



Inspection Report on

350 Cyncoed Rd

Cardiff

Date Inspection Completed

16/07/2019

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Description of the service

350 Cyncoed Road accommodates and supports up to five adults with learning and/or physical disabilities. Currently four people live in the home in the Cyncoed area of Cardiff. The registered provider is Heatherleigh Care Limited. James Fletcher is the responsible individual (RI) providing strategic oversight, and a manager has been appointed who is registered with Social Care Wales.

Summary of our findings

1. Overall assessment

People in 350 Cyncoed Road enjoy living there. They thrive due to good care, stable relationships and the service's strong commitment to achieve positive outcomes for them. Their days are full of meaningful activities: following interests, socialising, learning and household tasks. They are supported to be as independent as possible, and to identify and realise their ambitions. People and staff interactions are warm and positive, and staff know the needs and likes of the individuals very well. A competent and passionate manager leads this well organised service and is supported by an experienced and pro-active RI. Staff feel valued and supported and there is a very low staff turnover. The home offers a relaxed and comfortable environment and is spacious, clean and well adapted to the needs of the people living and working there.

2. Improvements

As this was the first inspection since the service registered under the Regulation and Inspection of Social Care (Wales) Act 2016 (RISCA 2016), any improvements will be considered as part of the next inspection.

3. Requirements and recommendations

The service met all legal requirements and we made one recommendation regarding the timeliness of the regulatory six-monthly quality of care review. Section five of this report sets out our recommendation.

1. Well-being

Our findings

Living in 350 Cyncoed Road has improved people's health, independence and well-being. Their confidence is promoted and they are supported with their goals and ambitions. When we visited, people looked happy and comfortable in the company of staff and each other, and they appeared to be uplifted by the support and care. We felt there were positive and sincere relationships and saw displays of genuine affection on both sides. We noted that staff interacted with people in a warm and caring but respectful manner. They were attentive and had a good awareness of people's needs and dignity. People were treated as individuals and supported to be more confident and independent. We observed staff communicating with the individuals in ways they understood. All staff had been working in the home for some time and this contributed to good continuity of care. People said "*I want to be here forever*", and "*we are like a family here*". We also saw that people were encouraged and supported to maintain contact with their family and other significant people. We found that people feel at home at 350 Cyncoed Road and have positive relationships.

People engage in meaningful activities, have ambitions and lead active and fulfilling lives. We found that people were encouraged to have goals and the service worked hard to help people making them come true. People had social, recreational and vocational opportunities, and were supported well in pursuing their interests. One person told us they wanted to do something to improve their self-esteem and learn how to use an ATM machine. We saw that staff provided advice and practical support to increase their independence and achieve their personal outcomes. People accessed their activities independently, or with support from staff, depending on their needs. Activities were diverse and included volunteering in a charity, walks, visiting friends, music, sensory experiences, pedal power and swimming. On our visit we saw people routinely joining in with household tasks and being supported with ironing and cooking. The group in the home had just come back from a week-long holiday together. Based on what we observed and what we were told, we conclude that people can follow their interests and increase their independence.

People living in the home are safeguarded. We found that staff and management understood their roles in protecting people and that they had received training and education to recognise signs of abuse and poor mental or physical health. Having been trained in applying the safeguarding principles and policy, they knew when and how to report relevant concerns, accidents or incidents. We saw that management reacted promptly and appropriately. We conclude that the people living in the home are protected.

People are supported to cope better with behaviours. The home's statement of purpose set out the service's philosophy and approach about supporting individuals to manage behaviours that may be detrimental to themselves or others. We found that this was strengthened by relevant staff training and policies. We saw that behavioural management plans were in place for individuals, containing guidance for staff to identify and reduce potential challenging behaviours. Staff training and guidance were tailored to meet the needs of the current individuals. We saw that staff recognised early signs when a person became agitated, and they supported then appropriately. Not only occurrences but also moods, challenging incidents and behavioural patterns were recorded and evaluated to inform care and support. We conclude that the service has robust internal processes to support individuals in managing behaviours which may challenge themselves and/or other.

