



Inspection Report on

Windsor Street

Aberdare

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Description of the service

Windsor Street Care Home is situated in Aberdare. The service is registered with Care Inspectorate Wales (CIW) to provide personal care and accommodation for two adults aged 18 years and above who have a learning disability. The care home is owned and operated by Planned Residential Support Services Limited (PRESS) and the provider has nominated a responsible individual (RI) who has overall responsibility for the quality and performance of the service. The appointed manager has been in post since August 2018 and is being supported in her role by senior management, while completing the required management qualification to register with Social Care Wales, as per legal requirements.

This is the service's first inspection since registering with CIW.

Summary of our findings

1. Overall assessment

The service offers comfortable accommodation and good support for residents at the home. People are able to make choices in their daily lives and are enabled to maximise their potential. Staff appear content in their work and have good relationships with the residents. The service's induction and training of staff is robust and tailored to meet the needs of those receiving care and support. However, staff supervision is not up to date and requires attention. There are suitable arrangements in place to monitor the quality and effectiveness of the service provided and to ensure the environment is safe and well-maintained.

2. Improvements

This is the service's first (post-registration) inspection.

3. Requirements and recommendations

Section five of this report identifies areas where the service is not meeting legal requirements and also sets out our recommendations for improving outcomes of care for residents. These relate to:

- staff supervision,
- the home's Service User's Guide and
- the need for thorough completion of documentation and daily recordings, including residents' social activities and staff recruitment information.

1. Well-being

Summary

People receive one-to-one support for all aspects of their care. Management and staff ensure they are safe while encouraging them to lead fulfilled lives. The service assists residents to make choices and to take part in activities which promote learning and social development.

Our findings

People receive safe care that maximises their well-being.

We visited the home and found each resident in the company of a support worker. The atmosphere in both flats was calm and the residents were engaged in their chosen pastimes. We examined their care files and saw that person-centred risk assessments had been put in place in accordance with their specific safety needs. These included assessments of falls, smoking, going out in the car and undertaking household chores. We viewed residents' Positive Behaviour Support Plans which provided staff with detailed information about specific behaviour triggers for each person and guidance on how behaviours that challenge should be effectively managed. During our discussion with the RI and appointed manager, we recommended that staff should sign the plans as evidence that they had read and understood the contents. The RI agreed to implement this as good practice.

We saw evidence that authorisations had been obtained in respect of Deprivation of Liberty Safeguards (DoLS). This legal process ensures that care and safety arrangements for people who lack mental capacity to make informed decisions about their own health and/or welfare needs are proportionate and in their best interests. One care file we viewed indicated that the person had a professional advocate involved in their care to support their full engagement and participation in determining their well-being goals. We were able to chat briefly with one of the residents who told us they enjoyed living in their flat.

We conclude that the service ensures people's rights and choices are respected while promoting their safety. Further evidence of safety measures taken are described below.

People are supported to lead active lives.

During our visit we found that residents had opportunities to engage in a variety of social activities. These included pottery, cookery and dance classes in the community and the RI informed us that one of the residents had recently started attending one of the classes. People were able to go shopping with staff and one person enjoyed walking up to the town. Trips to the cinema were also arranged. The RI informed us that one resident had made very good progress socially, as prior to their move to Windsor St, they had not wanted to go out of doors. We saw that residents' activities were recorded daily in their diaries although we recommended that staff devise care plans in respect of social activities and review the effect of each activity in which they participate on the mood of the resident concerned. This would indicate whether or not they were benefiting and achieving their specific goals of care.

We saw that residents were encouraged to participate in activities and chores around the home. Recordings in care files described residents' practical skills and their daily participation (or otherwise) in housework tasks. These included meal preparation and clearing, and ironing.

We conclude from our findings that the service successfully promotes residents' skills and social interactions.

2. Care and Support

Summary

People receive support which is tailored to their individual needs. Staff monitor residents' food and fluid intake and carry out regular weight recordings. There is evidence of involvement from other health and social care professionals as required. Care planning is of a good standard and kept up to date.

Our findings

People benefit from close monitoring of their health and general well-being.

