



## Inspection Report on

**Llys Afon**

**CARDIFF**

## **Date Inspection Completed**

09/05/2019

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## **Description of the service**

Llys Afon is part of the 'Accomplish' group and registered with Care Inspectorate Wales (CIW) to provide care and support for up to three adults with a learning disability and/or mental health needs. Currently two people live in the Cardiff home, their accommodation is in two adjoining flats on the ground floor of a block of six. A registered manager is in place. The responsible individual (RI) of the service changed recently.

## **Summary of our findings**

### **1. Overall assessment**

People in Llys Afon enjoy living there and are supported to maintain their independent living skills, interests and routines whilst being safe and protected from harm. A stable and caring staff team ensures continuity of care. People benefit from warm and positive interactions with staff who know them well and understand their needs. The home offers a welcoming and comfortable environment and is clean and well maintained. The service is led by a highly competent and hands-on manager, and staff provided positive feedback which indicated they were valued and well supported. There are processes in place to ensure staff are suitably recruited, trained and supervised. The service demonstrates a clear commitment towards continuous learning and development to improve outcomes for the people using the service.

### **2. Improvements**

This was the first inspection since the service registered under the Regulation and Inspection of Social Care (Wales) Act 2016 (RISCA 2016). Any improvements will be considered as part of the next inspection.

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

Section five sets out one area for improvement and recommendations we made to help the service develop. Please refer to section five for further details.

# 1. Well-being

## Summary

At Llys Afon, people are supported to improve their independent living skills and to follow their interests. They can choose how to do their daily routines at home, and what activities in the home and in the community they want to do. A stable and caring staff team offers people positive interactions and competent support. People are also kept safe from harm.

## Our findings

People can experience a sense of warmth and belonging. People looked comfortable in the company of staff and each other, and appeared uplifted by the support that was being provided to them. We observed staff interact with the resident in a caring, warm but respectful manner. They demonstrated a good awareness of the resident's individual needs, dignity and communicated with them in ways they understood. On the day we visited the home, we saw that people had returned, or were about to leave the home to access social and recreational opportunities. We conclude that people who use the service feel at home and have positive relationships.

People can feel stimulated and occupied. In the statement of purpose we saw a range of social, recreational and educational opportunities available to people. A planner was used with the individual which reflected a diverse range of planned activities throughout the week. This included music, shopping, cookery class, picnics in the park and more. Currently one resident was learning how to Skype with relatives overseas. It was evident from the discussions we had with the staff and manager that they had a good understanding of the resident's individual needs, and they felt that the support provided to the resident since they had moved into the service had enabled them to develop their confidence and self-esteem. People therefore have good opportunities to learn, maintain and develop their skills and interests.

People are supported to stay safe and well. We saw evidence within the care records that health and social care professionals were involved in relation to the resident's care. This included input from an occupational therapist, general practitioner (GP), social worker and various other healthcare professionals. We were told that for instance over the period of their stay in the home, one resident went from a managed diabetes type 2 to being discharged by the diabetes service due to good health in that area. This shows that people's health and well-being is promoted.

There was no Welsh spoken in the home because the residents did not speak or understand Welsh but the service would be able to provide this if required.

People living in the home are protected. We found that staff and management understood their roles in protecting people and had received training and education to recognise signs of stress, abuse or poor mental or physical health. They knew when and how to report concerns or incidents. All staff was trained in applying the safeguarding policy. The manager had made appropriate applications with the local authority under the Deprivation of Liberty Safeguards (DoLS). We noted that there were clear processes in the service for dealing with money and finances and saw evidence of these being adhered to by staff and management. In the home, the external door was secure and we were asked for identification on arrival, and to sign a visitor's book. We found that there were measures in place which ensured the security of the people living and working in the home.

## **2. Care and Support**

### **Summary**

People are involved in making decisions about all aspects of their life, and living in Llys Afon has improved their health and well-being. People's needs are also comprehensively assessed and detailed within a personal plan. Staff are competent and they understand, anticipate and support the individual's needs and preferences. Staff are further given clear guidance in relation to meeting people's needs and keeping them safe. Appropriate arrangements are in place for storing and dispensing medications. This means that people can feel confident they will receive the care and support they need to manage and improve their well-being.

