want the sandwich filling prepared for lunch eat something else. People are supported and encouraged to be as healthy as they can be.

3. Environment

Summary

The atmosphere in Highfield House is welcoming and friendly. People have access to safe and sufficient communal and outside space in addition to their personal bedrooms.

Our findings

People feel comfortable in their surroundings and take pride in keeping the home clean and tidy. We saw some people had personalised their bedrooms and those individuals told us they had chosen the décor. We saw some people did not have a key to their bedroom and staff opened the door and wardrobes. We discussed the impact on people's self esteem when having no control over such matters with the home manager. They agreed to review risk assessments in line with positive risk taking for people.

Communal areas were warm and well furnished. We saw the kitchen had been decorated and a new cooker was to be installed. The laundry was being decorated at the time of the inspection. We saw several areas of the home required redecoration in particular bathrooms. We were told plans were to be discussed regarding overall improvements to be made to the environment. The manager agreed to forward the refurbishment plans when they had been agreed.

We reviewed fire safety records and saw tests were being carried out in relation to alarm call points and fire doors. Emergency lighting checks had been completed and fire fighting equipment had been tested by a qualified person. The manager and staff told us in-house fire safety training was provided every three years and a workbook was completed every six months to refresh their knowledge. The training matrix provided indicated all staff had completed the mandatory in house fire training within the past three years but none, of those required to do so, had completed the fire safety workbook within the past six months. It was recommended that staff training in this area is reviewed and up dated where necessary. We saw personal emergency evacuation plans (PEEPs) were available for all people living in the home.

We reviewed electrical appliances test records and found these had been completed within the past year and where faults had been identified remedial action had been taken, for example a faulty plug had been replaced.

We saw medication was disposed of correctly; hand washing facilities and equipment were available in the kitchen, laundry and medication room.

Fridge and freezer temperatures in the kitchen had been checked daily and seen to be within recognised limits. The temperature inside the medicines cabinet and fridge were seen to be checked daily.

We observed all areas of the home were free from hazards and people were able to move about unhindered. The environment meets people's individual needs and is conducive to the development of relationships as it offers spaces for people to socialise together.

4. Leadership and Management

Summary

People living in Highfield House are able to voice their opinions and concerns. The home manager and registered manager are available and supportive. There are systems in place to help ensure people receive the care and support they need.

Our findings

There is sufficient and appropriate information available for people in relation to what is available to them from the service. The Service User Guide given to people was seen to provide information in a pictorial format in addition to written guidance. This document contained details of the accommodation, social and leisure opportunities, how to complain, how to access advocacy and the types of support available to them. People we spoke with were able to tell us what they would do if they were unhappy about their care or how the home was run. People gave us examples of the activities available to them and how they were supported by the staff. People told us they had an advocate and they knew how to contact them. People know what facilities; services and support are available to them and how to express their concerns.

Policies and procedures are in place to help ensure staff keep people safe and deliver care and support to them. We reviewed the safeguarding policy and staff we spoke with demonstrated their knowledge and understanding of this. We saw that where people's behaviour had impacted on others this had been recorded, reported where necessary, analysed and actions taken to prevent a similar situation arising. The challenging behaviour policy and procedure provided was one written by another authority and referred to systems not used in Highfield House. This document should be reviewed to include the information and systems relevant to the service. Care files showed the principles of good practice, which promotes the use of least restrictive interventions, were being adhered to. Training records showed staff had received training in the Management of Actual or Potential Aggression (MAPA). We saw staff successfully manage a situation between two people using diversion and distraction techniques with people. Incident records viewed evidenced the use of non physical interventions. People benefit from a service which seeks to implement best practice.

Staff are trained and work well as a team to provide consistency of support to people. We saw positive interactions between the staff and people living in the home. People told us they liked the staff and the home manager "*was the best*". People told us they saw the registered manager every day and were happy they could talk to them. Staff told us they feel supported by the managers and that someone was always available to answer their questions. Staff files evidenced people received an induction and undertook shadow shifts with more experienced staff when they started working in the home. Staff told us, and records confirmed, they received regular supervision and met as a group to discuss issues related to the running of the home and the care of people living there. The training matrix provided showed all staff were up to date with; safeguarding, MAPA, infection control, food hygiene and health and safety training. Where training was required in other areas dates were identified when this would take place. People are supported by staff who feel and are well led, supported and trained.

5. Improvements required and recommended following this inspection

5.1 Areas of non compliance from previous inspections

None

5.2 Areas of non compliance identified at this inspection

None

5.3 Recommendations for improvement

- The procedure for administration of medication should be reviewed to reflect a person centred approach.
- The providers should consider how they could provide an active offer of Welsh to people living in Highfield House.
- Care plans should provide sufficient detail about all physical and mental health conditions to help staff support people and identify any signs of relapse
- In order to authenticate care plans these should be signed by the person or their representative
- Where goals are set with people these should be clearly written, measurable and progress against them reviewed.
- The challenging behaviour policy and procedure should be reviewed to include the information and systems used by the service.

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 14 November 2017 between 09:25am and 5:20pm. Feedback was given to the registered manager and home manager.

The following methods were used:

We spoke with three people living in the home, three members of staff, one relative, the home manager and registered manager.

We observed interactions between people living in the home and with staff.

Records reviewed included:

- Two care files and associated care plans
- Two staff files which included supervision and training records
- Fire, electrical appliances, maintenance, incidents and accidents
- The Statement of Purpose and Service User Guide
- Complaints procedure and logs
- Staff rotas

We conducted a medication audit

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

7. About the service

Type of care provided	Adult Care Home - Younger
Registered Person	Mental Health Care (Highfield Park) Ltd
Registered Manager(s)	John Hughes
Registered maximum number of places	6
Date of previous CSSIW inspection	This was a post registration inspection
Dates of this Inspection visit(s)	14/11/2017
Operating Language of the service	English
Does this service provide the Welsh Language active offer?	The service does not provide an active offer of Welsh
Additional Information:	

No noncompliance records found in Open status.