Through examination of care files we saw that staff documented what residents ate each day and recorded it on a weekly food chart. Their dietary likes and dislikes were noted and a variety of meals were provided which reflected consideration of healthy food options as well as residents' preferences. People were weighed on a regular basis and any weight loss reported. Fluid intake was also monitored to prevent dehydration or other medical complications resulting from insufficient fluids. We recommended that staff record each resident's target weight and daily fluid intake at the top of the charts so that any shortfalls could be easily identified.

We saw that care files were well-ordered, allowing easy access to information. It was recorded that each resident's service plan would be reviewed every three months and a full annual review would be undertaken with the resident and other professional involved in their care.

We conclude that the service maintains a good standard of daily support and is able to evidence this.

People have access to medical support and advice as required.

While viewing residents' care files we saw that multidisciplinary health professionals were involved in residents' care. These included the GP, a speech and language therapist, chiropodist and psychologist. There was evidence that resident's chronic health conditions were regularly monitored by staff at the home and any instructions from medical professionals following assessments were adhered to. Detailed information was recorded following each professional's visit. We also saw that residents were able to attend hospital out-patient appointments as needed.

Our findings indicate that the service appropriately involves relevant health professionals to ensure residents maintain optimum health.

3. Environment

Summary

People live in a homely environment and are supervised in accordance with their assessed needs. This support, along with robust environmental maintenance checks and monitoring, ensures that residents' safety is prioritised.

Our findings

People live in comfortable accommodation which meets their needs.

After an initial visit to the provider's office base in Ebbw Vale, we visited the care home.

This consisted of two self-contained, one bedroom flats. The RI had previously advised us that the premises were rented from a private landlord who was responsible for all servicing and maintenance work at the property. Information already sent to CIW confirmed that this was up to date. We spoke with one of the residents who was keen to show us around their home. The bedroom was decorated according to the resident's taste and requirements and we saw that the well-equipped kitchen provided sufficient room for meal preparation and was designed with safety in mind. Medication was kept in a designated locked cabinet on the kitchen wall.

Both flats had their own garden area with artificial turf laid, which provided residents with opportunity to sit out of doors during fine weather. We saw that residents appeared at ease in their respective flats and received one-to-one support from members of staff.

We conclude that the service provides its residents with suitable and well-maintained living space.

The environment promotes people's safety and well-being.

Prior to the commencement of the service, a regulatory reform (Fire Safety) Order 2015 risk assessment was undertaken in February 2018. The report provided by the fire officer indicated that there was good emergency access to all areas of the building and that there was a full domestic sprinkler system installed which covered all rooms and corridors within the building. It was noted at the time of the assessment that other environmental improvements and safety features required attention, which included the absence of an intumescent strip and smoke seal on one of the fire doors. However, CIW received confirmation in March 2018 that the work had been completed and the fire officer had no further concerns.

We found that one of the residents who smoked was permitted to do so in the rear garden of the property, while being supervised. All cigarettes and lighters were held by the staff and provided to the resident on request. A smoking policy and risk assessment were in place. Through consideration of staff personnel files and training records, we found that all staff had been provided with Emergency Procedures and Fire Safety training as part of their induction. We saw evidence that weekly fire checks were undertaken and three monthly fire drills were carried out (last performed on 6/8/18). Fire alarms had been serviced on 24/8/18. We examined the service's Health and Safety file and found evidence of other regular environmental checks which included temperatures of the fridge/freezers, medication room, cooked foods and hot water. We noted that the Food Standards Agency had awarded the service with a food hygiene rating of 4 which indicates "good."

Our findings indicate that the service is able to keep its residents safe from harm.

4. Leadership and Management

Summary

The service is currently without a registered manager although the person appointed to this role is working towards the appropriate qualifications to register with Social Care Wales (SCW) in order to meet legal requirements. Staff receive training relevant to their roles and to the residents' needs. The service's recruitment process is satisfactory although information could be better evidenced. Attention needs to be given to ensuring all staff are regularly supervised in their work.

Our findings

People receive a well-led service but would benefit from clear and relevant written guidance about the support and facilities available to them.

Following the resignation of the service's registered manager, a trainee home manager was appointed on 1 August 2018 who, at the time of our visit, was undertaking the necessary management training to register with SCW, as per legal requirements. She was being supported in her role by a senior manager and the service's RI. Through conversation with the appointed manager, we found that she had a good knowledge of the residents' needs and felt supported in her role. The RI informed us that he undertook bi-monthly audits at the home but we did not view reports of these quality monitoring visits during our visit nor have they been sent to us as requested following the visit. This matter will be followed up at our next inspection.

