



Inspection Report on

2 Glasfryn Terrace

Denbigh

Date Inspection Completed

11/06/2019

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Description of the service

2 Glasfryn Terrace is a care home which is located in a residential area of Denbigh and provides care and support for one person with a learning disability or mental health (functional) condition. The service is owned by Mental Health Care (Community) Limited and there is a responsible individual overseeing the service. The manager is registered with Social Care Wales.

Summary of our findings

1. Overall assessment

Overall, we found that people living at the service receive a good quality of care. People's independence is promoted and staff provide support as and when needed. They are able to express how they feel and make decisions and choices about the way they want live their life. There are plenty of activities available in the local community and people spend time socialising with their friends. The home is suitable to meet the needs of the person living there however, the garden area needs to be prioritised for people to be able to access and enjoy.

2. Improvements

The home was recently re-registered under the new Registration and Inspection of Social Care Wales Act 2016 (RISCA) and this was their first inspection under the new legislation. Any improvements will be considered as part of the next inspection

3. Requirements and recommendations

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

- Documentation: the hospital passport needs to include additional information that was recorded in the personal plan.
- Outdoor space: work must be completed as a priority to ensure people have a tidy, safe and attractive area that they can access.

1. Well-being

Summary

People have a say and are encouraged to be as independent as possible. They can pursue their own interests and make plans for what they want to do both now and in the future.

Our findings

People are able to express themselves and independence is promoted. We spoke to a person who told us that if they had any concerns they would *“talk to someone higher up”*. We saw minutes of key worker meetings, which provided an opportunity for them to have one to one discussions with a staff member about what was going well and any changes that were needed. We looked at a communication chart which informed staff about how to tell when the person was happy or not, reasons behind this and what staff should do. The person talked to us about their experiences of living in the home and how positive this had been. When asked what they liked most about living there they said *“freedom”*. The person, staff member and team leader told us about how independence had increased both at home and in the community since moving in. The person was able to walk to town, use public transport, attend college and socialise with their friends. Daily records showed their involvement in the menus, the shopping list, washing up, doing their laundry, going to college and travelling on the bus. Activity plans included preparing their own lunch and evening meal. On the day we visited, the person had arrived home to make their lunch and then went back out to participate in another activity and said they would be getting the bus home later on. They told us that since living there they had *“come on quite a long way”*. People are listened to and contribute to the running of their home.

People’s preferences are respected and their interests are encouraged. We found detailed information in a personal plan about an individual’s likes, dislikes and preferences. A one page profile included what was important to them and how best to support them. The personal plan identified interests the person had. They told us they were considering joining the local pool team and enjoyed socialising with friends in college and in the local pubs. They spoke about their favourite television programmes, films and we saw a collection of DVD’s in their room and in the lounge. Items were displayed around their home of their favourite football team, which they liked to talk about. We saw that staff had been matched to ensure people had shared common interests. We saw that the individual had been given the opportunity to experience additional learning by attending different further education courses which they obtained certificates of achievement. Also, on the day we visited, the person had been to college in the morning which they enjoyed. They told us they were due to finish college soon and would like to pursue the opportunity of employment which would further challenge their professional development. They said they were working on their CV as well as asking around in the local community for any work opportunities. Staff told us how they were supporting the person to help them work towards finding suitable employment. People can do things that matter to them and make plans for their future.

2. Care and Support

Summary

People are well supported by staff who understand them and respond to their needs in a positive way. Support is provided to people to remain healthy and make informed choices about their lifestyle. People have good relationships with staff and friends.

Our findings

People receive proactive care and support and their needs are anticipated. Detailed information was provided for staff, which included when and how to support people with their health and wellbeing. This took into account any diagnosis/ condition, a brief medical history, medication, monitoring and support the person needed with their health both now and in the future. We saw that health checks had been carried out including dental and eye appointments and an annual health review. General health records showed the person had been seen by professionals as and when needed. A hospital passport had been completed however; more information about the person's health conditions should be included in line with their personal plan. This was discussed with the team leader who said this would be amended. People receive the right care at the right time.

People have positive relationships. Information we looked at included a section on friends and community life. The person told us about socialising with their neighbours, friends at college and from the place where they had previously lived. They went out two nights a week playing pool and having a drink with their friends. Staff spoke fondly about the person and we heard them speaking with them in a friendly, relaxed and cheerful manner which was in keeping with their preference stated in their personal plan. People have good relationships with staff and other people.

3. Environment

Summary

People live in a home, which meets their needs, is decorated to their taste and is personalised. The garden area is in need of prioritising to ensure this is a pleasant and safe outdoor space for people to use.

Our findings

People are supported in a personalised environment. The home was suitable for the person living there. The person showed us around their home which consisted of a lounge, kitchen, shower room and bedroom. Photos, posters and items were displayed in the lounge and the bedroom reflecting their interests and people who were important to them. The person showed us their recliner chair in the lounge which they used to relax and watch their television.

