



Inspection Report on

Forest View

**FOREST VIEW
ABERTILLERY
NP13 1HF**

Date Inspection Completed

11/06/2019

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Description of the service

Forest View is registered with Care Inspectorate Wales (CIW) to provide accommodation and personal care for up to three people (aged between 18 and 65 years) with a learning disability and functional mental health needs.

The registered provider is Riverwood Housing Limited who has nominated a person, known as a responsible individual (RI), to oversee the operation of the home. There is a manager employed at the home who is registered with Social Care Wales.

The home is situated on the outskirts of Abertillery in the county borough of Blaenau Gwent in South East Wales. At the time of the inspection, three people were living at the service.

Summary of our findings

1. Overall assessment

People living at the service appear happy and content. People enjoy positive relationships with staff. People live in an environment where their independence is promoted and they have as much choice and control in their lives as possible. People's identities are recognised and they are encouraged and supported to do the things that matter to them. People are healthy because staff support them to maintain healthy lifestyles and ensure that they have access to health and social care professionals in order to meet their ongoing requirements. People are treated as individuals by staff that have a good understanding of their requirements. People have space to relax in a calm and pleasant environment and have choice about spending time communally or privately. The home is maintained to a good standard of repair and is well decorated. People are encouraged and supported to personalise their bedrooms according to their wishes, preferences and identities. The home is clear about its values and roles and people living at the service, their representatives and staff working at the service are able to contribute to the development and improvement of the service. Staff working at the home feel valued and supported because they receive regular supervision, benefit from a visible and approachable management team and receive training which is relevant to the needs of the people living at the service.

2. Improvements

This is the first inspection of the service since it was registered under the Regulation and Inspection of Social Care (Wales) Act (RISCA).

3. Requirements and recommendations

Please refer to section 5 of this report for details of our recommendations. In summary we recommend that:

- Reviews document if people have achieved their outcomes and capture people living at the service and/or their representatives' views.
- Ensure any discussions held with the local safeguarding team are documented.

1. Well-being

Summary

People using the service appear content and benefit from positive relationships with staff. People are supported to have as much choice and control over their lives as possible and are supported to maximise their independence. People are able to routinely do the things that matter to them and their individual identities are recognised and valued. People's requirements are understood and they are encouraged to participate in a full range of activities.

Our findings

People have as much control as possible and are encouraged and supported to make choices, are treated with dignity and respect and their individual identities and routines are recognised and valued. We observed conversations between two people living at the service and care staff. Staff routinely provided choice to people as we heard enquiries such as *"what would you like to do today?"* and *"are you ready for lunch yet?"* We found choices available to individuals in regards to activities were in keeping with those documented as being meaningful for the individual within their personal plans. There was a wide range of activities available to people living at the service such as cinema trips, spa days, sensory room experiences, shopping trips and attendance at a day centre. We saw documentation which recorded what activities individuals had chosen to participate in. This provided a good overview of the frequency and type of activities available. On the day of our inspection we observed one person chose to go swimming and another individual chose to attend the sensory room which was located in a local town. We find people have things to look forward to and are supported to make choices and influence their care and support.

People living at the service have developed good relationships with staff that support them and people are encouraged to be as independent as possible. We saw one person's personal plan identified they liked to take part in domestic activities such as ironing. We noted that they had been supported to volunteer at a clothing recycling centre and documentation also recorded the opportunities the individual had to maintain their independence to complete domestic tasks in the care home environment. We saw during a mealtime one individual was enabled to eat independently with staff supporting when required. On the day of inspection we observed people reacted positively towards the staff with one individual spontaneously hugging a staff member on numerous occasions. We observed interactions between people living and staff working at the service and found that people received kind and caring support from staff who they knew well. We noted there was a relaxed and calm atmosphere within the home and people felt at ease to approach staff. People's independence is promoted and they have relationships with staff which are safe and positive.

People are content and comfortable when relaxing in the home. We observed people living at the service were able to choose how and where to spend their time within the home. We observed people moving freely around the home spending time either privately or communally as they wished. People are supported to have as much freedom as possible and to choose how they spend their time.

