



Inspection Report on

**Faraday House
Clydach
Swansea
SA6 5JS**

Date Inspection Completed

01/04/2019

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Description of the service

Faraday House is a care home which provides support for up to two people aged 18+ years with a learning disability and or functional mental health needs. The home is situated in a residential area in Clydach, Swansea. It is owned by Accomplish Group Limited, the newly appointed manager is registered with Social Care Wales and the Responsible Individual (RI) is Sue Hullin.

Summary of our findings

1. Overall assessment

We found that people living at Faraday house are happy and receive support that is focussed on their needs. People are actively involved in activities that promote their independence. Staff are professional, know the people they care for well and are adaptable to meet the changing needs of individuals in their care.

2. Improvements

Since the last inspection staff files now contain an updated photo of staff and care plans are signed by individuals using the service.

3. Requirements and recommendations

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

- Staff files could be more streamlined and old paperwork archived.
- Full working history of staff should be kept on file.
- Evidence of Disclosure and Barring Service (DBS) checks and updates should be easy to access in staff files.
- To continue to implement the Welsh active offer.

1. Well-being

Summary

People's potential and independence is maximised. People are happy, safeguarded and have a sense of belonging.

Our findings

People's potential and independence is maximised. During the inspection we saw a positivity board on display that detailed activities that people had enjoyed in the last month, both praise and recognition quotes were visible as well as photographs of people with things that they had done, positive praise included: "*amazing job on those delicious Welsh cakes*" and "*well done for taking charge and making your own supper*". We saw that previous months activities were transferred into a positivity book which also detailed specific wishes of individuals. People were settled and knew each other very well. The manager told us that people chose to keep to their own space as much as possible and explained how they were supported to use different areas within the home and garden to enable this. We saw weekly individualised activity charts, which incorporated many engaging activities such as; domestic tasks, preparing meals, visits out for meals, shopping, Going out for coffee and pet care activities, a relative told us that their family member "*loves going out, especially for food*". We saw that people went to the local public house for a meal. Daily records were seen to reflect these activities on a daily basis. Minutes were seen from monthly resident meetings where people could feedback on things they had done and wanted to do. People experience enhanced well-being because their needs are understood and catered for.

People are safe and protected from harm. On entering the home we saw that the door was opened with a key and there was a doorbell for entry and a signing in book for visitors, We were told by the manager that Deprivation of Liberty Safeguards (DoLS) were in place for individuals who did not have the capacity to make decisions about their accommodation, care and support and were currently being renewed. We spoke to care workers on duty during the inspection who were aware of the processes to follow if they had any concerns regarding the safeguarding of individuals in their care. A person living at the home said "*I like living here, it's quiet around here and I feel safe*". In conclusion: people are safeguarded and have a sense of belonging.

The implementation of an Active Offer of the Welsh language is ongoing. The Active offer means: being able to provide a service and documentation in Welsh without people having to ask for it. The manager told us that they were aware of the need to produce documentation in Welsh however they had been unable to source someone to undertake the translation of key documents and this was an ongoing issue. They also told us that the residents have lived at the home for a number of years and do not speak Welsh, therefore

there is no demand for this service at present however this would be prioritised if a vacancy within the home arose. In conclusion, the home is still working towards an active offer.

2. Care and Development

Summary

People are enabled and empowered so that they have as much choice, autonomy and control over their lives as is possible. People's health needs are supported and maintained as much as they can be, receiving the right care at the right time in the way they want it.

Our findings

People receive person centred care that focuses on achievable outcomes. We saw one page profiles in care files that clearly indicated "*what other's admire about me, What is important to me*" and "*how best to support me*" this highlighted the things people can do for themselves and how they prefer things to be done. Care workers spoken to were very aware of the behaviours of the people they support and how to adapt the care they give to meet these changing needs, one care worker said "*every day is different*". We looked at two care files and saw that care planning was focussed using the recovery star system. The recovery star system is an outcomes measure which enables people using services to measure their own recovery progress, with the help of mental health workers or others it focusses on ten focused areas, which are:

- Living skills,
- social networks,
- trust and hope,
- identity and self-esteem,
- responsibilities,
- addictive behaviour,
- managing mental health,
- physical health and self-care,
- work and,
- relationships.

