

**Care Inspectorate Wales** 

**Care Standards Act 2000** 

# **Inspection Report**

Mae'r adroddiad hwn hefyd ar gael yn Gymraeg / This report is also available in Welsh

Plas Garnedd Care Limited

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Type of Inspection – Focused Date(s) of inspection – Wednesday, 5 December 2018 Date of publication – Thursday, 24 January 2019

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### Summary

#### About the service

Plas Garnedd Care Limited (domiciliary care) is based in an office within the grounds of Plas Garnedd Care Home in Llanfairpwll, Ynys Môn (Isle of Anglesey). The organisation has a nominated responsible individual in place and the manager, Trevor Hughes, is registered with Social Care Wales. The service is registered with Care Inspectorate Wales (CIW) to provide personal care for people aged 18 years and over, with physical and/or learning disabilities, and people with dementia.

#### What type of inspection was carried out?

This was a focused inspection conduced to test the area of the service which had been identified at the previous inspection as not meeting the legal requirements of The Domiciliary Care Agencies (Wales) Regulations 2004. We visited the service on the 5 December 2018 between the hours of 12.00 pm and 13.45 pm.

The following methods were used:

- We spoke face to face with:
- the manager
- the responsible individual
- a team manager
- · We spoke on the phone with one care worker
- We reviewed the following records:
- the statement of purpose
- two staff files
- staff handbook
- staff induction pack
- safeguarding policy
- whistleblowing policy

#### What does the service do well?

We found the service had taken action to improve the area which we had identified at the last inspection as requiring attention.

#### What has improved since the last inspection?

The provider has improved the mechanisms in place to safeguard the vulnerable people to whom they provide support.

#### What needs to be done to improve the service?

No recommendations were made during this inspection.

## Quality Of Life

There are safeguarding mechanisms in place to safeguard people who use the service from abuse, harm and neglect. The responsible individual and the manager told us their safeguarding arrangements had developed since the last inspection. Examples were provided of staff working alongside social care professionals to safeguard people from harm, whilst also promoting people's rights and their independence. We were told improvements had occurred to staff's induction and training which ensured people were supported by staff with a better awareness of safeguarding principles. Changes had also been introduced at management level which improved their oversight of safeguarding within the service. These are detailed further within the Staffing and Leadership and Management section of this report. People are protected from harm and neglect.

## **Quality Of Staffing**

Improvements have been made to the arrangements in place to support staff's understanding and skills in relation to safeguarding. We saw safeguarding was given a much greater emphasis during the induction process. For example, staff were provided with clear written information regarding the signs and symptoms of abuse and how they should respond if they had any safeguarding concerns. The staff handbook, provided to all staff, highlighted staff's responsibilities in relation to safeguarding and whistleblowing. Additionally all staff received a copy of the service's safeguarding policy, which highlighted staff's duties and the procedures the service would follow in response. We saw a whistleblowing policy was in place to support staff should they need to raise any concerns regarding the conduct of their colleagues. The responsible individual told us they spent time on a one-to-one basis with all new staff to ensure they fully understood safeguarding and their individual responsibilities. This activity was documented within the induction framework followed and signed when completed. The staff we spoke with confirmed the arrangements in place for safeguarding people who use the service. We were informed all new staff completed online safeguarding training, within six weeks of commencing employment, and managers attended local authority safeguarding training. We discussed with the manager, and the responsible individual, their methods of monitoring staff's continued awareness of safeguarding, and we were told safeguarding would be included for discussion within staff supervision sessions and team meetings. People receive care from a service who is committed to constant improvement.

### **Quality Of Leadership and Management**

There is a willingness to learn from experiences and the oversight of safeguarding matters at governance level have improved. The manager told us that since the last inspection they took a greater role in decisions related to the commissioning of larger care packages. This was to ensure the service had sufficient staffing resources available to safely meet people's care needs. Fortnightly management team meetings took place and the responsible individual told us they intended to introduce safeguarding as a standard matter on the agenda at these meetings. This was to ensure safeguarding was consistently monitored at management level. People benefit from a service where the management act with due diligence and care.

# Quality Of The Environment

This section is not applicable to domiciliary care services.

### How we inspect and report on services

We conduct two types of inspection; baseline and focused. Both consider the experience of people using services.

• **Baseline inspections** assess whether the registration of a service is justified and whether the conditions of registration are appropriate. For most services, we carry out these inspections every three years. Exceptions are registered child minders, out of school care, sessional care, crèches and open access provision, which are every four years.

At these inspections we check whether the service has a clear, effective Statement of Purpose and whether the service delivers on the commitments set out in its Statement of Purpose. In assessing whether registration is justified inspectors check that the service can demonstrate a history of compliance with regulations.

• Focused inspections consider the experience of people using services and we will look at compliance with regulations when poor outcomes for people using services are identified. We carry out these inspections in between baseline inspections. Focused inspections will always consider the quality of life of people using services and may look at other areas.

Baseline and focused inspections may be scheduled or carried out in response to concerns.

Inspectors use a variety of methods to gather information during inspections. These may include;

- Talking with people who use services and their representatives
- Talking to staff and the manager
- Looking at documentation
- Observation of staff interactions with people and of the environment
- Comments made within questionnaires returned from people who use services, staff and health and social care professionals

We inspect and report our findings under 'Quality Themes'. Those relevant to each type of service are referred to within our inspection reports.

Further information about what we do can be found in our leaflet 'Improving Care and Social Services in Wales'. You can download this from our website, <u>Improving Care and</u> <u>Social Services in Wales</u> or ask us to send you a copy by contacting us.