2. Care and Support

Summary

People's individual care requirements are understood by staff who know them well. People receive support from a familiar staff team which provides continuity. People using the service are supported to maintain healthy lifestyles and referrals are made to relevant health and social care professionals in a timely manner.

Our findings

People living at the service are supported to understand and make informed healthy lifestyle choices. Care staff told us they routinely supported individuals to attend health appointments. We saw detailed care staff recordings of people's accompanied visits for example doctor and hospital visits. We noted in people's care files that weights were recorded routinely and identified outcomes such as weight loss goals. We were told an individual living at the service had been supported to achieve their weight loss goal by attending a local slimming class. We observed staff encouraging and supporting individuals to make healthier food and snack choices and heard a conversation in which a member of staff asked "*would you like some power fruit?*" We find people are supported to be as healthy as they can be and benefit from timely referrals to health and social care professionals.

People are treated as individuals and supported by familiar care staff that have a good understanding of their requirements. Our discussions with care staff demonstrated that they had good knowledge of people's backgrounds, the requirements of people living at the service and their routines and preferences. We noted people's individual goals and outcomes were identified as part of their personal plans. We found documentation in regards to people's personal plans was detailed, comprehensive and enabled staff to provide appropriate care and support. We saw people's care documentation was being reviewed as per regulatory requirements. We have made a recommendation to ensure the views of people living at the service or their representatives were routinely captured as part of the review process. We were told that the service is currently updating personal plans to ensure they remain as person centred as they can be and that this recommendation would be considered as part of the update. We saw one incident documented on file dated January 2019 which involved an altercation between two people living at the service. Written details of the incident indicated one individual was left "*upset for the rest of the day*". We discussed this with the RI who provided assurances that the home had effective links with the local safeguarding team. We have made a recommendation that staff ensure all communication in regards to safeguarding is documented in writing to further evidence conversations which have taken place. We were advised that in future this would happen. All staff working on the day of inspection had worked for the service for many years and talked about their commitment to "*providing continuity of care for people living at the*

service". We were told the home had very little staff turnover and we found staffing levels were as detailed in the statement of purpose document (SOP). The SOP should contain information about the service, its role and values and supports people to make informed decisions about the type of support available. We conclude people's individuality is recognised and valued and people receive support from care staff who they have developed good relationships with.

3. Environment

Summary

People live in a pleasant environment which is clean and tidy. People's rights to confidentiality and privacy are promoted. People have opportunities to spend time communally and privately. The home is maintained to a good standard of repair and benefits from fixtures and fittings which are considered to be of good quality. People are encouraged and supported to personalise their individual bedrooms.

Our findings

People live in a safe and clean environment, the layout of which enables people to spend time communally or privately. We found the front door was secure and we were asked for identification and to sign the visitor's book on entry. We saw there was a spacious living room, separate dining room, kitchen area and another comfortable sitting area for people to spend time. We carried out a visual inspection and found the home to be clean and tidy throughout. We considered the fixtures and fittings to be appropriate for the requirements of the people living there and these appeared to be of good quality. We viewed the home's health and safety records including gas safety, electrical safety PAT testing information and fire safety records. We found all the information was up-to-date. We noted information was stored securely in locked cabinets and only accessible by those who required it. We conclude, people live in a safe, pleasant environment where their rights to confidentiality and privacy are protected.

People live in an environment which is welcoming and personalised. We saw three bedrooms at the home and found each one had been appropriately personalised and decorated to individual taste and preferences. The communal areas of the home were homely and welcoming, which was enhanced by the natural familiarity between the care staff and people living at the service. We find people feel uplifted and valued because they live in an environment which is personalised and appropriate to their individual requirements.

4. Leadership and Management

Summary

People are supported by a service that is clear in its values and purpose. The home has systems in place for the development and improvement of the service. Staff feel supported and valued, are robustly recruited and trained in order to support people living at the service. There is visible and effective management of the service.