We saw that these recovery stars were used as a basis of care planning and each focus area had its own individualised care plan to enhance people's recovery. The signatures of people were seen on these care plans in acknowledgment and understanding of their contents. Also visible were minutes of multi-agency review meetings held whereby the attendance of people supporting individuals and the individual themselves were present. This evidences that people are enabled and empowered so that they have as much choice, autonomy and control over their lives as is possible.

People receive responsive, continuous care. We saw shift handover documentation and saw thorough details within, including medication regime including any PRN (which means as and when needed) medication that was prompted by care staff, also included in these

documents where any changes in behaviour, physical health, any medical assistance sourced, any staffing issues or ongoing problems, this ensured all staff had a background knowledge of how things were prior to starting their shift. We saw one person's medication records and corresponding medication dispensers and noted that all documentation were completed correctly and no medication errors were present. People's daily records seen were thorough and person centred and evidenced any changes in mental or physical health and detailed any contact with medical professionals. A relative told us that the staff "*always get in touch when X is not well*", people's weight was recorded and we saw that these were stable. Documentation was seen stored in care files for any medical appointments that people had and noted in the diary to ensure attendance. This shows that people's health needs are supported and maintained as much as they can be.

People are supported to enjoy a healthy balanced diet. In the kitchen we saw a weekly menu board and were told that this menu had been devised by the people living in the home and could see that each day was different. People were encouraged to take part in meal preparation and we observed people making their own breakfast. We saw that people had been supported to undertake food hygiene training and had their own certificates in their care files. We were told that the weekly, main grocery shop was usually done on line with the shopping lists prepared with people accommodated and that additional shopping needs were carried out frequently with people, supported by care staff and utilising the home's vehicle. It is evident that people are supported to do as much as they can for themselves.

3. Environment

Summary

People live in accommodation which is, clean and welcoming and meets their needs supporting them to maximise their independence and achieve a sense of well-being.

Our findings

People are cared for in safe, secure, and warm surroundings. On walking around the home, we saw that there was a spacious lounge/ diner downstairs with a kitchen and office towards the rear of the property. Access to the rear garden was from the dining room and kitchen. This garden was enclosed with high fencing and the gate for access was locked. We saw that windows had restrictors in place. Upstairs we saw two large bedrooms and a large bathroom which had a toilet, and shower above a bath. We saw that there was also a very small separate toilet on the landing. The communal areas were clean and personalised with photos and art work on the walls of people who lived there. The kitchen was fully fitted with all appliances. We saw locked cupboards which contained the kitchen knives, scissors and sharps and a further locked cupboard which contained the cleaning materials under the COSHH (control of substances Hazardous to Health) regulations. Medications were stored in individual locked cabinets in the office. Personal information and daily records were also all stored in the office, we were told the office was locked at all times when not manned. All external doors in the property had key operated locks all internal doors were fire doors and had fire safety doorstops in place, people's bedrooms were also lockable with keys and people had the choice to have their own key to their rooms. We saw people had wash basins in their rooms and personal toiletries and towels were stored with them, people's rooms were personalised to their own choice of colour and personal items were visible. This confirms that people are cared for in a safe, clean and personalised environment.

The premises are well maintained and decorated. We saw that furnishings and fixtures in the home were in a good state of repair although the manager told us that there are plans to redecorate the home in the near future to update it. The enclosed rear garden which was on two separate levels housed a newly installed smoking shelter, seating area and lower level lawn area accessed by steps. The manager told us that there were plans in place to transform the lower garden area as it had not been utilised for some time. We saw a maintenance file which contained all compliance certificates for gas, electricity and fire safety, also an audit book was used during the inspection to carry out checks on many internal systems which included: fire doors, carbon monoxide and smoke detectors. Personal emergency evacuation plan's (PEEP's) were in place for all residents and could be accessed via a grab bag in the cupboard in the hallway, Faraday house is a home run by a large provider. In order to oversee all services, there is a software system in place where all maintenance issues can be recorded and actioned in order of urgency. The manager told us that there are categories within this, which included emergencies that needed attention within 4 hours, urgent issues that could be dealt with within 24 hours and

not so urgent issues that could take up to 28 days. The manager told us that the system worked well and there was a proactive maintenance team on hand who would come when necessary. In conclusion, people have access to resources that are well maintained and conform to relevant safety standards

4. Leadership and Management

Summary

People benefit from an efficient service where best use is made of resources. The vision, values and purpose of the service are clear and actively implemented. People benefit from a service where the staff are supported in their roles.

