

# Inspection Report on

**Clarke - Taylor LTD** 

Phoenix House
Phoenix Street Sandycroft
Deeside
CH5 2PD

## **Date Inspection Completed**

23/01/2020



### **Description of the service**

Clarke - Taylor is a registered care home providing personal care and accommodation for up to 23 people with a diagnosis of dementia in Sandycroft, Deeside. There is a registered person, Dawn Gittins and a manager has been appointed who is registered with Social Care Wales.

## **Summary of our findings**

#### 1. Overall assessment

People are happy with the care and support they receive from a well-trained and recruited staff team. Staff treat people with dignity and respect and are available in sufficient numbers to meet people's needs. People are able to take part in frequent, pre-planned activities and have choice in regards the food at mealtimes. Managers have oversight of the service provided and take the opinions of stakeholders of the home seriously.

#### 2. Improvements

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

#### 3. Requirements and recommendations

Section five of this report sets out the areas where the service provider is not meeting the legal requirements and recommendations to improve the service.

· Care planning.

### 1. Well-being

People living at the home have control over their day-to-day lives. People have input into the care and support they receive. People have choice over what activities they take part in and are given the opportunity to say what food they would like at meal times. We saw staff and people living at the home have developed good relationships. Staff treated people with dignity and respect, taking time to talk to people about issues which people have interest in. The provider takes the views of people seriously and has processes in place to find out what people and their relatives think about the service they receive.

People can be confident their physical, mental health and emotional well-being is taken seriously by the provider. We saw activities being undertaken which people enjoy. People also know what activities were being undertaken in the home well in advance so they can become involved if they so wished. Care and support documentation is written and in place in a timely fashion, which ensures people get the right care, and support and staff are aware of the likes and dislikes of individuals. People are referred to health care professionals appropriately ensuring their health needs are met.

People are protected from abuse and neglect. Care documentation and risk assessments are in place and reviewed as and when required to ensure people are safe. People are referred to other agencies where appropriate. Robust recruitment processes are in place and staff have received training in safeguarding. Policies and procedures are in place to protect people.

### 2. Care and Support

The service provider considers a wide range of information about individuals before they move into the home. We saw paperwork was completed by the manager to assess people's needs; this is detailed and shows how people need to be supported. Care documents reflect the views gathered from others including health care professionals in regards the individual. This information was valuable as we saw people receiving appropriate support.

People living at the home can be confident staff have accurate and up to date care documentation in place to ensure their care needs are met. People's views and opinions are sought when considering the care they receive. We saw accurate and detailed personal plans were in place, are reviewed regularly, and show staff what the individuals likes and dislikes are and how they want to be supported. Care plans also give staff accurate direction on how to support people. However, where people are living with dementia, the information on people's files needs to be specific to the individual rather than generic. We spoke with the manager about this who told us this recommendation would be implemented.

Care and support is provided through a service which consults with the individuals living there. This is reflected in the personalised care people receive. We saw people had choice in the activities they undertook, their meal options and daily routines. Care staff are employed in sufficient numbers to ensure people's needs are met in a timely fashion. We saw care staff, including the manager, spending time supporting and talking to individuals, treating people with dignity and respect.

People are safeguarded from harm and neglect. We saw proof that healthcare professionals are contacted in a timely fashion if required. Risk assessments are in place on people's files and reviewed at appropriate intervals. These risk assessments and care plan documents are detailed and give staff the tools to support people effectively.

Medication administration is safe and ensures the protection of people's health and well-being. We saw side effects of medication is considered. The recording and dispensing of medication by appropriately trained staff is carried out. We saw that though medication was stored securely, the temperature in the area where medication is stored is difficult to regulate. We spoke with the manager about this, who told us they would advise the provider.

#### 3. Environment

We saw the environment helps people achieve their personal outcomes. The layout of the home promotes the independence of those living there with adequate signage and lighting. Care workers photos, pictures and old vinyl records on the walls help people with poor memory. People are able to furnish their rooms as they wish which helps with their orientation and their sense of belonging. People are able to walk around the home freely and securely if they so choose.

Good arrangements are in place to ensure people's health and safety is ensured. Call bells allow people to alert care workers when assistance is needed, these are not intrusive. We saw servicing of equipment was being undertaken at appropriate times and testing such as fire, gas and electrical testing was being carried out regularly and in accordance with regulation. The home was clean and showed evidence of investment.

### 4. Leadership and Management

The service has good governance arrangements in place to ensure people are provided with good quality care and support. We saw that a comprehensive range of policies and procedures are in place, which staff use and are reviewed regularly. Managers also undertake a regular and comprehensive series of audits of the service to ensure people are receiving the care and support they require. The results of these audits are forwarded to the provider in a six monthly report.

There are good quality assurance processes in place, which includes detailed handovers for care staff, regular staff supervision and appraisals. We saw the responsible individual visited the service regularly, as required in regulations, and produced a regular report. It is evident from these reports the provider speaks with all stakeholders of the service regularly and feeds their findings back to both the manager and directors of the service. We also saw satisfaction surveys were undertaken, which gathered the views of people living at the home as well as staff working there. Regular meetings with care staff and people living at the home also take place to find out people's views on the service provided.

We saw appropriate numbers of well-trained care staff support people living at the home. Health care professionals were complimentary about the care and support given by staff to individuals at the home. We observed a mealtime which was not hurried, with care staff having enough time to speak to people in a caring and dignified manner. We saw records which showed the provider has comprehensive recruitment processes in place ensuring people are supported by care staff who are appropriately recruited and vetted.

## 5. Improvements required and recommended following this inspection

Areas identified for improvement and action at the previous inspection		
This is the first inspection		
since the service registered		
under "the Regulation and		
Inspection of Social Care		
(Wales) Act 2016		
NAME of the construction of the decree of the	for a district and the	
What the service needs to do as a priority	rrom this inspection	
N/A		
Other areas where improvement and action	on is required.	
Ensure, where people who are living with	Regulation 18 (4)	
dementia, their care plans reflect how		
dementia affects the individual.		

### 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. Two inspectors made un-announced visit to the service on 23 January 2020 between 9.00am and 3.45pm.

The following methods were used:

- We looked at three personal files and associated documents.
- We looked at minutes from staff meetings. We looked at quality assurance reports, staff records, a training record, and a staff rota and management audits.
- We spoke with two visitors to the home, three staff, one professional, and the manager.
- We viewed the premises including some people's bedrooms, communal areas and the laundry.
- We used the Short Observational Framework for Inspection 2 (SOFI2) tool. This SOFI2 tool enables inspectors to observe and record care to help us understand the experience of people who cannot communicate with us.
- We issued questionnaires to obtain feedback. We received:
  - 1 response was received from a professional

Further information about what we do can be found on our website: <a href="https://www.careinspectorate.wales">www.careinspectorate.wales</a>

## **About the service**

Type of care provided	Care Home Service
Registered Service	CLARKE-TAYLOR LTD
Responsible Individual	Dawn Gittins
Registered maximum number of places	23
Date of previous Care Inspectorate Wales inspection	This was the first inspection of this service since it was registered under The Regulation and Inspection of Social Care (Wales) Act 2016.
Dates of this Inspection visit(s)	23/01/2020
Operating Language of the service	English
Does this service provide the Welsh Language active offer?	The service does not provide an "Active Offer" of the Welsh language.
Additional Information:	

**Date Published** 31/03/2020