We reviewed the home's Statement of Purpose and Service User's Guide. These are important documents which should provide people with detailed information about the services and facilities offered within the home. They should also outline the home's underpinning philosophy and approach to care delivery. We found the Statement of Purpose document was detailed and up to date, but the Service User's Guide needed to be altered as it was not specific to the requirements of the residents at Windsor Street. We discussed this with the RI, who was aware of the deficit. He advised us that the Service User's Guide would be revised as soon as possible.

The service is committed to providing an effective service that is managed well but documentary evidence of such needs to be improved.

On the whole, staff are recruited safely and receive training appropriate to their roles.

We examined a sample of staff personnel files and found that information had been sought in respect of employees' identity and criminal record checks, and relevant references had been obtained. Contracts of employment and job descriptions were also evident. However, one application form we viewed indicated there were gaps in the candidate's employment history. We discussed the matter with the RI who informed us that the missing information had been sought. We advised, nevertheless, of the importance of evidencing this in accordance with regulatory requirements.

We saw that on commencement of employment, staff were provided with a robust induction programme which covered a variety of topics including health and safety, lone working, confidentiality and recording skills. Regular training courses were also arranged in respect of residents' generic and specific health needs. Examples included first aid, positive behaviour management, mental capacity, care of medicines and dementia awareness. The RI provided us with a training matrix which indicated which courses each support worker had completed and when initial training or refresher courses were due.

Our findings indicate that the service employs staff who are suited to their roles and are trained to deliver safe care to residents.

People cannot be confident that staff are supervised in their roles.

Through examination of staff personnel files and discussion with the RI, we found that staff supervision sessions had not been undertaken in accordance with regulatory requirements. Supervision in this context refers to a member of staff meeting on a formal, confidential, one-to-one basis with their line manager in order to discuss their performance, their training requests and/or needs, and any concerns they may have. The RI advised us that staff supervision had been neglected under the previous manager and he would ensure that sessions recommenced without delay. We will follow up on this matter at a future inspection.

We conclude that the service is not currently able to evidence that its staff receive the necessary support in their roles, which in turn is required to ensure residents receive the best possible care.

5. Improvements required and recommended following this inspection

5.1 Areas of non compliance from previous inspections

This was the service's first inspection.

5.2 Areas of non-compliance identified at this inspection

The service is in breach of the following regulations as cited in the Care Homes (Wales) Regulations 2002:

- Regulation 5 (1): The service does not have a Service User's Guide that is specific to the requirements of the residents;
- Regulation 18 (2): Staff at the home are not receiving regular formal supervision;

We have not issued non-compliance notices on this occasion as the RI was aware of the deficits and has informed us he will take prompt action to address the failings. These will be followed up at a future inspection.

Recommendations for improvement

- Staff should sign residents' Positive Behaviour Support plans to indicate that they have read and understood the contents;
- Devise care plans in respect of residents' specific social activity needs and regularly review the effect of these activities on their mood and well-being.
- Record residents' optimum weight and daily target fluid intake on the relevant charts;
- Provide evidence that gaps in a prospective employee's employment history have been followed up and accounted for.

6. How we undertook this inspection

We visited the service on 11 September 2018 in order to undertake a post-registration inspection. We considered the well-being of residents living at the home, the care and support they receive, the leadership and management and the environment. In order to compile our report, we used the following methodology:

- Consideration of information held by CIW in respect of the service;
- Discussion with the RI and appointed manager;
- Brief conversation with one of the residents,
- Examination of resident care files;
- Consideration of documentation relating to the maintenance and safety of the home;
- Examination of a sample of staff personnel files, including recruitment, induction and training information;
- Visual inspection of the premises to which residents have access.

Further information about what we do can be found on our website:

www.careinspectorate.wales

About the service

Type of care provided	Adult Care Home - Older
Registered Person	PRESS - Planned Residential Support Services Limited
Registered Manager(s)	Position vacant
Registered maximum number of places	2
Date of previous Care Inspectorate Wales inspection	N/A
Dates of this Inspection visit	11/09/2018
Operating Language of the service	English
Does this service provide the Welsh Language active offer?	No
Additional Information:	