Our findings

People can be assured that procedures are in place to ensure safe, robust and timely recruitment of staff. We saw two staff files and one had all the required documentation and background checks in place however the other staff file did not have a complete working history on file. The manager told us that all new staff had to complete this prior to commencement of employment and any gaps in employment were checked and verified. We saw that all Disclosure and Barring Service (DBS) checks were up to date however these were not always easy to find in staff files. We saw that staff files contained a great deal of paperwork in them that could be archived. New members of staff completed induction training which included measuring competencies against each topic, the induction training programme was devised by the provider and included a care certificate, it was not the Social Care Wales induction but covered similar topics. The manager confirmed, that shadowing duties followed this within the home until the new staff member felt confident. We saw training records and found that most staff had completed the mandatory training as detailed in the statement of purpose. The manager was aware of the training gaps and told us this was being addressed. This shows that people benefit from an efficient service where best use is made of resources.

People benefit from a service where the wellbeing of staff is given priority and staff are supported in their roles. We saw that supervision of staff was happening at regular intervals, usually once every two or three months. The manager told us that monthly supervisions took place with new staff and throughout their probationary period to ensure they were supported in their new role, a care worker said "*the manager is very good, always there if you need anything*". People benefit from a service where the staff are supported in their roles

The vision, values and purpose of the service are clear and actively implemented. We saw that the Responsible Individual (RI) had visited the premises routinely every three months and the most recent report from them was seen, this report detailed interactions with people living in the home, staff, environmental issues, a review of records including complaints and the Statement of purpose (SOP). We saw that regular staff meetings were held and all staff attended to ensure all were aware of any changes in people's care needs. The manager told us that through consultations with staff, amending the staffing shift patterns and structuring their approach with people they had been successful in supporting people to adjust their sleeping pattern, which has allowed them to participate in more activities and

improve their social outlook. We looked at the home's SOP and saw that a more recent copy was available and this was later forwarded to CIW (Care Inspectorate Wales). In conclusion, the management take account of the views of people using the service and staff to evaluate its performance and set objectives for further improvements.

5. Improvements required and recommended following this inspection

5.1 Areas of non-compliance from previous inspections

None

5.2 Recommendations for improvement

- Staff files could be more streamlined and old paperwork archived.
- Full working history of staff should be kept on file.
- Evidence of Disclosure and Barring Service (DBS) checks and updates should be easy to access in staff files.
- To continue to implement the Welsh active offer.

6. How we undertook this inspection

This was a full inspection undertaken as part of our inspection programme. One inspector made an announced visit to the home on 1st April 2019 between 11am and 15:30pm.

The following methods were used:

- We spoke to the manager who was present during the whole inspection.
- We viewed the home's indoor and outdoor areas.
- We looked at a range of records including two people's care records, one person's Medication Administration Record (MAR) chart and maintenance records.
- We looked at two staff files; supervision and appraisal records and the training programme.
- We looked at policies and procedures including the statement of purpose and service user guide.
- We spoke to one person living in the home, one relative of a resident and two staff members.
- We gave feedback to the manager on the day of the inspection, and the responsible Individual the following day.

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	Accomplish group ltd
Manager	
Registered maximum number of places	2
Date of previous Care Inspectorate Wales inspection	First RISCA inspection report
Dates of this Inspection visit(s)	01/04/2019
Operating Language of the service	English
Does this service provide the Welsh Language active offer?	Working towards
Additional Information:	

Date Published Friday, 17 May 2019

