



Inspection Report on

Ty Cornel

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NELSON
TRESHARRIS
CF46 6NP**

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Description of the service

Ty Cornel is registered with Care Inspectorate Wales (CIW) to provide personal care and accommodation to two adults with a learning disability. The service is situated in Nelson, Caerphilly County Borough. It is located close to local amenities and facilities. The service is owned by Values in Care Limited. The company has nominated an individual to represent the company. The appointed manager is registered with Social Care Wales.

Summary of our findings

1. Overall assessment

The service provides a good quality service that supports people to achieve their preferred outcomes and supports their dignity and rights. The service promotes well-being through a familiar staff team providing person centred care. We found that people were involved in all aspects of their care and enjoyed a good rapport with staff who were skilled and supported in their role. People live in a pleasant, comfortable and homely environment which meets their needs and supports them to maximise their independence.

2. Improvements

This is the first inspection following re-registration with Care Inspectorate Wales under the Regulation and Inspection of Social Care (Wales) Act 2016.

3. Requirements and recommendations

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

Recommendations for improvements are required in the organisation of the medication folder and accuracy in documentation regarding the postcode for the service. We recommend that the service provider considers Welsh Government's "More Than Just Words, Follow-on Strategic Framework for Welsh Language Services in Health, Social services and Social care 2016-19".

1. Well-being

Summary

People's well-being is promoted by a familiar staff team who have a good understanding of their needs. Individuals are treated with dignity and respect, their individual identities and routines are recognised and valued. People using the service are encouraged and have opportunities to be involved, make choices and decisions about their lives.

Our findings

People have good relations with staff who know them well and understand their needs. During our visit we observed staff supporting individuals and noted dignity, respect and kindness was offered, to which people responded positively. Staff we spoke with on the day of inspection demonstrated sound knowledge of people's needs and preferences. Staff informed us about the way each person preferred their care and support to be provided. People were observed engaging in a range of conversations and interactions with staff. All attempts at communication were valued and responded to appropriately. Demonstrating staff interactions, knowledge and understanding have a positive impact on people's well-being.

People are encouraged to express themselves. We saw that resident's meetings were held on a regular basis. We saw active involvement in the development and reviewing of care plans and individual vocational plans by people. We observed one person taking control of their medication with minimal prompting from staff, the individual completed their own medication recording sheets. People are involved in a range of activities with individual routines recognised and valued. For example, one person was in the process of packing a suitcase in preparation for a week away on holiday. Other activities included cinema trips, walking, attending classes at college, horticultural activities at a local farm and in the person's garden. Alongside external activities we noted people were supported to develop and maintain independence skills within their home environment in respect of domestic chores including laundry, cleaning their rooms and preparing meals. We found that people are involved in planning and choosing how to lead their lives, their potential and independence is maximised.

Care documentation is designed to enable people with communication needs to participate and feel a sense of ownership in their care and support planning. We saw that each person had a 'communication passport' ensuring their communication requirements are met. If the service received a referral from a person whose first language was Welsh, we were told they would give consideration to the requirements of the Welsh Language Act 1993. We recommend that the service provider considers Welsh Government's –“More Than Just Words.... Follow-on Strategic Framework for Welsh Language Services in Health, Social services and Social care 2016-19”

2. Care and Support

Summary

People are treated as individuals and their needs are met and anticipated. The service has robust systems in place to plan how people's care and support is delivered and actively encourages people to take control over the delivery of care and their lives.

Our findings

We saw staff supporting people in a professional, respectful and caring way. People are safe and as well as they can be, and receive timely appropriate person centred care and support. Service delivery plans were in place which contained information about people's assessed and agreed needs and how these should be met. All files were stored securely. We examined one of the two individual care files and this included referral information, an initial assessment, individual care plans and positive behaviour plans with reviews. Further documentation included risk assessments to identify and determine the level of risk for various issues and how these could be managed. We saw that review's of care planning documentation was completed on a regular basis. All records to be clear and comprehensive about people's identified needs and how these should be met.

People are supported to manage their own behaviour and to take positive assessed risks. We examined "positive behaviour support plans and a challenging behaviour relapse prevention plan for one individual and we found both to be detailed and person centred. These plans helped staff to anticipate triggers to certain behaviour and to adapt their support accordingly, for example using distraction techniques. We saw active involvement in the development and reviewing of care plans by people living at the home, including their signatures during each review. We find that people are encouraged and supported to make choices and decisions.

People are protected by having robust systems in place for the administration of medication. Medication is stored securely in a locked cupboard. Staff received appropriate training and competency checking in relation to the safe storage and administration of medication. We observed one person being prompted to take their medication appropriately. Samples of medication administration record (MAR) sheets were examined. The records were clear with appropriate staff initials and no gaps in recording. However, the medication folder was disorganised and difficult to navigate. This was seen as an area for improvement. The above evidence and sample of records viewed indicated that safe practises were in place to safeguard people and prevent poor health and well-being outcomes.

Systems are in place to ensure that people's best interests are promoted. We saw that where people lacked the mental capacity to make important decisions relating to their life, safeguards in accordance with the Mental Capacity Act 2005 had been actioned, as Deprivation of Liberty Safeguards (DoLS) authorisations had been put in place. We concluded that people's rights are understood, protected and promoted.

