

# **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

Tyddyn Môn

**Amlwch** 

Type of Inspection – Full
Date(s) of inspection – 5 September 2018
Date of publication – 13 November 2018



## Summary

#### About the service

Tyddyn Môn is a domiciliary care agency registered with Care Inspectorate Wales (CIW) to provide support for people with learning disabilities. People receive a service either in their own homes or in shared accommodation. Tyddyn Môn also provides a range of support work placements for people with learning disabilities; this part of the service in not regulated by CIW. The agency's office is located on a working farm in Anglesey. There is a responsible individual nominated by the company and the manager is registered with Social Care Wales.

### What type of inspection was carried out?

We, CIW, visited the agency on 6 September 2018 between the hours of 09:15 am and 12:15 pm and we returned on the 12 September 2018 between the hours of 09:30 am and 12:30 pm. This was a scheduled full inspection looking at the themes of quality of care, quality of staffing and the quality of leadership and management.

We used the following inspection methods:

- An arranged visit to a property where three people live and receive support. We spoke with three people who use the service and four members of staff. Care documentation and risk assessments were also viewed.
- An announced visit to the agency's offices, discussions were held with the registered manager and the responsible individual. We looked at documents relating to the operation of the agency, including staff recruitment records, the staff training matrix, staff supervision records and a sample of policies.
- We provided CIW postal questionnaires for people who use the service, their relatives, staff and professionals who come into contact with the service. At the time of writing this report 20 completed questionnaires had been returned to us; five from people using the service, six from relatives of people who use the service, six from staff who work at the service and three from professionals in contact with the service.

#### What does the service do well?

We identified the following as areas where the service is doing well:

- Supporting people to fully maximise their independence and to engage with their local community.
- Supporting people to progress to increased independent living.
- Supporting staff in their roles

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

Since the last inspection the following improvements have been made at the service:

- The annual quality of care report is made available to all service users. This means people can see the service provided is being monitored.
- Staff are meeting formally with their line manager, at least once every three months.

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

We identified the following areas where practice could be further developed and improve the service provided:

- Full previous employment details should be recorded for all staff members, including long standing staff members, in order to fully meet the requirements of the regulations.
- Staff files should record their linguistic abilities, in order to fully meet the requirements of the regulations.

# **Quality Of Life**

In summary, people are able to take part in varied and new activities both within the service and the wider community, with support provided by well liked staff who prioritise promoting people's health and independence.

People are encouraged to learn new skills and to do as much as possible for themselves. We saw people were involved in all aspects of daily living such as budgeting, shopping, cleaning and cooking. One person told us they greatly enjoyed preparing the household's evening meal, with staff providing minimal support when needed. Outcome focused care plans were in place and they recorded what people could do for themselves, how they would be supported to promote their independence as well as the tasks people required staff's support. Staff told us they felt "proud" of people's achievements in developing their independence and provided examples of people who had successfully moved on to more independent living. A professional in contact with the service told us, in a completed questionnaire "the agency promote active support...and enable people to achieve their personal outcomes". We saw risk assessments were used and reviewed to record the identified risks to people's health and safety and the measures in place to manage these risks. People's potential and independence are maximised.

People get on with and like the staff who support them. A person using the service told us "my staff are all lovely" and we saw they were happy and relaxed in staff's company. People confirmed in completed postal questionnaires we received staff completed their work "well", "very good" and they were "happy" with the service they received. We saw staff interact in a warm, kind and respectful manner with people, adapting their communication styles to suit each individual's needs. Some staff told us they had worked at the service for many years, therefore they knew people's needs very well and were familiar to the people who used the service. Professionals in contact with the service told us, in completed postal questionnaires "staff have a pro-active approach" and "staff are supportive and professional in all that they do". People have safe and positive relationships with staff who support them.

People are as healthy as they can be because they receive proactive and preventative care and support. Care plans record people's individual health conditions and how staff could best support people to keep well. People were supported to have their medication as prescribed and to attend routine health appointments, which helped to keep people well. Staff explained how they advocated on behalf of a person when they were in hospital which assisted the person to receive appropriate treatment. We saw people were encouraged to choose healthy and nutritious meals with support provided to plan, shop and prepare their meals when required. Relatives told us, in completed questionnaires we received, "my relative is well cared for, their needs are met". People are supported to be as healthy as they can be.

People are able to participate in activities and explore new challenges. People's interests were recorded within their care plans which enabled staff to provide person centred activities. One person we met enjoyed swimming; they were supported to compete in national events and were very proud to show us their winning medals. Another person enjoyed darts and pool and was regularly supported to play pool at a tavern. One person

was benefiting from volunteering within a local luncheon club; they told us "I love helping others, meeting new people and having things to do". We saw people had taken part in the annual Tyddyn Mon cooking competition which included each individual supported living setting. People had worked as a team to prepare a themed two course meal using locally sourced ingredients, which were then judged by local celebrities. People told us they'd had "an amazing time", "best day ever" and staff told us the people who took part had a great sense of achievement. A professional in contact with the service told us, in a completed postal questionnaire "their inclusive and positive approach has made a real difference to people's lives". People are able to do things they enjoy.

