



Inspection Report on

3 Glasfryn Terrace

Date Inspection Completed

02/05/2019

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Description of the service

3 Glasfryn Terrace is a care home which is located in a residential area of Denbigh. The service provides care and support for up to two people with mental health needs (functional). The service is owned by Mental Healthcare (Community Limited) and the responsible individual is Ryan Sandick. The manager is registered with Social Care Wales.

Summary of our findings

1. Overall assessment

Overall, we found that people living at 3 Glasfryn Terrace receive a good quality of care. People are encouraged to be independent, make their own choices and decisions and are able to express how they feel about the service they receive. There are opportunities to access activities within the local community as well as pursue their own hobbies and interests. Staff understand the needs of the people they support and a small consistent staff team promotes positive relationships. The accommodation meets the needs of the people living there and enables them to develop skills and independence with cooking, cleaning and taking care of their home. There are systems in place to ensure the responsible individual and manager are aware of any issues so that actions can be taken to address these.

2. Improvements

Personal plans and associated documentation was well organised and information was easy to find.

3. Requirements and recommendations

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

- Documentation: needs to be fully completed, signed and dated.
- Outdoor space: work is ongoing but this must be completed to provide a safe and pleasant space for people to use.

1. Well-being

Summary

People are safe, protected and encouraged to express any concerns they may have. Individuals are supported to look after themselves and make their own choices and decisions about how they want to be supported and when. Staff encourage people's creativity and any special interests they have which helps to raise self-esteem, confidence and a sense of achievement.

Our findings

People feel safe and secure. A small staff team provide continuity of care and support for individuals. People told us they liked staff and were able to have a "*connection*" with them. The personal plan we looked at included risk assessments, missing person information and a Positive Behaviour Support (PBS) plan for staff to follow. Training records showed staff received training to carry out their roles and responsibilities effectively and understood the needs of the people they supported. According to the training record, all staff and the manager had received training in safeguarding. People are safe and protected from abuse and harm.

People are able to express themselves and independence is encouraged. The manager told us that residents and key worker meetings were held to provide an opportunity for people to say what they wanted and we saw minutes of these. Both people were happy to speak with us in private to tell us about their positive experiences of the service and the support they received. The Statement of Purpose stated they actively encouraged "*the involvement of advocacy in decision making process*". We saw evidence of advocacy involvement and information informing people how to access this if needed at any point. According to the Statement of Purpose, documentation would be offered in the Welsh Language and if people wanted to be supported through the medium of Welsh, this would also be facilitated. The Statement of Purpose stated, "*We believe in the importance of promoting independence wherever possible as doing this can help people feel in control of their lives and gives them a sense of self-worth*". The manager told us people often cooked meals for one another and a member of staff referred to an individual being "*a good cook*" and told us people took turns cooking meals. We saw an activity plan, which included helping with the housework and shopping, daily records confirmed that this was happening. People are listened to and contribute to the running of their home.

People's preferences are respected and their hobbies and interests are promoted. The personal plan we looked at recorded the person's views, wishes and what was important to them. Discussion with the manager showed there was a clear understanding of what people did and did not like and what approaches were best to use in different situations. The Statement of Purpose stated that people were "*encouraged to develop and sustain interests and hobbies*". The manager told us a hobby room had been provided in the home for people to be able to use. A person showed us the room and the models they had made as well as their artwork. During our first visit both people were out at a community activity, which provided them with an opportunity to socialise and get involved with projects, at their own pace. When we visited again, people told us about what they had done there including gardening, woodwork, art and crafts, music and helping out with the washing up. This was considered to be a good place to socialise and people told us about the "*regulars*" that went there. We saw an activity plan, which provided a full timetable of

things to do each day including different activities, housework, shopping, cooking and time for the person to relax and do their own thing. People told us about the favourite television programmes they liked to watch. They spoke about a recent clothes shopping trip and told us about their purchases. People can do things that matter to them.

2. Care and Support

Summary

People receive timely, appropriate person centred care from staff who have the skills and confidence to respond positively to changing moods. Information about individuals and their health needs are clearly documented for staff to understand. People are supported to have friends and build positive relationships with staff and others.

Our findings

People receive proactive, preventative care and support and their wide range of needs are anticipated. The manager spoke about the importance of having the same staff working with people who knew them well, were trained and could support them appropriately. We saw that detailed information was recorded for each person including one page profiles about what was important to people and how best to support them. We saw a health action plan and information about health conditions and how these impacted on a person in their file. We looked at a Positive Behaviour Support (PBS) plan, which informed staff of what might happen and what to do or not do. Documentation was being reviewed regularly and in light of any changes to people's care and support needs. The manager told us that care planning took into account people's outcomes and how these should be met. They said that this was working well and had reduced the need for unnecessary information. We looked at an outcome diary, which was used for staff to record daily information in. This was not consistent in that entries were not always completed, signed or dated. Other documentation did not always include signatures and dates to evidence people's involvement and staff understanding. This was discussed with the manager who said they would address this. People receive the right care at the right time, in the way they want it, however documentation needs to be completed fully.