2. Care and Support

Our findings

People in 350 Cyncoed have high quality care and person centred support. We saw that people's needs were assessed before they came to live in the home to make sure the home was a suitable place for them. We looked at two service user care files and saw evidence of robust care planning and timely reviews, and we also found them detailed and up-to-date. Staff were given clear guidance within the plans (and the associated risk assessments) about how to meet people's needs and maintain their safety. The plans showed that the individuals had been involved and had contributed their wishes and preferences. We found that people had ownership of their care plan and one individual happily showed their care plan and discussed their involvement and contribution. Files contained 'what matters to me' documents and important details had been included, such as people's likes, dislikes, friends, etc. The care plans also contained in-depth life stories and other knowledge to give guidance about people's specific communication needs and the care and support required. Appropriate risk assessments were in place, and strategies to support positive risk management. The service carried out regular comprehensive reviews with each person about their physical and mental well-being, activities and achievements. A well designed and person centred sheet for daily notes provided a simple but effective way for staff to record important information for each individual. This is a useful method of identifying change in, or concerns about, people's conditions and to see what works positively for them. We conclude that people participate in their care planning and their care and support is well informed.

People are supported to stay well and their health is monitored. We saw in the care records that other health and social care professionals were involved with people's care, for example optometrist, speech/language therapist, general practitioner (GP), social worker and more, on a regular basis as well as when needed. Important health information eg weight or fluid intake was recorded regularly and reliably. We also noted that the staff in the home encouraged a healthy lifestyle in food and activity choices, and motivated people to be as active as possible. This shows that people's health and well-being is promoted.

People's medication is safely managed. We noted that medication was appropriately stored, dispensed and recorded. Staff had regular training and guidance about the administration of medicines. We saw that all medication administration was recorded correctly and checked daily, and that management audited the medication stock and procedures, thus contributing to safe practice. We noted secure arrangements in place for storing medications and supplements, which meant they were only accessible to those with authority and training. We saw some individual's independence promoted through administering their own medication from a lockable box, with the assistance of staff. This shows the service minimises the risks associated with the management of medication.

3. Environment

Our findings

People are supported in a welcoming, clean and safe home which is suitable for their needs and which we found homely and relaxing. We carried out a visual inspection and saw the home was clean, tidy and in good repair throughout.

There was ample space for people to spend time individually and communally; all rooms were comfortable and tastefully decorated, as well as adapted to people's needs. The heart of the home was the spacious lounge/dining room with a large kitchen and direct access to a patio and rear garden. The garden area was invitingly furnished including shaded seating, fragrant plants and a birdhouse, and it provided opportunities to relax or be active outdoors. All people had their own bedroom which were charmingly decorated; people told us that they had chosen their furnishings and the colour schemes in their rooms themselves. We also noted that the rooms had been adapted to maintain levels of independence whilst at the same time helping reduce anxieties. All downstairs areas were accessible for wheelchairs. The office was in a garden room and had secure facilities for document storage, as well as space for training or for confidential conversations.

We saw that people moved comfortably within their surroundings and that consideration was given to their physical needs, for instance a bathroom was adapted so a hoist could be used, or raised plant beds had been put into the garden. We observed that people were using their environment freely, spending time in their bedrooms and living areas as they wished. We found that people feel at home at 350 Cyncoed Road because they are supported in a comfortable setting which meets their needs and maximises their independence.

The health and safety requirements of the home are overseen by management and fully satisfactory. We saw that consideration to health, safety and maintenance formed part of the service's quality monitoring and that staff and management contributed continuously.

All the relevant policies and procedures for health and safety were in place and we saw evidence that these were adhered to. The home had a Food Hygiene rating of 4 and we saw staff employing safe practices when preparing food, for example washing their hands before handling food or labelling items in the fridge with the date they were opened. The insurance certificate was displayed and in date. We found there was satisfactory servicing contracts and records in place for all aspects of the home. Additionally, we saw that regular fire drills had taken place and that they had included the people living in the home. We found staff and people familiar with the fire evacuation procedures and other emergency actions. A personal emergency evacuation plan (PEEP) and a 'grab file' (containing all pertinent information e.g. for emergency hospital admission) was in place for each individual and kept updated.

Personal files, medications and hazardous items such as cleaning products were stored appropriately. We saw that there was an ongoing maintenance schedule in place and the premises were kept in good repair. We conclude that all people associated with the service can feel confident that it is a safe and comfortable place to live, work and visit.