## **Quality Of Staffing**

In summary, people are supported by familiar staff, who feel supported and receive relevant training related to their roles.

Robust systems are in place to ensure new staff are suitable to work with vulnerable people. We saw pre employment checks were completed before new staff commenced employment, which included requesting references from previous employers and Disclosure and Barring Service (DBS) checks. We saw the full previous employment history of staff, including dates, were not always stored within staff's files, as is required. We discussed this with the registered persons who told us this information was available for the majority of staff and they would ensure it was also available for long standing staff as well. We also advised staff's linguistic abilities should be recorded on file, which is also required. The manager assured us this would be addressed. We saw people who use the service were involved in the interview process for new staff and were able to ask perspective new staff the questions that mattered to them. All new staff completed a six month probationary period and follow the Social Care Wales induction for social care workers which help to prepare staff for working independently with the people they support. People benefit from a service where staff are recruited safely.

People receive their care and support from a consistent team of staff. The staff we spoke with confirmed they usually worked with the same group of people which enabled them to build a rapport with people, become familiar with their specific care needs and to provide a continuity of care. The deputy manager told us they used a pool of relief staff to cover any staff sickness and managers will also cover shifts if required. This meant the least disruption possible to people who use the service. Managers told us they that when they covered shifts themselves they took the opportunity to check the service was running as safely and effectively as it should be. We saw some staff had worked for the service for over ten years and they told us "I love my work as much now as I did when I started." A professional in contact with the service told us, in a completed postal questionnaire, "staff are always reliable and consistently professional". People have safe and positive relationships.

People are supported by staff who feel supported and valued by management. At the last inspection we recommended staff should receive official supervision from a manager at least every three months and at this inspection we saw action had been taken to improve this area of staff support. Staff had also received an annual appraisal. We saw the manager was also receiving regular supervision from the responsible individual and they told us they felt supported in their role. Staff told us they were able to speak with a senior staff member or a manager when they needed to for any advice or support in between their supervision sessions. We saw staff interacting well together and working as a team during our visit. People benefit from a service where the well-being of staff is given priority.

People receive care and support from staff who receive relevant training. Staff told us *"I've had the correct training to help me feel confident in my role"*. Training records indicated all staff had received training in areas such as food hygiene, moving and handling, medication awareness and fire safety. The manager told us there were plans

for all staff to receive training in relation to the Mental Capacity Act in the near future in order to improve staff's awareness of this legislation. People benefit from well trained staff.

# **Quality Of Leadership and Management**

In summary, people are supported by a service who are committed to quality assurance, developing their Welsh language provision and who have systems in place to receive and respond to complaints.

People receive care and support from a service who sets high standards for itself. We saw there were systems in place to measure the quality of the service provided which included gathering feedback from people who use the service and other relevant people. We saw an annual quality of care report (dated 2017) had been produced to reflect the findings of the survey conducted and included action plans in response to the information received. We saw this report was made available to people who use the service, written in an easy read format, which assured people the service was listening to what people said. The annual quality of care process was currently underway, and the 2018 report would follow in due course. The manager and responsible individual told us they were considering different ways of gathering feedback from people regarding the service they received, so as to invite a wide range of response. This indicated they were keen to engage with as many people as possible, and seek their views on how the service could be improved. A professional in contact with the service told us, in a completed postal questionnaire "(they are) always looking for new ways of working and are always open to new options and approaches". Relatives told us in completed postal questionnaires "Tyddyn Mon provides an excellent service" and confirmed the service was "well managed". People using the service are able to contribute to the improvement and development of the service.

There are systems in place to receive and respond to any concerns raised. One person we spoke with told us they knew who to speak with, if there was anything at all they were not happy with, and they were confident something would be done in response. People also confirmed, in completed postal questionnaires we received, they knew how to raise a concern. We were told a complaint policy was available in every supported living setting which informed people, in an easy to understand format, of how to raise a concern and the response they could expect. The manager told us they visited each supported living service on average every two weeks in order to speak personally with every person who received a service and to check they were happy with the service the received. No complaints had been received over the past 12 months. A professional in contact with the service told us, in a completed postal questionnaire "the agency is very responsive and deal with matters in a timely way". People are able to express their concerns.

Written information regarding the service provided and what it sets to achieve are available. We saw a statement of purpose and a service user guide which were easy for people to understand, and clearly explained the service they could expect to receive. We saw the service user guide was available in Welsh and the statement of purpose was in the process of being translated. People understand the care and support which are available to them.

People can receive a partial service in the medium of Welsh and the service remain committed to developing this aspect of their service. Since the last inspection they have

tried to recruit Welsh speaking staff, but this had been difficult. Subsequently a translator had been successfully employed and their role included providing Welsh lessons for existing staff. The manager, who is a Welsh speaker, told us Welsh speaking staff were provided to people who are Welsh speaking, whenever possible and they were striving to improve their ability in this area of the service.

# **Quality Of The Environment**

This Theme is not considered within domiciliary services inspections.

## 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, Improving Care and Social Services in Wales or ask us to send you a copy by contacting us.