3. Environment

Summary

We found that people are cared for in a safe, clean, comfortable and homely environment. The layout of the home enables people to spend time alone or with others in different areas of the house. Comprehensive fire safety, health and safety checks were in place.

Our findings

People are cared for in a spacious and comfortable environment which has sufficient space and facilities to meet their needs. The home provides a pleasant and homely environment for people to relax in and to move about independently. The ground floor accommodation was spacious and consisted of a living room which leads to a kitchen/dining room. People can directly access outdoor usable space with seating facilities. There is a separate office and utility room. People's bedrooms are located on the first floor. We therefore consider people achieve a sense of well-being and belonging because they are supported in an environment which is homely, comfortable and appropriate to their individual needs.

Safety checks and maintenance of equipment are carried out on a regular basis. We viewed a selection of documentation, for example daily health and safety records including fridge/freezer temperatures and food temperature, alongside electrical testing for fixed and portable appliances and gas safety certificate. Comprehensive and regular fire safety checks were in place. Each person had an individual personal emergency evacuation plan. We were told about the homes emergency file or 'grab pack' which contained information for staff and emergency services, including emergency contact numbers and an overview of people living in the house. The above evidence shows that appropriate action is taken to ensure that people are cared for in a safe and secure environment.

4. Leadership and Management

Summary

Overall, people benefit from a well-run service. Staff work well as a team and feel supported in their work. Clear lines of accountability and leadership are in place. There are comprehensive procedures in place for monitoring the service and a strong commitment to driving continuous improvement in relation to outcomes for people.

Our findings

The services' procedure for recruitment, induction, supervision and training are sufficiently robust. We examined three staff member's files; we saw that pre-employment checks were in place, including disclosure and barring service (DBS) checks, verification of identity and necessary references. We saw evidence of mandatory training being completed and shadowing shifts at the home as part of their induction. We also found that only one member of staff had achieved a relevant qualification in Social Care, the remaining staff were working towards achieving the qualification. This did not negatively affect the care and support being provided at this time.. We noted that staff were provided with one to one formal supervision every three months and regular staff meetings were held.

Staff felt equipped and confident to carry out their work. Staff told us that they enjoy their work, find it rewarding and felt supported by management with one staff member saying *"good supportive employer"* and another stated *"I love working here, the manager listens to what you have to say and gives good advice"*. Based on the above evidence we find that people's well-being is maximised by receiving support from a service which has robust and safe staff recruitment processes and staff are sufficiently trained and supervised to support them to achieve their personal outcomes.

There are systems in place to monitor the quality of care and support, incorporating regular quality assurance procedures and takes account of the views of staff and people receiving a service. We examined the homes 'reportable occurrences' information and noted no complaints had been received. We saw accidents were appropriately logged with details of actions and outcomes for people. We noted no incidents had been logged since the last inspection, demonstrating a reduction of behaviours that challenge others. We also examined the quality assurance folder which contained a copy of an external pharmacy audit and internal audits such as medication, care plans and food hygiene. The responsible individual had ensured quarterly quality review visits had taken place. Their quality review reports were detailed and identified improvements as well as what was working well. The service is clear about its role and purpose. Information about the service contained within the Statement of Purpose and service users guide was clear and provided appropriate information about the facilities available at the service, however the postcode was found to be inaccurate. This was seen as an area for improvement. The above demonstrates a strong commitment to driving continuous improvement with robust systems in place to

assess the quality of the service in relation to outcomes for people.

5. Improvements required and recommended following this inspection

5.1 Areas of non-compliance from previous inspections

This is the first inspection following re-registration with Care Inspectorate Wales under the Regulation and Inspection of Social Care (Wales) Act 2016.

5.2 Recommendations for improvement

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

The following are recommendations for improvements to promote positive outcomes for people using the service:

- Improvements are required in the organisation of the medication folder.
- Accuracy in documentation regarding the postcode for the service.
- We recommend that the service provider considers Welsh Government's 'More Than Just Words.... Follow-on Strategic Framework for Welsh Language Services in Health, Social services and Social care 2016-19'.

6. How we undertook this inspection

This was a full inspection which involved an announced visit to the home on 8 November 2018 between 4:00 pm and 6:40 pm.

The following methods were used:

- We reviewed information about the service held by CIW.
- We spoke with people living at the home and with two staff members.
- Telephone conversation with the responsible individual.
- We looked around the home and made observations.
- We looked at documentation, which included:
 - Statement of Purpose and service users guide.
 - One person's care records.
 - Staff records, which included recruitment records, details of training and supervision.
 - Records relating to health & safety including risk assessments, audits and safety checklists.
 - Medication storage and records.
 - Records of complaints and compliments.
 - Records of accidents and incidents.
 - Records of provider visits and audits.
 - Quality assurance and audit records.

Further information about what we do can be found on our website:

www.careinspectorate.wales

About the service

Type of care provided	Care Home Service
Registered Manager	The appointed manager is registered with Social Care Wales.
Registered maximum number of places	2
Date of previous Care Inspectorate Wales inspection	This is the first inspection following re-registration under the Regulation and Inspection of Social Care (Wales) Act 2016.
Dates of this Inspection visit	08/11/2018
Operating Language of the service	English
Does this service provide the Welsh Language active offer?	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 intend to use their service. We recommend that the service provider considers Welsh Government's 'More Than Just Words.... Follow-on Strategic Framework for Welsh Language Services in Health, Social services and Social care 2016-19'.
Additional Information:	