We saw that some work was being done to improve the garden area however there was a lot of work still to be completed. We spoke with staff who said they had suggested a decking area and higher fencing between the home and their neighbours. We noticed that there was a lack of privacy between 2 Glasfryn Terrace and the house next door due to a low fence separating both two gardens. We did not find that this would afford people privacy when they were in their own garden. The statement of purpose refers to outside the property to the rear there is seating, split level paved areas with mature plants and shrubs. We found that the paved areas were uneven and other areas had also been dug up and left. Staff told us they had helped to improve the garden themselves and that people liked to spend time outside to socialise as well as having time alone. We spoke with the responsible individual about the timescales for completing this work, as the external grounds should be accessible, suitable and safe for use by the individual and appropriately maintained. We have not issued a non-compliance on this occasion as following the inspection the responsible individual provided assurance that this would be prioritised, provided CIW with a plan of work to be completed on the garden and a timescale for completion by the end of August 2019. People live in a home which meets their needs and supports them to maximise their independence however they must have a safe, pleasant and private outdoor area they can access.

4. Leadership and Management

Summary

People know they can raise concerns about the service. Staff understand their roles and receive training to support people effectively. They work together to ensure that people receive the right care, support and move towards more independent living. The service ensures that visits and audits are completed to identify areas for improvement.

Our findings

People know how to raise concerns. The person we spoke with told us what they would raise concerns if they were not happy. The Statement of Purpose, Service User Guide and complaints policy informed people how to raise any complaints and explained who and how these would be dealt with. The team leader told us that staff are encouraged to raise any concerns they have either with them, the manager or at staff meetings. According to the training record all staff have received training in safeguarding. People are able to express their concerns.

Staff understand their roles. We looked at one staff file which contained all the necessary information including Disclosure Barring Service (DBS) check and references. Training certificates evidenced training in equality and diversity refresher training, medicines in care homes, health and safety training including fire safety, infection control, manual handling refresher training and effective communication. Information we looked at confirmed the staff members mandatory training was up to date and specialised training had been identified and booked. The training record showed that all staff had completed training in mental health/ learning disability awareness and person centred planning. Supervision records show that supervisions had been completed as well as appraisals. Supervision forms included sections on *“what have you learned, what have you tried, what are you pleased about”* and *“what are you concerned about”*, to encourage and promote reflective practice. The team leader felt well supported by the manager and told us that the responsible individual was approachable and they could go to them with any issues. People benefit from a service where staff are well led and trained.

There are robust, transparent systems in place to assess the quality of the service. We were told that the responsible individual had visited the service on the 8th May 2019 and we saw the report for this. This evidenced that they had spoken to the person about where they had been and what they thought about their home. We looked at an audit file which showed that these had been completed for health and safety, infection control, medication and Control of Substances Hazardous to Health (COSHH). The team leader told us they had organised all the files so that everyone knew where to find the relevant information. The statement of purpose refers to actively offering the Welsh language by way of documentation and should a person want to be supported through the medium of Welsh this would be facilitated by the management team. People receive good quality care and support from a service, which is committed to quality assurance and constant improvement.

5. Improvements required and recommended following this inspection

5.1 Areas of non compliance from previous inspections

This was the first inspection of the service following re-registration under The Regulation and Inspection of Social Care (Wales) Act (RISCA) 2016.

5.2 Recommendations for improvement

The following are recommended areas of improvement to promote positive outcomes for people:

- The service should ensure that hospital passport documentation includes more detail regarding health conditions in line with their personal plan.
- The service must prioritise the garden area so that it is accessible, suitable and safe for people to use and is appropriately maintained.

6. How we undertook this inspection

This was the first inspection of the service following re-registration under The Regulation and Inspection of Social Care (Wales) Act (RISCA) 2016. A full inspection was undertaken as part of our inspection programme. We made an unannounced visit to the service on 11 June 2019 between 10:50 a.m. to 15:30 p.m.

The following methods were used:

- We spoke with one person living at the service.
- We held discussions with one support staff and the team leader.
- We looked at a range of documentation. We focused on one personal plan, reviews, daily records, one staff file, training and supervisions records and the Service User Guide.
- We examined the Statement of Purpose (SoP) and compared it with the service we inspected. This sets out the vision for the service and demonstrates how, particularly through the levels and training of staff, etc., the service will promote the best possible outcomes for the people they care for.

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	Mental Health Care (Community) Limited
Manager	Trudi Martin
Registered maximum number of places	1
Date of previous Care Inspectorate Wales inspection	29/06/2018
Dates of this Inspection visit(s)	11/06/2019
Operating Language of the service	English
Does this service provide the Welsh Language active offer?	Working towards
Additional Information: The service is working towards the Welsh Language Standards and able to provide some information bilingually.	

Date Published 24/07/2019