



Inspection Report on

Ty Carreg

**Ty Carreg
Barry
CF62 4JA**

Date Inspection Completed

26 February 2020

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Description of the service

Ty Carreg provides care for 12 people aged 18 to 65 years who have a learning disability and needs associated with autistic spectrum conditions. The home is owned and run by Orbis Education and Care Ltd and the responsible individual is Sally Spillane. There is a manager in place who is registered with Social Care Wales (SCW).

Summary of our findings

- **Overall assessment**

People have a voice and can influence their care and environment. They are safeguarded and live in a suitable environment. People have positive relationships with suitable numbers of staff, who follow their plans and support them to be healthy and happy. Staff are supervised and trained and agency staff use is reducing. Leaders respond to external scrutiny and quality assurance is used to improve the service.

- **Improvements**

- Staff are following people's plans;
- Use of agency staff is reducing;
- Most staff are receiving timely supervision;
- Meal options are more healthy;
- People are going out on activities because there are enough staff in place.

- **Requirements and recommendations**

Section five of this report sets out our recommendations to improve the service. These are in relation to essential information, healthy food options, activity planners and verification of qualifications.

1. Well-being

Our findings

People have a voice. A range of processes were in place which supported people to express their views and people's communication needs were understood and met by staff. Some people had participated in a house meeting and one person represented the home at the service user forum where they had contributed to the development of the service's key working policy. People made daily choices in relation to activities and meals and how they wished to be supported and they were able to influence their environment. People are listened to and they can make choices.

People are supported to optimise their health. Staff followed the service's policies which meant that people were accessing appropriate, timely health care. People were encouraged to take physical exercise and to eat healthily and staff supported people to manage their anxieties by giving them some control over their daily lives and by providing reassurance. Staff knew people well and used appropriate diffusion methods to help them to manage their behaviour and its associated distress. People were settled at the home and looked forward to their visits with family/carers and friends. Overall, staff support people to be as healthy as they can be.

Staff follow the policies which safeguard people. The manager had followed the service's safeguarding policy and had undertaken follow up action which had safeguarded people living in the home and also resulted in positive partnership work and safe protocols being developed. Staff were trained and familiar with their responsibilities and regular checks ensured a safe environment. People were able to communicate with staff who were observant of changes in their demeanour and people regularly met with trusted family members outside of the home. People are safeguarded.

Overall, people live in a home which provides for their varying needs. People had access to clean, private and communal spaces. The lay out of the home meant that they were able to practice independence skills such as cooking and doing laundry. People were able to access the local shops and had the benefit of walking in the countryside around the home. Leaders ensured that repairs and privacy issues were attended to and that arrangements were in place to maintain relationships with neighbours. The home is suitable for people's needs

2. Care and Support

Our findings

People receive the right care at the right time because staff follow the care plans in place. People's files contained detailed positive behaviour support plans which outlined their routines for different times of the day. Files also contained their likes/dislikes and their presentations when calm and elevated with the required staff responses. Records showed that staff had supported people to follow their daily routines which provided consistency and stability for the people being cared for. We also observed staff supporting people by using their visual schedules and by communicating clearly. Staff were able to anticipate people's requests and behaviour and guided people towards safe options. Staff know people well and they follow their plans to assist them in achieving positive well-being.

People have positive relationships with staff and they maintain relationships with important people in their lives. We observed staff relating to people with warmth, humour and respect. They praised and encouraged people and were responsive to people's particular requests for playful interactions. People were encouraged to talk about their interests, which staff were familiar with and they provided reassurance to allay anxieties. Records showed that people had been visited by family and carers and had also been transported by staff to spend time with them overnight on occasions. People were excited about seeing their family which was part of their weekly routine. People have good relationships with staff and they enjoy time with their family and carers.

People are safeguarded. There had been three safeguarding referrals since the last inspection, two of these had been closed and one was awaiting an internal investigation. The manager had taken appropriate action to safeguard people when concerning information had been received and preventative measures were in place in relation to the environment, to try and reduce the possibility of further safeguarding issues. A referral which had involved an incident at a local hospital had resulted in positive partnership work between the two agencies and a clear protocol being established. The updated risk assessment format for outings continued to be used and people's risk assessments were regularly reviewed. People's files contained essential information sheets, however, the information regarding DoLs (Deprivation of Liberty Safeguards) status needed to be updated. Staff follow the service's policy to safeguard people living at the home.

