



Arolygiaeth Gofal a Gwasanaethau Cymdeithasol Cymru
Care and Social Services Inspectorate Wales

Inspection Report on

**Rosendale Park Care Home
Lydstep
Tenby
SA707SQ**

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Description of the service

Rosendale Park Care Home is registered with the Care and Social Services Inspectorate Wales (CSSIW) to provide care and accommodation for up to six adults with a learning disability.

There were five people living in the home, four in the main house and one in an adjacent cottage.

The service was registered in 2002 and is part of Pembrokeshire Resource Centre Ltd. The registered manager is Naomi Wolverson, but at the time of the inspection she was on leave and two staff were acting up into this role on a temporary basis.

Summary of our findings

People living at Rosendale receive good quality care and support from a motivated and well led team of staff who value their work and the opportunity to make a positive difference to people.

There is an emphasis on quality and there are robust governance arrangements in place to monitor the quality of the service and also to ensure the quality meets the requirements set out by the National Autistic Society.

People are encouraged to participate in a range of activities which are important and enjoyable to them.

Some parts of the home would benefit from some redecoration, but on the whole, the home is clean and well maintained.

1. Improvements

The previous inspection, on 25 April 2017, identified there were no areas of non compliance.

However, following that inspection, we notified the provider that they were not fully compliant in relation to the following:

- a) Regulation 17 as there were some gaps in people's records. We did not find evidence of any gaps in people's care records during this inspection.
- b) Regulation 18 as there was evidence that supervision was not always carried out in accord with the National Minimum Standards. During this inspection we found that staff received supervision every two months and found the supervision process helpful, where areas of their practice was discussed in an open and mature way. However, supervision records were not available in each staff members files and staff were not sure about the frequency of supervision.

2. Requirements and recommendations

Section five of this report sets out the actions service providers need to take to ensure the service meets the legal requirements and recommendations to improve the quality of the service provided to people in the care home.

Recommendations are made in relation to the following:

- 1) The provider ensures that all files contain records of quarterly and monthly reviews prepared by staff.
- 2) The provider ensure that references are available for inspection in each staff members file.
- 3) The provider ensures that a record is maintained of all supervisions carried out.

1. Well-being

Summary

People are able to choose how they spend their time, and staff make every effort to ensure that people's choices as well as safety and communication needs are met.

Our findings

People's potential is maximised. This is because we saw that care plans contained information about activities that were important to people and noted that staff ensured such activities were incorporated into care plans. For example, one person was noted to like swimming and we saw they went weekly. Another person told us they enjoyed going to the gym and also that staff took them weekly. One person told us they liked going out for rides in the car and during the inspection we saw that staff took them out for a ride. Each person had a detailed risk assessment to ensure, as far as possible, that outings were a safe and pleasurable experience for people and staff.

Some people told us they liked spending time at Bangeston Hall, and in particular, spending time in the garden. People were particularly appreciative of Lesley, the Horticultural Therapist who we observed on an earlier inspection to Bangeston to be highly motivated and sought opportunities to enhance people's quality of life. One person told us "*I like gardening with Lesley. I like making bird boxes*". Another person told us they liked going to the beach and mentioned the names of several beaches they had recently been to.

We were told that one person was particularly skilled at maths and staff told us they would engage the person, where possible, in doing some maths questions using a white board. We also saw evidence of games having been played using the white board with that person.

Three of the people told us they enjoyed cleaning and helping with the cooking and we saw one person independently changing their bed and tidying their room. One person told us they enjoyed shopping in the supermarket and that they usually went shopping with staff to buy the food for the home.

We were told that only very occasionally were activities cancelled due to staffing shortages, and that if additional staff were required, then the staff group was very flexible and would offer to work additional hours to ensure that activities did go ahead as planned. A relative stated there was "*always*" activities or entertainment taking place within the home

We saw that some people attend art sessions and there were detailed and helpful summaries of people's progress within the art groups. We saw that people's work was displayed in the main meeting room at Bangeston Hall and also in the office at Rosendale.. All of these things showed that people can generally do things that matter to them.

Staff use a range of methods to communicate with people. We saw that some people were able to communicate verbally, whilst others had either little or no verbal communication. We

noted that staff had built up a very good knowledge of one person's method of communication and were sensitive to their mood and adapted their interventions accordingly. We observed the person becoming distressed and this was dealt with by staff in a patient; calm and reassuring way which resulting in the person very quickly settling without any injury to the person or staff.

From our observations, it was apparent that staff had developed a good understanding of people and the ways they could most effectively communicate with them.

We saw there was free access to the gardens and other parts of the home which meant that most people were able to move freely between the house and the garden and secure car park area and we were told that there had been no instances where people had left the home without the knowledge of staff.

We noted that care plans contain the staffing requirements to maintain people's safety when they are within the home, as well as in the local community.

People can feel safe and protected from abuse. One person was considered to be in need of some surgery and staff had sought the opinions of health professionals and also ensured the correct legal authorities were in place as the person was unable to give informed consent to the procedure.

We are satisfied that people's rights are maintained and the measures put in place to maximise people's safety is proportionate.

