



Inspection Report on

61 Clive Street

**61 Clive Street
Cardiff
CF11 7HL**

Date Inspection Completed

2nd July 2019

Welsh Government © Crown copyright 2019.

You may use and re-use the information featured in this publication (not including logos) free of charge in any format or medium, under the terms of the Open Government License. You can view the Open Government License, on the National Archives website or you can write to the Information Policy Team, The National Archives, Kew, London TW9 4DU, or email: psi@nationalarchives.gsi.gov.uk
You must reproduce our material accurately and not use it in a misleading context.

Description of the service

61 Clive St. is a care home that is situated in the Grangetown suburb of Cardiff. It is a family owned care home providing accommodation and personal care for up to 6 people who have mental health and substance misuse care needs. The service has a sister home next-door that accommodates 32 residents the services are run as one although they are registered separately. It is not a purpose built home, but the owners continually make efforts to improve the environment. The owner and the responsible individual of the service is Mr Ibrahim Yahia.

Summary of our findings

1. Overall assessment

People like living at Grange Lodge Residential Home and they receive a good service. An experienced and enthusiastic management team who maintain a culture where people are placed at the heart of the service manages the home. Care workers are motivated and demonstrated a sound knowledge of the people they supported and an in depth understanding of the challenges they faced. People live in an environment that is homely and welcoming. People living at the home and their relatives were enthusiastic about the home and the staff.

2. Improvements

This was the services first inspection for the service under the Regulation and Inspection of Social Care Wales Act 2016.

3. Requirements and recommendations

- The provider must ensure that people's medication files have an up to date photograph.
- Communication between shift changes should be documented in a format and way that is easy for staff to record and access when needed
- The statement of purpose document and service user guide would benefit from being updated to reflect the individuality of the service provided.

1. Well-being

Our findings

People's best interests are understood and met through promoting independence and positive risk taking. We saw care plans were individualised and promoted independence. People's care and support needs were up to date, being reviewed and understood by all care workers working in the home. People living at the home were complimentary of care workers and felt confident they were being well supported. We saw good relationships were being maintained, and saw care workers treated people with dignity and respect throughout the inspection. Individual risk assessments safeguarded people from risk without being over protective. We saw a number of people who lived at the service who chose to engage in activities that could be viewed as high-risk behaviour for example continued substance abuse and using alcohol unsupervised outside of the home. The risk plans for these individuals were clear and had specific actions to take should they not return by certain times. Protocols were in place. Other people were supported to manage their alcohol use following individualised harm reduction plans. Therefore, informed staff understand people's needs.

People relate well and have good relationships with staff that care for them. We saw genuine fondness and lots of friendly joking banter between people living at the home and staff. All staff to whom we spoke, which included care workers, managers and catering staff interacted well with people throughout the inspection. People and their relatives referred positively to all staff working in the home. Comments included "*staff are great*" and "*they are so kind and have a huge amount of patience*". A visiting professional who had been visiting the home for a number of years said, "*they go above what's needed*". It was clear the management instilled the ethos and values of the service this was because all staff appeared to hold similar values in making a difference to people's lives. People, therefore, are treated with dignity and respect.

People are seen as individuals, and their voice is heard and listened to. Care planning documentation was well organised and captured both historical and recent information. This enabled staff to have a good knowledge of the people they supported. There was clear evidence that people, and where appropriate their relatives, were listened to and involved in the care planning and review process. We saw care workers offering choice to people throughout the inspection. This was in relation to areas such as food, and activities. We saw minutes of resident meetings, which evidenced good communication and involvement. During the inspection, we saw one person was quite anxious concerning an event that was affecting him when they came to talk to the manager we saw they calmed the person by explaining what they would do to help. We saw the manager carry this out and keep the person updated about what was happening. We saw good communication was being maintained with health and social care professionals for the benefit of people living at the home. Therefore, the evidence suggests people contribute to the decisions that affect their lives, and their individual circumstances are considered.

2. Care and Development

Our findings

People can feel confident the service providers have an accurate and up to date plan for how their care is to be provided in order to meet their needs. We reviewed five people's care files. Information for staff was clearly set out and detailed how best to support people and meet their care needs. Residents were given opportunity to participate in a 'review' of their care needs on a monthly basis. We saw senior staff carried out an initial assessment before people moved into the home. The manager told us people were also encouraged to spend time at the home before making their final decision. The assessment process always captured the wishes of the person and where appropriate family members. We observed that care being given by staff was in line with what was written on people's plans. Staff shared information verbally between shift changes to ensure that staff were up to date with any changes in support required for people. We did note that despite this being communicated verbally the written documentation used to record these handovers was not always being completed. We discussed this with the deputy manager who recognised that a simplified way of recording the handovers would be better and would look at implementing this.