People are supported to maintain a healthy lifestyle. People's files contained health action plans and information about people's registration with primary and specialist health services. Records showed that people had attended regular appointments with the GP, dentist, optician and follow up action had been carried out by staff. Meal options were, on the whole, more healthy, though the consumption of high fat take away meals could still be further reduced. People were taking part in regular physical activity to varying degrees and the RI was taking action to address the issue of personal cars to increase people's opportunities to take part in activities away from the home. Records showed that staff had followed the Positive Behaviour Support (PBS) plans which helped people to manage their behaviour and return to a more calm presentation. They had taken steps to address particular environmental triggers and records showed that some people had made progress in starting to open up and talk about their anxieties. The people we observed were settled

and enjoying their activities and time with staff. Staff support people to optimise their physical and emotional health.

3. Environment

Our findings

The home is suitable for people's needs. The home provided a mixture of modern self-contained flats and rooms with shared facilities. Some people had personalised their spaces with family photos, posters and their favourite toys and objects while other people's environments were minimal to meet their particular needs. The bathrooms were in the process of being cleaned; one bathroom smelled of urine; we were told that the odour was difficult to eradicate as it was in the drains. People's rooms and the kitchen and communal areas were seen to be clean and hygienic. The home was subject to high wear and tear and a number of areas required repair work. One bedroom had the small remains of wood and screws on the wall where damaged items had been removed; we recommended that these residual remains were also removed. We were advised that more suitably hard wearing replacement furniture was being sourced and that repairs would be carried out when people were away from the home to aid safety. The development of the garden area had been put on hold due to the registration and planning requirements of the local authority. People live in a suitable, developing home.

People live in a safe home. Records showed that regular safety checks had been carried in relation to health and safety and that people's personal evacuations plans were up to date. Regular fire drills had been conducted and the manager had undertaken action in relation to environmental concerns expressed by neighbours and the disposal of confidential information. Health and safety needs had been protected by action taken to ensure safe access to a computer and television and a request for bespoke repairs to windows to meet particular needs. Leaders ensure that safe practices are in place to provide a home where people can feel safe.

4. Leadership and Management

Our findings

People are cared for by staff who are safely recruited, trained and supervised. Staff files showed that safe recruitment processes were in place and that safeguarding was a feature of the interview and supervision process. One file we viewed did not have all the documentary evidence in relation to qualifications so we recommended that this was followed up. Nearly all staff had been supervised in the previous two- month period, though the level had not been sustained in the most recent supervisory period. Almost all staff were up to date with their mandatory training and staff who were not compliant were booked onto courses. Records showed that the use of agency staff was reducing; most of the agency staff were consistent and therefore familiar with people living at the home. A recruitment drive had reduced the number of vacancies and rotas showed that on occasions the staff numbers were over that of the required numbers. Overall, people receive care from consistent, trained staff whose access to supervision is improving.

The service has suitable quality assurance systems in place and action is being taken to improve the service. Records showed that the RI had carried out regulation 73 visits which evidenced a range of audits and clear directions, though the consultation with people living in the home was limited. Quality assurance reports were in place which highlighted progress and areas for further development. The RI and the area manager were supporting the manager to address the comprehensive corrective action plan in relation to the Joint Interagency Monitoring Panel. Records showed that the service had worked in partnership with the professionals monitoring the service and that progress had been made. People benefit from a service which is using quality assurance to improve.

5. Improvements required and recommended following this inspection

5.1 Areas of non-compliance from previous inspections

<ul style="list-style-type: none">• The service is not meeting regulation 34(a)(b)(c) because there are not always sufficient staff to take people to the activities identified within their weekly planners which are aligned to their personal plans in terms of optimising their well-being. .	This non-compliance has been met.
<ul style="list-style-type: none">• Staff do not always follow people's personal plans which results in emotional distress for people.	This non-compliance has been met.

5.2 Recommendations for improvement

We recommend that:

- Information on essential information sheets is regularly updated;
- Healthy food choices are further promoted with a reduced use of take away food;
- Activity planners accurately reflect people's activities for the week;
- Staff files contain verification of all staff qualifications.

6. How we undertook this inspection

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	Orbis Education and Care Limited
Manager	Gavin Davies
Registered maximum number of places	12
Date of previous Care Inspectorate Wales inspection	12/09/19
Dates of this Inspection visit(s)	26/02/2020
Operating Language of the service	English
Does this service provide the Welsh Language active offer?	No, the service does not provide the Welsh language active offer.
Additional Information:	

Date Published 30/07/2020