2. Care and Support

Summary

People are cared for by a team of staff who are motivated and well led by a team of senior staff and managers who have a good understanding of people's needs.

Our findings

People can be confident they receive proactive and preventative care, and that their range of care needs are anticipated. This is because we saw that both monthly and quarterly review meetings take place to consider the progress made by people and also to discuss any changes that may be required to people's care and support plans. However, there was not always evidence in the care files that these reviews had taken place. Managers were wholly confident they had and we have asked the provider to ensure that all relevant information is available for staff, and others, within the current folders.

These reviews ensured that any changes in people's support needs were considered and addressed.

People are supported to remain as healthy as they can be. This is because one person told us they had recently seen a dentist and we were told of plans for another person to have some dental work done and staff were planning the safest and most effective way to manage their care before, during and after the treatment. We saw that medication was administered as prescribed and we noted very little use of "as required medication" which demonstrated to us that staff manage challenging behaviour without the recourse to additional medication.

People have been referred to a range of health professionals including psychiatry; psychology and speech and language therapy. This ensures that people's range of care needs are effectively met.

People can enjoy healthy and nutritious food. This is because we saw that meals are prepared by staff and people in the main kitchen, and staff also prepare separate meals in the cottage for the person living there. We noted there was a menu and staff demonstrated a good understanding of people's likes and dislikes. The menu appeared varied. Food is bought from a local supermarket and prepared freshly for each meal. People we spoke with were wholly complimentary about the food and some told us how they enjoy helping staff with cooking. One person told us the food was "*lovely*" and another described it as "*good*". We are satisfied, from the information we were provided with, together with what people told us, that people's dietary needs are met by skilled catering staff who understand the importance of good nutrition.

We were told that restraint was used very infrequently, with staff using other strategies where possible. During the inspection we observed staff intervene to prevent one person from injuring themselves and this was done calmly and without the need for restraint. We did not find any evidence, in the records we reviewed, that restraint had been used in the last two weeks.

This demonstrates that people can be confident they receive appropriate care and support to meet their needs.

People feel they matter because staff show due regard for their privacy and dignity. We were told that there was very little assistance that people required in respect of the personal care needs as people were mostly independent in relation to this.

We noted that staff were sensitive to the mood of one person and how extra people being in the home could adversely affect them. We saw that staff spoke with people in a relaxed and friendly way and people appeared comfortable with the staff.

None of the bedroom doors had locks on them due to the nature of the service but there had been no issues of people entering the wrong rooms, possibly to the high staffing levels as well as the relationships between people living in the home.

People can, therefore, be confident their privacy and dignity needs are met by caring staff.

Each person has an Individual Support Plan as well as a folder where daily activities and observations are recorded. We noted that care plans were detailed and informative, and staff told us they had enough time to read people's care plans. In addition to the care plans, were risk assessments for a range of areas including swimming; going to the dentist and travelling by car. Risk assessments were reviewed monthly. Each person had a page which included information about who was important to them.

Daily care records were comprehensive and contained relevant information about the person's mood and the activities they participated in.

Staff were confident that they were given all relevant information about people and any changes to their care and support needs. This was using a communications board in the cottage and a diary in the main house. This ensured they had a good understanding of the person's current care needs.

Whilst most of the care records were personalised, we saw that the personal statement for each person was the same and discussed with staff just how individualised and personal it was. The acting manager agreed to consider this with the staff team.

From our observations, together with the information provided by staff; people and care records we consider that people can be confident their care and support needs are recorded and understood by staff.

3. Environment

Summary

People live in a home that is clean; comfortable and safe, although some areas would benefit from some maintenance and repair.

Our findings

People have access to safe and pleasant outdoor space which is easily accessible. This is because we saw the garden area for people living in the main house, was reasonable well maintained. The home had some rabbits and a guinea pig which staff and people helped to care for. There was seating in the garden and we saw some people spending time outside the home. We were told that the herbs grown in the garden are used when cooking.

This demonstrates that people are able to do things for themselves because of the layout; facilities and support available to help promote independence.

People are cared for in clean and mostly well kept surroundings. Staff told us they were responsible for cleaning the home and also told us they had enough products to do this effectively. We saw the communal areas and people's bedrooms appeared clean. However we noted there was some evidence of water damage on ceilings in the communal areas which would benefit from some repainting. One person had recently caused some damage to their room and we were told this would be repainted just as soon as the maintenance team were able to do it.

There was some evidence of wear and tear throughout the home. This is because the wall behind a reclining chair was damaged where the chair rubbed against the wall, and the area of wall next to the door frame in one person's room was damaged. We were told the person often hit the wall when distressed.

Personal and communal areas were generally sparsely decorated, due to the risk of over stimulation for people living in the home. We saw that some parts of the home had photographs of people, and people told us they had been able to personalise their bedrooms by purchasing duvets covers etc, of their choice. One person happily showed us their room and pointed out their toys and some pictures drawn for them by staff.

One relative noted in the questionnaire "*The house was very clean and safe*". People told us they were satisfied with the cleanliness of the home and also of their enjoyment in assisting with some of the housekeeping duties.