### **Our findings**

People in Llys Afon get proactive and well informed support. We saw that arrangements were in place for assessing people's needs prior to their admission into the home, to ensure the home was a suitable environment for them. We viewed the resident's personal plans which we found detailed and up-to-date; staff were given clear guidance within the plans (and the accompanying risk assessments) about to how to meet people's identified needs and maintain safety. It was evidenced in the plans that the residents had been asked about their wishes and preferences. The care plans we saw also contained detailed life histories and comprehensive information to guide staff, and other health or social care professionals, in the care and supports required. Appropriate risk assessment and risk management plans were in place. The files were very well organised and regularly reviewed. We found that the service did monthly comprehensive reviews with each person and they contained not only the required formal reviews but also reflections on their physical and mental well-being and photos and accounts of activities and achievements.

People's medications are safely managed. We noted that medications were appropriately managed. We noted secure arrangements were in place for storing medications and supplements, which meant they were only accessible by those with authority and training to do so. Each resident had a dedicated file which contained information about the correct administration of the medications in accordance with what had been prescribed by the GP. Guidance was provided to the staff in relation to the administration of medicines, including 'PRN' (as and when required) medicines. We saw that all medication was daily checked by the manager and that audits were undertaken by management in relation to medication practices at the home, for the purposes of ensuring safe practices were being maintained. We also saw in people's files that any change or concern about their health prompted timely and appropriate actions, for example referrals to other health professionals. This demonstrates that the service takes steps to minimise risks associated with the management of medication, and ensures people are as healthy as they can be.

The support provided in the home helps people to reduce stressful behaviours. The statement of purpose set out the service's approach and philosophy about supporting individuals to manage behaviours that may adversely impact themselves or others. This was supported by a challenging needs and behaviour support planning policy. We saw behavioural management plans were in place for the individuals, which contained guidance to staff in identifying and reducing potential challenging behaviours. The plans were

informed by theoretical concepts regarding behaviour management which helped staff understand the cycle individual's underwent when they experienced challenging behaviours. There was an emphasis on recognising at an early stage signs that a resident may become agitated. We saw that staff had attended various behavioural management training which included theory and practice modules, and were tailored to the needs of the current residents. The staff we spoke with commented positively in relation to the training they received. Systems were in place for recording challenging incidents and behavioural patterns which informed the monthly comprehensive appraisals, and they were also reviewed with relevant professionals. The above shows that systems were in position to evaluate the effectiveness of the support strategies. We conclude that the service has robust internal processes for supporting individuals to manage behaviours which may challenge themselves and/or others.

### **3. Environment**

#### **Summary**

People live in a warm and clean home which is also personalised and appropriate for their individual needs. It is safe and well maintained.

#### **Our findings**

People live in a safe and well maintained environment which is suitable for the needs of them. The property provided suitable private and communal space for the residents to use, including a private rear patio with a sitting area. We observed that people were comfortable within their surroundings and presented as happy. We saw that resident's rooms had been arranged to help them maintain a level of independence whilst at the same time helping reduce their anxieties. We were told that the people had chosen their furnishings, and the colour schemes in the home, to their liking. People therefore benefit from living in a welcoming and homely environment.

The health and safety requirements of the home are overseen by management. We checked the records relating to health and safety and they indicated that appropriate maintenance and certification was in place for key facilities such as gas, electricity, water safety (to check for signs of legionella) and portable appliance testing (PAT). We saw that consideration to health, safety and maintenance formed part of the RI's recent quality monitoring reports. The fire records we viewed showed us that regular drills had taken place, staff and service users knew what to do in an emergency when we asked them about it. The grab folders for the service users were complete and contained recent and pertinent information. We also saw that various internal safety checks relating to fire safety were undertaken, such as in relation to fire doors, emergency lighting and fire equipment. A personal emergency evacuation plan (PEEP) was in place for the residents as well as an up to date fire safety risk assessment. Personal files, medications, sharps and other sensitive items were kept locked or otherwise stored appropriately. We saw the home's on-going maintenance schedule and were shown areas of improvement, for example some rooms had recently been painted and decorated. We found that people can be assured that their home environment is not only functional and in good order, but that all people associated with the service can feel confident that it is a safe place to live, work and visit.

