



## Inspection Report on

**5-7 Ffynnon Waun**

**5 FFYNNON WAUN  
CARMARTHEN  
SA31 3PX**

## **Date Inspection Completed**

26/11/2019

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## **Description of the service**

5-7 Ffynnon Waun is registered to provide accommodation, personal care and support for up to four adults from 18 years who have a mental health condition.

The registered provider is Bro Myrddin Housing Association, Lesley Penn is the responsible individual (RI) providing strategic oversight, and the manager is registered with Social Care Wales.

## **Summary of our findings**

### **1. Overall assessment**

The home provides a pleasant and comfortable environment, however further work is recommended to ensure the home is reflective of people's personalities. People appeared happy and content. The staff team have received specific training to effectively meet people's needs and reduce risk. Care documentation and risk assessments are of a high standard focussing upon individuals well-being. There is a strong ethos of supporting and enabling people to be as independent as possible. People are supported to contribute to society at large.

Management are visible, approachable and responsive at all times. The staff are well led, supported and trained to perform their role. We found the staff to be caring, attentive, engaging and highly responsive to people's needs. As a result there was evidence of this positively impacting on people's lives.

### **2. Improvements**

5-7 Ffynnon Waun was recently re-registered under the new Registration and Inspection of Social Care Wales Act 2016 (RISCA) and this was their first inspection under the new legislation. Any improvements will be considered as part of the next inspection.

### **3. Requirements and recommendations**

Section five sets out areas in which the registered provider is not currently meeting legal requirements and our recommendations to improve the service. No areas of non-compliance were identified at this inspection.

# 1. Well-being

## Our findings

People can be confident their relationships with friends and family are supported and promoted. We were informed friends and relatives regularly visited the home and spent quality time together. We read details of how a person liked to be supported to maintain contact with a family member, and precise details of how that support would be delivered. We saw in daily records how the person had “*enthusiastically*” made a trifle for their relative, which was part of their documented wishes. We talked with people about their social engagement with people living at a sister home and friendships which had been made, and read goals to invite them for supper or lunch. We conclude that people are encouraged to maintain contact and relationships as often as they wish.

It was evident people feel valued members of their community and to contribute to wider society. We observed members of the household engaged in tidying their room, helping with laundry and discussing meal choices. Staff told us how people helped to do the shopping at the local supermarket. We read daily records which showed one person liked to be responsible for putting the rubbish out. We saw easy read booklets available regarding the upcoming general election and saw everyone had received their voting cards. We read minutes from house meetings. We consider people are supported to have a voice and their contribution to society is respected.

People are positively encouraged to engage in meaningful activities in the home and develop skills for independence. These included; listening to music of their choice, cooking a meal, arts and crafts, attending church, discos, camping and going out for a walk in the local community. All staff whom we spoke with demonstrated a commitment to enabling people to do be as independent as possible. We saw people having access to the kitchen area and helping themselves to basic breakfast food and drink. When we examined people’s support files we found they clearly detailed people’s future goals and aspirations. This included opportunities to go on holiday and engage in hobbies and interests of their choice. The plans provided staff with clear objectives to support people to meet their personal outcomes and were measured through the reviewing process. We conclude people are positively encouraged to engage in meaningful activities both at home and the wider community and their independence maximised.

Systems are in place to safeguard people from abuse and neglect. People were given information regarding how to raise any concerns they may have and were encouraged to discuss any issues. Risk assessments had been completed to reduce the risk of harm, and were reviewed on a regular basis. Staff received training to ensure they had the knowledge and skills to recognise when people’s needs changed. They were also aware of their responsibilities in terms of safeguarding people from abuse. The service’s safeguarding policy had been reviewed and was available to staff. The evidence suggests people can be

confident they are protected from abuse and neglect and are provided with information about how to raise concerns in a format they understand.