From the comments made by people and their relatives, together with our observations, we consider the environment provides people with a safe and comfortable place to live.

4. Leadership and Management

Summary

Quality is monitored through robust governance arrangements, both internal and external, which ensure that services and equipment is safe and effective.

People's views, together with the views of relatives and staff are sought to ensure ongoing service improvements.

Our findings

There are robust governance arrangements in place to monitor the quality of the service. The governance arrangements cover the four services within the group which ensures a level of consistency.

The service is accredited by the National Autistic Society who monitor the quality of the service. We were told an advisor visits the service every six weeks and this provides an additional level of assurance regarding the quality of care provided.

We also noted that some people have ongoing input from a range of health professionals who observe and monitor the quality of care provided to people.

A quality assurance meeting takes place and this is attended by a range of staff. A quality assurance report is written each year and people's views about the service were noted to be wholly positive. Those positive comments were reflected in the comments made in the questionnaires sent to relatives, as one relative wrote "*They have a lovely sense of humor and are very calming*". Another relative stated "*Naomi – lovely lady*" and went on to describe the staff as "*always helpful*".

One relative responded that they had been able to contribute to the person's care, adding "*Have suggested ideas and they have been considered*".

These demonstrate the service has shared values with the aim of enhancing the quality of care that people receive.

Staffing levels ensure that people's needs are met. We were told that Rosendale had one vacancy and these hours are picked up by staff wishing to work additional hours. Whilst this ensured a level of consistency for people, it was important that staff were not working excessive hours and all of the staff we spoke with confirmed that they worked a reasonable number of hours and never felt pressured to pick up additional duties.

We were told that activities for people were "*very rarely*" cancelled for people because of staffing difficulties.

There were two acting managers and a shift leader supported by care staff. Staff told us there were enough staff on duty to meet people's needs and we observed staff to be relaxed and unhurried. One person described the staff as "*good*" and said "*yes*" when asked if they were kind to them.

Both the art and music therapists visited the home on a weekly basis and people we spoke with enjoyed those activities.

This means that people can be assured that they benefit from a service where best use is made of resources.

Staff feel supported and valued by their managers. One member of staff told us how proud they were to have been offered a temporary promotion and others told us how they were encouraged, and supported, to complete additional training.

Staff also presented as very motivated. Some staff had come into care work after other careers and all of those we spoke with said it had been a positive move for them. One staff member told us how proud they were of the positive contribution staff had made to people, speaking specifically about the reduce number of adverse incidents involving one person. One staff member told us *"I just love my job"*, another told us *"Best job I have ever had"* and another told us *"I like seeing the guys progress"* and went on to describe how one person's self injurious behaviour and also assaults against staff had reduced. One staff member told us *"I absolutely love it.. there is an actual meaning to my job.. it is worthwhile"*. A strength that was expressed by several of the staff we spoke with was how well the staff worked together as a team. One staff member told us *"we just get on"*.

Such motivated staff can only have a really positive impact for good outcomes for people in relation to their care and support.

Staff were unclear about the frequency of supervision, but did tell us they met with their manager on a regular basis and found this to be a helpful process. One said it was monthly and another said every 10-13 weeks. There was only one record of supervision having been carried out during 2017 in staff files. The director was able to forward supervision details which confirmed that supervision has taken place in accord with the National Minimum Standards. We discussed the importance of having the information held within staff files for people to refer back to and for good governance.

The measures in place to supervise; support and train staff ensure that they are well led; managed and trained.

People can be confident that staff are appointed following a robust recruitment process. We looked at four staff files and found they contained almost all of the required information. However, one file did not have details of any references. The director was quickly able to assure us that they were at the head office but the omission had been that they had not been photocopied along with the other information. The impact of this is negligible as the information was available, just not within the copied file in the home.

5. Improvements required and recommended following this inspection

5.1 Areas of non compliance from previous inspections

None

5.2 Areas of non compliance identified at this inspection

None

5.3 Recommendations for improvement

- The provider ensures that all files contain records of quarterly and monthly reviews prepared by staff.
- The provider ensure that references are available for inspection in each staff members file.
- The provider ensures that a record is maintained of all supervisions carried out.

6. How we undertook this inspection

We undertook a full inspection of the service looking at the four themes. The methodology used at this inspection included:

During the inspection we spent time with the following:

- Five people;
- Five staff;
- The acting manager and one of the Directors;

We looked at:

- Two care records of people living in the home;
- Four staff files;
- The annual quality report;
- Completed questionnaires from relatives and staff.

In addition, we

- Toured the property;
- Observed care practices and interactions between staff and people.

Further information about what we do can be found on our website www.cssiw.org.uk

About the service

Type of care provided	Adult Care Home - Younger
Registered Person	Pembrokeshire Resource Centre Ltd
Registered Manager(s)	Naomi Wolverson
Registered maximum number of places	6
Date of previous CSSIW inspection	SA70 7SQ
Dates of this Inspection visit(s)	14/06/2017
Operating Language of the service	English
Does this service provide the Welsh Language active offer?	No
Additional Information:	