## **4. Leadership and Management**

### **Summary**

Staff working in the home are well trained and supported by a hands-on, motivated and approachable manager. They are a consistent team with good communications and a focus on supporting the people living in the home to have the best outcomes possible. Good quality assurance measures are in place and the responsible individual has fulfilled their duties as required. People have a clear understanding of the service they can expect to receive. The service demonstrates a strong commitment towards continuous learning and development to improve outcomes for the people using the service.

### **Our findings**

Appropriate and satisfactory processes are in place to ensure that staff are suitable to work with vulnerable people. The staff files we examined contained the required recruitment information, such as employment references, proof of identification and valid Disclosure and Barring Service (DBS) checks. We noted that the staff induction was comprehensive and included not only learning modules but also shadowing in the home, so that new staff and residents could get to know each other. However, induction of staff has not been necessary since 2017 because there has been no changes in the staff team since then. The manager had schedules to oversee the training and supervision needs of the staff. Staff received training appropriate to their roles and there was oversight of when refresher training was due. This was further overseen by the RI in their quality monitoring report. We received positive feedback from staff we spoke with as regards the training and support they received, they felt they were well trained and supported for their role and also received specialist training to support people's special needs e.g. diabetes awareness and behavioural management. There were no agency staff employed in the service and staff covered absences for each other, with the help of two bank staff who have been working in the home for a long time. We looked at supervision records for all staff which they had regular supervision over and above the legal requirement. We saw that regular staff meetings took place to keep staff abreast of developments within the service and wider organisation. The home also had a suitable daily handover process and we saw the records of this. This showed us a culture of shared learning, reflection and development. People can feel confident that they are supported by staff who have appropriate knowledge and skills.

The home has satisfactory systems in place for auditing and quality assuring the service provided. We looked at RI quality monitoring visit reports which were comprehensive and informed by input from the manager, staff and residents. The report comprised a six monthly review of the quality of care in accordance with the current legislation. There was sufficient evidence to show that quarterly RI visits to the service from the outgoing RI had taken place and we heard that the incoming RI had visited the home just recently to get to know staff and residents. We noted that there were robust internal quality assurance systems and processes in place which enabled the service to self-evaluate and improve. There were clear systems for dealing with incidents and accidents and these were audited by senior management. We were informed by the manager that the home had received no



complaints but saw that the complaints policy was up-to-date and provision was made to deal with anything arising. We conclude that people benefit from a service which demonstrates an ongoing commitment to continuous reflection and improvement.

People can have a clear understanding of the service they will receive. A comprehensive statement of purpose set out the home's aims, values and how it intends to deliver a service to people. It also contained pertinent information about and from the provider. Due to the recent change of the RI this wasn't up-to-date on the day of the inspection. An easy-to-read guide was available for service users, containing the required information in relation to the service provided. We conclude that people benefit from a service that has clear aims and objectives.

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

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

This is the first inspection since the service was re-registered under the Regulation and Inspection of Social Care (Wales) Act 2016 (RISCA).

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

There were no areas of non compliance identified at this inspection, the service meets all legal requirements.

### **5.3 Recommendations for improvement**

The following recommendation is made to help the service develop:

- We suggest to update the Statement of Purpose with regards to the responsible individual information.

## **6. How we undertook this inspection**

We undertook an unannounced full inspection, the first for the agency since re-registration under the Regulation and Inspection of Social Care (Wales) Act 2016 (RISCA).

Information for this report was gathered from:

- an unannounced visit to the home on 9 May 2019
- conversations with the service users
- conversations with the manager, staff and the responsible individual
- observations of daily routines, care practices and activities in the home during the visit
- visual inspection of the home and the exterior
- examination of the care documentation relating to the two people using the service
- examination of two staff files to consider the recruitment process in place and the arrangements relating to supervision and training
- examination of records and policies held at the service including staff rotas, staff training matrix, supervision, privacy, safeguarding and other policies, complaints procedure etc.
- review of information about the service held by CIW
- review of the service's Statement of Purpose and Service User Guide
- review of the service's quality assurance system and reports

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## About the service

Type of care provided	Care Home Service
Service Provider	Accomplish group ltd
Manager	Rachel Wells
Registered maximum number of places	3
Date of previous Care Inspectorate Wales inspection	First inspection under RISCA
Dates of this Inspection visit(s)	09/05/2019
Operating Language of the service	English
Does this service provide the Welsh Language active offer?	Yes
Additional Information:	

Date Published 04/06/2019