## 2. Care and Support

### Our findings

People have good relationships with staff whom show warmth, kindness and compassion. We overheard light hearted exchanges, positive encouragement and appreciation of help provided by people living at the home. The manager and staff knew people well, their plans for the day and asked pertinent questions. They also listened to people's opinions and responses. Staff took time to engage meaningfully. We were told by staff they had enough time to read support plans and get to know people. This was evidenced by recordings in daily notes and in supervision notes. Also, supported by our discussions with newly employed staff. The language used in support documentation was appropriate and powerfully reflected the ethos of the home. For example, "*I asked whether x would like a wet shave and x politely declined.*" And "*I offered to help change the sheets and x accepted.*" The evidence which we observed and read suggests people enjoy positive relationships with staff and each other.

People have a voice and control over their lives. Support plans were well structured with an index for reference, coding relating to well-being outcomes and were easy to navigate. We found the support plans and risk assessments were person centred, detailed and addressed specific areas. Outcomes of goals were reviewed, evaluated and agreed in partnership between staff and people. There was evidence reviews were taking place on monthly basis to ensure that any changes of need were reflected. People, in personal plans we read, also gave their agreement to their personal plan as we saw the plans had been signed by both the individual and support worker. This demonstrates people have the opportunity to express how they would like to be supported and preferences. During our inspection we saw people were supported to attend a health appointment. We read handover documentation relating to trips to the GP, dentist and other healthcare professionals. This documentation was clear, precise and all future appointments were scheduled on people's monthly appointment planner. We conclude that people have control over their day-to-day lives and are supported to maintain their physical and mental health because they receive proactive care.

The well-being of people is promoted through safe systems for the administration of medication. We examined the medication arrangements and found that medication was securely locked. We saw the medication administration records (MAR'S), were completed with all required information for each individual living at the home. Each individual had a medication profile in place which included a picture of the person and any allergies .We reviewed the training matrix and saw in staff training records medication training and competency checks had been undertaken. We saw the in house medication audit was supported by a pharmacist, with no errors identified. We were told by the manager the service had a good working relationship with the pharmacy. We read the medication policy and the procedure to be followed should any medication errors be identified. This was supported by an easy to follow flow chart. This demonstrated that there are robust

arrangements in place to closely monitor to maintain compliance and competency. We conclude that overall people are safeguarded by the medication systems in place and supported by staff that are appropriately trained in accordance with the policy.

### 3. Environment

#### Our findings

People are supported in an environment where their needs are met whilst enabling and promoting their independence. However, people's well-being would be further enhanced by steps to develop a more homely feel. We had a tour of the home and saw all areas were clean and well presented. Whilst the furnishings were of a good quality and new curtains and poles had been purchased to comply with fire standards, the communal areas were not reflective of people living at the home. The manager told us this had been highlighted at a previous inspection and there were plans to fully redecorate the house. We spoke with people who told us they were "*happy*" with the house and particularly liked watching the TV in the morning. We saw people using the outdoor covered area to listen to music. We were later told the person did not like confined spaces. We saw changes had been made to outdoor electrical sockets in order to enable the person to listen to music whilst outside. We observed an individual preparing breakfast, another person doing laundry and another person accessing a Hoover. This demonstrates people are able to do things for themselves because the layout of the home promotes independence.

Unnecessary risks to people have been identified and as far as possible eliminated. We read the health and safety policy, saw the fire risk assessment had been completed. In addition, fire evacuation drills had taken place and people's response to fire drills. Where appropriate we saw personal emergency evacuation plans (PEEPs) were held. We noted the required testing of emergency lighting and alarms had taken place weekly. We saw appropriate steps had been undertaken in relation to legionella water testing. We saw substances hazardous to health (COSHH) were held in a locked cupboard. We consider, therefore people can be confident all steps have been taken to protect them from risk.

## 4. Leadership and Management

### Our findings

People can be assured oversight and governance arrangements are robust. The service provider has prepared a statement of purpose which accurately reflected the service being provided. We reviewed the 2019 edition of the statement of purpose and found it to be accurate, up to date and in line with requirements outlined in the regulations. We found the model of care documented in the statement of purpose accurately reflected the approach being followed during the inspection. This was evidenced through reviewing people's personal plans, discussing people's care and support with them and through discussions with support workers regarding the care and support they provided to people. We read the latest responsible individual report and saw people were being given the opportunities to discuss their support and provide feedback on the service they received. We saw any action points were drawn up and progress monitored in relation to refurbishment. We saw preparatory work for the quality of care review, which included people's opinion. We noted the manager had worked well with CIW attending workshops and ensuring they were up to date with regulatory requirements. We conclude people benefit from receiving a service which is provided in accordance with the statement of purpose and seeks to drive continuous improvement.