We saw any risks to people's health and wellbeing were clearly stated, and measures in place to minimise these risks. Risk assessments were detailed, well documented and reviewed on a regular basis, or when circumstances changed. We saw risks were being minimised through measures such as harm reduction plans, financial support and missing person's protocol. People at the home are supported to make the choices that are important to them, even when this includes engaging in a level of risk, the home ensures control measures are in place to minimise the risk as far as possible. A number of people at the service still wished to use alcohol on a daily basis they were supported to do this following a harm reduction plan that was safe for that individual.

Therefore, we feel the service provider considers a wide range of views and information, to confirm that the service is able to meet individual's needs and support people to do what is important to them.

People, are treated with warmth, kindness and compassion in their day-to-day care. We saw there was a natural familiarity between staff and people living at the home. The home maintained a stable staff team, with a high number of staff having worked at the home for a significant period. Throughout the inspection, we saw staff had a good knowledge of people, and always referred to people in a positive light. We heard staff discussing a range of subjects with people, and it was clear they knew the people they supported very well. We spoke to a number of staff and gained feedback from staff questionnaires. All staff were very passionate about the individuals they cared for and had an understanding of how best to work for residents. Comments from staff included:- *"everyone matters", "care here is tailor made", "we have to be creative in how we try and encourage people to engage with us", "we speak to people on a level they are comfortable with"*.

We observed lots of friendly banter between staff and residents. We saw one care worker encourage a person to let them assist with personal care. This person was clearly resistant to having any care delivered and appeared very anxious. We saw the care worker was able to draw on their knowledge of the person and engage them in the care task by using lots of encouragement and going at a pace that was comfortable to the individual.

3. Environment

Our findings

People are cared for in homely, welcoming and well-maintained surroundings. We arrived at the home mid - morning and instantly found the home to be welcoming and provided a sense of community. We saw people sitting outside the front of the home on a patio area and in the main dining area, which was set out like a cafeteria and had recently been refurbished. This main dining area is located in the home next door but access for people living at Clive St. is easy as the properties are next to one another. There is a kitchen area located in 61 Clive St. where people can access drinks and snacks. The home has a food hygiene rating of five.

We observed people socialising with each other and staff. Residents approached and were chatty and interested in who was visiting their home and we saw relatives were always welcomed into the home and greeted by pleasant staff that appeared to know them well. All relatives to whom we spoke were extremely complimentary on all aspects of the home, and its staff. Comments included *"the home has changed my relative's life;"* and *"friendly atmosphere here, always made to feel welcome"*. People living at the home were equally complimentary saying *"I like living here, I like the food"*, and *"it's good it's my home, I can do what I want when I want"*. We saw there were smaller lounges where people could break off and watch TV or sit and chat. Drinks and snacks were readily made available to people.

We were shown around the home by a senior carer and saw both the internal and external areas were continually being maintained. An ongoing maintenance programme was in place and we saw the maintenance team working during the inspection. Improvement to the garden area was underway. All internal communal areas were kept clean. All of the bedrooms at Clive St. were highly personalised and set out like small bedsits. Everyone we spoke to was happy with his or her accommodation. We were provided with a maintenance file that included a range of certificates. This included water, gas, electricity and fire safety certificates. These were all up to date and evidenced regular audits by external professionals. We saw a clear system of work in relation to fire safety. Each person living at the home had a personal evacuation plan specific to his or her individual support needs. We saw evidence that fire safety drills were regularly carried out. Window restrictors were on all of the upstairs windows. Therefore, people live in a home where they are happy, and all unnecessary risks have been identified and as far as possible eliminated.

People's well-being is enhanced by having access to safe, practical, internal and external space, which is easily accessible. We saw people were encouraged to enjoy all areas of the home and garden. People were seen using the range of internal communal areas to, watch television or socialise with each other. The location and lay out of the home suits the residents that live there, enables them to maintain strong links with the local area, and affords a level of independence. The home is based in a central area of Cardiff. Most of the residents living at the home are from the surrounding areas and a lot have strong links with the City Centre of Cardiff. The location of the home affords people to be able to maintain links with the area and go out independently. We saw people coming and going to the home throughout the day. A seating area outside the front of the home also allowed people to chat with passers-by. People told us they liked being able to walk to the local shop or visit friends in the centre of town. Therefore, there is sufficient internal and external space and facilities to meet the needs of people.