People are supported by a committed staff team who promote positive relationships. The manager said that staff worked between different homes owned by the same provider, within close proximity of each other. This ensured people were supported only by a familiar staff team and that agency staff were not used, as this was not considered to benefit people living there. A staff member told us that people were "*so independent*" and staff were there to provide support as and when needed. One person said "*staff are good with me*" and they are "*all stars*". They said they could have a "*good laugh*" with the manager who was "*very caring*". People talked with us about family visits and writing letters to friends and relatives to keep in touch. During our visit, we saw and heard how people also provided support to one another. People chatted about their neighbours, the local shopkeepers and other people they knew in town. People have good relationships with staff and other people.

3. Environment

Summary

People live in a home, which is comfortable and personalised. There is a garden area, which is accessed on a daily basis as a place to socialise and relax. This is a work in progress and although plans are being made to improve the outdoor space, this needs to be completed.

Our findings

People are supported in a personalised environment that is appropriate to their needs. The home was suitable for the two people living there and was seen to be comfortable and personalised. The Statement of Purpose stated, *“people will have a say in the décor and furnishing and will be able to personalise it”*. The manager told us that improvements had been made to the bathroom and that people had requested to keep the existing wall colour. A person confirmed that the wall colours in the home were *“up to us”*. The manager told us that people helped to keep their own home tidy. The manager and staff also said they assisted with keeping the house clean and tidy, when needed. One person told us *“the house is small but doesn’t feel small”*. The garden is a work in progress and we spoke with the manager and people living there about this. The internal audit noted that the *“tiered garden area is untidy and cluttered and is a trip hazard in some areas”*. This needs to be addressed to ensure people have a safe and pleasant outdoor area they can access. People live in a home which meets their needs and supports them to maximise their independence, but attention to the garden area is needed.

4. Leadership and Management

Summary

People are encouraged to provide feedback about the service so that any issues can be addressed promptly. They are aware of how to raise complaints, felt able to speak to the manager and have access to advocacy if needed. Staff work well as a team with shared values of enhancing the lives of people living at the home and are supervised, supported and trained in their roles. There is a strong commitment to, and evidence of, driving continuous improvement

Our findings

People know how to raise concerns or make complaints and are supported to do so. People we spoke with told us what they would do if they were not happy and felt able to raise any issues with the manager. The Statement of Purpose, Service User Guide and complaints policy informed people how to raise any complaints about the service and explained how these would be dealt with. The manager informed us that the team leader provided feedback to the manager about any issues. The manager also provided feedback to the responsible individual so that any actions could be taken. People are able to express their concerns.

Staff are valued, supported, and given clear direction. 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, mental health and learning disability awareness, effective communication, autism training, active support, health and safety including fire safety, infection control and manual handling. We were provided with information about what training staff were due to attend. This included diabetes, epilepsy, dysphagia, positive behaviour support, self-harm awareness and schizophrenia. Supervision records show that supervisions had been completed and the forms used included sections on reflective practice and staff achievements. Staff told us that they *“supported each other”* and that the manager was *“really good”*. The manager felt well supported in her role by the responsible individual and was able to contact and discuss any issues with them. People benefit from a service where the well-being of staff is prioritised and 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 to introduce them self to people and the manager to explain their role. This provided reassurance to the manager as to the support that would be available to them. We were told that the responsible individual was in regular contact and intended to pop in to the service *“for chats”*. The Statement of Purpose referred to the responsible individual conducting 3 monthly visits to the service and producing a report of their findings for the manager to act upon if required. We saw a copy of the report from the 8 May 2019, which demonstrated the responsible individual was aware of issues identified in the internal annual audit and discussions with the manager had been held about actions being taken. We looked at a copy of the annual internal audit which had been recently completed. The manager told us had identified a few minor issues, which were being addressed. 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 documentation is completed and includes dates and signatures to evidence involvement.
- The service should ensure that the garden area is completed to provide a safe and pleasant space for people to access.

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 2 May 2019 between 10:30 a.m. to 13:10 p.m. We also visited on the 10 May 2019 between 10:00 a.m. to 11:40 a.m.

The following methods were used:

- We spoke with two people living at 3 Glasfryn Terrace.
- We held discussions with one support staff and the manager.
- We looked at a range of documentation. We focused on one personal plan, reviews, daily records, minutes of residents/staff meetings, 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	2
Date of previous Care Inspectorate Wales inspection	4 October 2017
Dates of this Inspection visit(s)	02/05/2019
Operating Language of the service	English
Does this service provide the Welsh Language active offer?	Working towards
Additional Information: The service is working towards this providing documentation in Welsh and Welsh speaking staff if this was required.	

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