People are supported by sufficient staff numbers. We were told by the manager there had been a natural turnover of staff which had left the service potentially short. However, we were told how staff had worked extra shifts and worked as a team. We saw staff from the sister service had supported the home and where necessary agency staff had been employed. This was confirmed in supervision notes we read. Team working ensured people were not negatively impacted, this was confirmed by people's daily notes which we read. The service has now recruited new staff. Staff were well trained and felt supported by the manager, whom we observed to be very supportive of staff and clear in their communication. All staff whom we spoke were highly complementary of the manager. Staff records showed staff had achieved at least level 2 NVQ or QCF in care, and all staff will be registered with Social Care Wales. Newly recruited staff completed an induction and completed a probationary period. Staff whom we spoke with were able to demonstrate their understanding of training received. We consider people benefit from good care delivery by competent staff, who are in turn well trained and supported.

People can be assured that there are arrangements in place to identify and investigate incidents and accidents. We examined the completed accident and incident forms and found that the staff had fully completed the form and took the necessary action. Each incident and accident was investigated by the manager. We saw evidence the manager had actioned accordingly and used the information to identify measures to mitigate future risk. This was communicated to all staff. We conclude that there are effective systems and monitoring arrangements in place therefore, people are staying safe.

## **5. Improvements required and recommended following this inspection**

### **5.1 Areas of non compliance from previous inspections**

This was the first inspection following re-registration under the new Registration and Inspection of Social Care Wales Act 2016 (RISCA)

### **5.2 Areas of non compliance identified at this inspection**

None

### **5.3 Recommendations for improvement**

We recommend the following:

To develop a redecoration plan for the home in consultation with the residents in order to be more reflective of their personalities.

## 6. How we undertook this inspection

This was a full inspection carried out in accordance with the Care Inspectorate Wales (CIW) Inspection Framework. We considered all four themes; well-being, care and support, leadership and management, and the environment. Our visit to the home was unannounced and undertaken on 26 November 2019 from 09.20am to 12.00pm, and subsequent visit to the head office on the same day.

The following regulations were considered as a part of this inspection:

The Regulated Services (Service Providers and Responsible Individuals) (Wales) Regulations 2017.

We reviewed the statement of purpose.

- We met with individuals living at 5-7 Fynnon Waun
- We observed interactions between staff and individuals
- We held discussions with the manager and two staff during our visit
- We carried out a detailed examination of two personal files which included; care and support plans, risk assessments, health care and daily recordings
- Examined the Deprivation of Liberty Safeguards were in place and appropriately made
- We looked at a wide range of records, including accident and incidents, fire assessment reports and quality assurance reports
- We examined two staff personal files, to examine recruitment arrangements, supervision notes and training files
- We examined the staff training matrix
- We examined the arrangements in place for the maintenance and servicing of the home
- We had a tour of the environment and considered the facilities provided
- Following the inspection visit we contacted the responsible individual to provide feedback and confirmed their understanding

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## About the service

<b>Type of care provided</b>	<b>Care Home Service</b>
<b>Service Provider</b>	<b>Bro Myrddin Housing Association Ltd</b>
<b>Responsible Individual</b>	<b>Lesley Penn</b>
<b>Registered maximum number of places</b>	<b>4</b>
<b>Date of previous Care Inspectorate Wales inspection</b>	<b>17 and 18 November 2018</b>
<b>Dates of this Inspection visit(s)</b>	<b>26 November 2019</b>
<b>Operating Language of the service</b>	<b>English</b>
<b>Does this service provide the Welsh Language active offer?</b>	<b>This is a service which is working towards the Active Offer.</b>
<b>Additional Information:</b>	

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