4. Leadership and Management

Our findings

People benefit from a service that is well run and committed to providing individualised care to the people it supports. We saw resident meetings were regular and highly attended by residents; suggestions made at these meetings were carried forward and considered by the management. We saw that where alternative foods had been requested this was quickly implemented into menu choices. In addition, people were consulted about the maintenance work and encouraged to decide what needed to be prioritised. We spoke to commissioners who also advised they were satisfied with the service provided. We sent out questionnaires to people living at the service and had eleven returned. All stated they knew how to raise a concern and felt staff at the service valued their views and wishes. One resident told us *“Brian is alright he’s always around and you can talk to him”*. The deputy manager regularly undertook staff meetings and records of these meetings evidenced that staff received information and were prompted to improve practices but were also encouraged to share ideas on developing the service. All care workers of whom we spoke had nothing but praise for the management team, and the support they provided. Comments included *“managers motivate staff, and well run, a good place to work”*, and *“management excellent and value me”*. *“management listen and take on board suggestions and ideas*. We saw all members of the management team were easily accessible. We found they offered support to people throughout the day and were actively involved in peoples care. Both the RI and deputy manager were passionate about the people they support and committed to providing a safe home for the people they care for. The ethos of the home is that everyone matters and this is carried from management through to the staff.

The management team provided out of hours support via a systematic on-call service. The responsible individual maintained a comprehensive quality assurance process. This included quarterly monitoring and regular audits. These involved consultation with people living at the home, relatives, staff and external health and social care professionals. These systems resulted in an annual report. Both people living at the home and their relatives told us they felt included in all aspects of living at Grange lodge. One relative of a person told us that on special occasions such as Christmas day the management ensured transport was provided so they could come to the home to spend the day with their relative. People benefit from a culture that ensures the best possible outcomes can be achieved

People benefit from appropriate and responsive care because the work force is suitably skilled to meet their needs. We reviewed 4 staff files and training records and saw that staff were vetted appropriately and safe recruitment practices followed. Mandatory training was up to date; in addition, staff received training that was relevant to the people living at the home. This included training around substance misuse; person centred planning and individualised care. The registered manager told us that they do not use any agency staff as they have recruited sufficient staff who are flexible to be able to meet the needs of the service. We found the service placed great emphasis on staff development and succession planning. This was because a number of staff were being further developed through mentoring and additional training and development. This included undertaking the Qualification and Credit Framework (QCF) Level 5 in Leadership and Management. Therefore, people benefit from a skill mix that is reviewed continuously and adapted to respond to the changing needs and circumstances of people using the service.

5.Improvements required and recommended following this inspection

5.1 Areas of non-compliance from previous inspections

This is the services first inspection under RISCA there are no previous non-compliance notices

5.2 Recommendations for improvement

- Information: The provider must ensure that people's medication files have an up to date photograph.
- Information: Communication between shift changes should be documented in a format and way that is easy for staff to record and access when needed
- Information: The statement of purpose document and service user guide would benefit from being updated to reflect the individuality of the service provided.

6. How we undertook this inspection

We undertook a full inspection of this service as part of our inspection programme. We made an unannounced visit to both of the homes on July 2019 between 10am and 5.30pm

The following regulations were considered as part of this inspection:

- The regulated services (services Providers and Responsible Individuals) (Wales) regulations 2017

The following methods were used

- We spoke to the responsible individual, deputy manager and care workers;
- We spoke to people living at the home and their relatives;
- We received feedback from visiting professionals;
- We looked at the statement of purpose and service user guide;
- We were shown around the home(s) and outside area;
- We looked at four staff files (including recruitment & induction records);
- We looked at five files of people living at the home(s) (including care/ support plans, risk assessment documents and medication administration charts);
- We looked at maintenance records, and safety certificates;
- We looked at a sample of policies and procedures;
- We received twelve staff questionnaires;
- We received eleven service user questionnaires, from people living at both homes.

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	Grangelodge Residential Home Ltd
Manager	Ibrahim Yahia
Registered maximum number of places	6
Date of previous Care Inspectorate Wales inspection	This is the first inspection post registration under RISCA
Dates of this Inspection visit(s)	02/07/2019
Operating Language of the service	English
Does this service provide the Welsh Language active offer?	yes
Additional Information:	

Date Published Wednesday 28 August 2019