Our findings

The vision, values and purpose of the service are clear and actively implemented. We considered the home's most recent SOP dated April 2019 and found this to be clear, providing an accurate picture of the home and the service it provides. Copies of both the SOP and the service user guide SUG (a guide for individuals living at the service) were located on people's individual files. The service also had a service user friendly version which included pictures for those people living at the service who may struggle to fully understand the written version. We found staff meetings and service user meetings were being held at the intervals stated in the SOP. We considered the minutes from the last staff meeting dated May 2019 and found that care staff had the opportunity to contribute to the agenda items discussed and care staff were encouraged to express their ideas and opinions openly and honestly. All care staff we spoke with commented positively about working at the service. One staff member stated *"I feel valued, respected and listened to"* and *"we are all like a family here, we get on really well"*. Another stated *"management are very supportive"*. People are supported by a service which is clear about its role, values and purpose.

The home has a commitment to its ongoing development and improvement. We saw clear systems were in place for assessing the quality of the service provided to people. We saw the most recent report from a three monthly quality visit completed by the RI which covered the period between January 2019 to March 2019. We found the information was detailed and comprehensive and recorded the opinions of care staff involved as well as people living at the service/their representatives. The report that followed was also found to be comprehensive and detailed and there was a strong emphasis on continuous development of the service. We saw detailed audits were being completed routinely such as medication audits and noted the home have not received any complaints in the last 12 months. We find, people live at a service which sets high standards for itself and is committed to quality assurance.

Care staff working at the home are valued and their development is encouraged. The home is proactive in the learning and development of care staff and routinely ensures that training is relevant to the individual needs of the people living at the service. All staff files we considered demonstrated care staff had received training in mandatory subjects such as health and safety and safeguarding which was in keeping with the SOP. We discussed

training further with the RI and we were told more specialist training was available for example autism awareness as required. Staff told us they were *“really happy with the training provided and were confident that when refresher training was required this would be organised”*. We noted on the personnel files of care staff we considered supervision records were detailed, provided discussions around the development of the staff member and recorded staff's aspirations for the future. Supervision in this context entailed the staff member having one to one time with their line manager to support their ongoing development. We saw each worker had an annual appraisal documented which recorded their achievements. We saw that there were robust recruitment procedures in place at the service and all care staff had full employment history, two references, identity checks and disclosure and barring service checks (DBS) prior to the commencement of their employment on file. We noted induction was detailed and followed guidelines provided by Social Care Wales. People benefit from a service which cares about the well-being of its staff and gives priority to ensure that all care staff are well supported and receive relevant training and supervision.

5. Improvements required and recommended following this inspection

5.1 Areas of non compliance from previous inspections

This was the first inspection since the service was registered under RISCA.

5.2 Areas of non compliance identified at this inspection

No areas of non compliance were identified.

5.3 Recommendations for improvement

- Reviews need to reflect if people have achieved their outcomes and routinely capture the views of people living at the service and/or their representatives in order to ensure that any changes to outcomes are acknowledged.
- Discussions held with the local safeguarding team are documented which would ensure written evidence that appropriate discussions had taken place had been recorded.

6. How we undertook this inspection

This was a full inspection undertaken as part of CIW's inspection programme. One inspector visited unannounced between the hours of 9.50 am and 2.40 pm on Wednesday 11 June 2019.

The following sources of information were used to support the findings of this report:

- Information held by CIW including notifications, concerns and safeguarding information.
- Discussions with the RI and care staff working at the time of the inspection.
- We considered personal plan documentation for three individuals living at the service.
- We considered information held on two care staff personnel files.
- We reviewed care worker induction, training, supervision and annual appraisal information held at the service.
- We reviewed the home's statement of purpose and service user guide.
- We reviewed the most recent six monthly quality assurance report dated April 2019 and the most recent quarterly visit dated January to March 2019.
- We viewed the home's health and safety records including gas safety, electrical safety, fire safety and PAT testing.
- We carried out a visual inspection of the home, giving consideration to the environment, layout, furnishings and fixtures.

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
Service Provider	Riverwood Housing Ltd
Manager	Sian Thomas
Registered maximum number of places	3
Date of previous Care Inspectorate Wales inspection	This was the first inspection undertaken since the service was registered under RISCA
Dates of this Inspection visit(s)	11/06/2019
Operating Language of the service	English
Does this service provide the Welsh Language active offer?	No
Additional Information: This is a service which is continuing to work towards being able to offer the Welsh language 'active offer'. However no one living at the service speaks Welsh as their first language and therefore the service has not been required to fully demonstrate to provide the 'active offer'.	

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