4. Leadership and Management

Our findings

The home has suitable and satisfactory processes in place to ensure that staff are fit to work with vulnerable people. The staff files we saw evidenced robust recruitment and vetting. They were well organised and contained all the required checks and information. All staff had achieved NVQ/QCF

qualifications (and some were working towards higher levels). We found there was a comprehensive staff induction programme in place and all staff had undertaken mandatory and additional training in a variety of subjects, including medication administration, moving and handling, epilepsy, food safety and first aid, positive behaviour management and more, with further training scheduled. Staff were positive about their training and said they felt competent and comfortable in their roles. Staff had had regular supervision meetings with the manager and used the opportunity to reflect on their performance, receive support and discuss future goals and training. Formal and informal meetings with management kept staff up-to-date with changes and developments and provided a platform for discussion. All this indicated to us a culture of shared learning, reflection and development being present in the service. Staff commented positively to us about the leadership of the home, indicating they felt valued and well supported. They said *“it’s a relaxing place to work and everybody is in tune”*, *“the manager and the RI are always at hand”* and *“I would love to live here myself”*. Staff members wrote in the questionnaires we gave out *“I enjoy my job, we more are like a family here”* and *“it’s a very good staff team here who have genuine warmth and affection, and take pride in their work”* We conclude that people benefit from a stable team with appropriate knowledge and skills.

The service has transparent systems in place for auditing and quality assurance. We sampled a selection of reports which included feedback from staff, people living in the home and their representatives. The documents gave evidence of outcomes and informed conclusions and plans. We also looked at the reports of the required RI visits and found they were consistent and inclusive. The regulatory six-monthly quality of care review of the service to the provider was overdue but submitted shortly after the inspection. We saw robust quality assurance systems in place which helped the service to self-evaluate and improve. There were current policies and processes for dealing with complaints, incidents, safeguarding and accidents. We found staff was well informed about their role in them. We also noted that management acted timely and appropriately with any issues arising. The administration of the home was very well organised and maintained, as far as we could see from the section of the home’s policies, procedures and records we viewed. Notifications were routinely forwarded to CIW, and appropriately actioned and recorded in line with regulations. We saw that the records relating to Deprivation of Liberty Safeguards (DoLS) were satisfactory and during our conversation with the manager it became evident that she fully understood the implications and procedure of DoLS. We conclude that people benefit from a service which has an ongoing commitment to reflection and improvement.

The service provides good information. A comprehensive, up-to-date statement of purpose set out the home’s aims, values, and how it intended to deliver the service to people. It also contained pertinent information about processes and policies such as for complaints or safeguarding issues. An easy-read service user guide was available for people and their representatives, containing practical information about the services provided. We conclude that people benefit from a service that is transparent with its values and purpose, and makes its objectives and provisions clear.

5. Improvements required and recommended following this inspection

5.1 Areas of non-compliance from previous inspections

This is the first inspection since the service was registered under the Regulation and Inspection of Social Care (Wales) Act 2016 (RISCA).

5.2 Areas of non-compliance identified at this inspection

There were no areas of non-compliance identified at this inspection, the service meets all legal requirements.

5.3 Recommendations for improvement

The following is recommended as good practice:

- Ensure the regulatory six-monthly quality of care review of the service is timely submitted to the provider.

6. How we undertook this inspection

We undertook an unannounced full inspection, the first for the agency since re-registration under the Regulation and Inspection of Social Care (Wales) Act 2016 (RISCA).

Information for this report was gathered from:

- an unannounced visit to the home on 16 July 2019 from 1300hrs to 16.45hrs
- conversations with service users and a visitor
- conversations with the manager and care staff
- communications with the responsible individual including feedback via phone

- observations of daily routines, care practices and activities in the home during the visit
- visual inspection of the house and the garden
- examination of two care files and medication records relating to people in the service
- examination of two staff files to consider recruitment and the arrangements for supervision and training
- examination of records and policies held at the service such as accident/incident reporting, staff training and supervision matrix, privacy, safeguarding, whistleblowing and other policies, complaints procedure etc.
- review of information about the service held by CIW
- review of the service's statement of purpose and service user guide
- review of the service's quality assurance system, RI visit reports, meeting minutes and other relevant reports
- feedback from seven CIW questionnaires received back.

We are committed to promoting and upholding the rights of people which use the care and support services. In undertaking this inspection we actively sought to uphold people's legal human rights.

<https://careinspectorate.wales/sites/default/files/2018-04/180409humanrightsen.pdf>

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	Heatherleigh Care Ltd
Responsible Individual	James Fletcher
Registered maximum number of places	5
Date of previous Care Inspectorate Wales inspection	10/10/2017
Dates of this Inspection visit(s)	08/07/2019 and 16/07/2019

Operating Language of the service	English
Does this service provide the Welsh Language active offer?	The service is not currently working towards the Welsh Language Standards
Additional Information:	

Date Published 28/08/2019