



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

Care and Social Services Inspectorate Wales

Care Standards Act 2000

Inspection Report

Haulfryn

Pistyll Hill
Cymau
LL11 5ER

Type of Inspection – Focussed
Date of inspection – 22nd November 2012
Date of publication – 08/01/2013

You may reproduce this report in its entirety. You may not reproduce it in part or in any abridged form and may only quote from it with the consent in writing of Welsh Ministers

Please contact CSSIW National Office for further information
Tel: 0300 062 8800
Email: cssiw@wales.gsi.gov.uk

www.cssiw.org.uk

Summary

About the service

Haulfryn is registered to provide personal care for 24 people over the age of 65 years, with a diagnosis of dementia. Two people under this age may also be included in the numbers. It is can be found on the outskirts of Gwersyllt by following a country lane to its location. It has splendid views of the surrounding countryside and the entrance to the drive is made secure by a large gate.

It is owned by Haulfryn Care Limited and the registered manager is Sandra Regan who has achieved NVQ 4 in the management of care both she and the deputy are registered with the Care Council for Wales.

What type of inspection was carried out?

This was an unannounced visit focussing on the Quality of life for people who live in the home. The methods used to determine this were:

Speaking with people who live in the home, a visiting relative, staff and the manager.

Reading care plans.

Reviewing the information included in the self assessment document and completed staff and relative questionnaires, received before the inspection.

Observation of people through the use of the Short Observational Framework for Inspection (SOFI) tool. The SOFI tool enables inspectors to observe and record life from a service user's perspective; how they spend their time, activities, interactions with others and the type of support received.

The inspection took place on the 22nd November 2012 between the hours of 10.20 am and 1.40 pm.

The "we" refers to the Care and Social Services Inspectorate Wales (CSSIW).

What does the service do well?

The self assessment document identifies that the service maintains a high level of customer satisfaction. This was evidenced in quality reports and local authority reviews. Additionally relatives commented positively about staff and the care they provide one person stated that "Staff are always attentive and kind". This benefits people by encouraging a sense of belonging in the service.

The provider recognises the importance of ongoing development of the service. Most recently this has taken the form of specific training for key staff in the area of nutrition. This will enable people to remain healthy because of the attention given to good nutrition and hydration.

There has also been an emphasis on dementia care. This will promote confidence in people using or linked to the service knowing that staff are competent and confident meeting their particular needs.

What has improved since the last inspection?

A compliance notice was issued following the inspection last year in relation to poor manual handling techniques. Confirmation was received that this had been addressed.

At this visit the manager confirmed that she is a manual handling trainer and observes staff practice on a regular basis. Staff meetings ensure that any concerns regarding equipment can be discussed. This advises the provider if equipment needs to be updated or replaced. There are two hoists and numerous slings to ensure the correct equipment is available for each individual.

Profiling beds have been purchased which protect the safety of both people living in the home, from falling from a height whilst in bed and staff when manouvering people when they are in bed.

What needs to be done to improve the service?

Although observation of practice demonstrates that staff understand the individuality of people living in the home, the detail in the care plan does not describe how specific needs are met. Staff should complete the care plans in a way that evidence's the person centred care approach that occurs in the home. This would ensure that the management of needs is carried out appropriately, respecting the person's individuality. In addition to providing evidence of what is actually taking place.

The provider should ensure a contingency plan is in place to ensure staff are effectively deployed at mealtimes. This will ensure that the person is recognised as unique and they are valued as an individual. Assistance should be readily available to ensure a person's dignity is not compromised.

The provider should carry out risk assessments of all radiators in the service and where necessary re cover them. This would ensure that the risk to the safety of people who live in the home is minimised.

Quality of life

Overall we found that people using the service were able to exercise their rights. In general people were engaged in activities of their choosing and care plans demonstrated a good understanding of the needs of the individual. The deployment of staff at lunch time must be reviewed to ensure the dignity of individuals is respected.

People experience appropriate, responsive care from staff with an understanding of their needs and preferences. One relative commented that a “get to know you” form was completed upon admission. It enables staff to recognise a person’s individuality, taking into account their interests, likes, dislikes and daily routine. The relative stated that, as a result, staff treat her relative in the way “she would choose if she were at home”. We examined care plans containing assessments for all aspects of care and evidence of reviews relating to the person. Risk assessments were in place covering all aspects of care and overall, they contained detailed advice. One environmental assessment required additional information to further ensure the safety of the person, the manager agreed to carry this out.

People receive care from staff able to cope with difficult situations without becoming stressed or resentful. We observed an incident involving a person whose behaviour was disturbing other people. Staff managed the situation well, they recognised the person’s individuality with an open attitude, without accusation, and diffused the situation quickly. Unfortunately the person’s care plan did not provide detailed information.

People remain healthy because their needs are anticipated and they are enabled to have access to specialist or medical support. The physical needs of two people living in the home require input from district nursing staff. The care plans contained evidence of the care and advice provided by other professionals and the manner in which the treatment is delivered by care staff. One relative commented that “staff are prompt calling in professionals”

People benefit from a wholesome diet with attention to nutrition and hydration. Drinks were offered throughout the morning and the lunch was freshly prepared. This was confirmed by a relative who stated that food is “very nutritional and always fresh.” People also have choice and influence. Two alternatives were available and we noticed that the meals served were of different size portions, and served in bowls, side plates or dinner plates dependent upon the ability and choice of the individual.

People’s social needs are met in addition to their physical needs. Each morning a member of the care team becomes the activities person and activities with small groups of people take place. The service offers a number of different communal areas which enable group or individual activities to take place. We observed staff spending individual time with different people, sitting and talking using and responding to the use of fun and humour. A group of people were sitting comfortably in the smaller lounge enjoying a ballroom dancing DVD. A member of staff had treated the group as full and equal partners by providing them with a choice of DVD’s, bringing the chairs closer to the television so that people could see the screen clearly, making each person comfortable and bringing tea and biscuits. When she left people sat watching the programme chatting and making comments about the programme and generally enjoying each others company. They were active, positively occupied and stimulated.

Quality of staffing

This inspection focussed on Quality of life issues. CSSIW did not consider it necessary to look at the Quality of staffing on this occasion because the self assessment form did not identify any issues. This theme will be considered in depth at future inspections.

We did, however, observe staff interaction with people who live in the home.

People develop relationships and experience warmth and belonging. This was evident when observing staff members with people living in the home. Time was given to each individual, the level of support required was assessed and provided, an explanation was given about what was happening and the task itself was carried out with warmth and at a leisurely pace. However, at lunch time we observed two separate incidents where staff members, seated between two people to assist them with their meal, alternated between each person. This meant that the back of the staff member was towards one person, effectively ignoring them. This was discussed with the manager who stated that this is not common practice. A member of staff was absent and the deputy was attending training which would not finish until 1.00 pm. The deputy would usually support staff at lunch time should there be any staff absence.

Observation throughout the morning demonstrated that staff are aware of the need to respect privacy and dignity and that this does occur. Measures should be in place to ensure that if the number of staff available at lunchtime is reduced, people are still given time to enjoy their meal on a one to one basis and in a relaxed manner.

Quality of leadership and management

This inspection focussed on Quality of life issues. CSSIW did not consider it necessary to look at the Quality of leadership and management on this occasion because the self assessment form did not identify any issues. This theme will be considered at future inspections.

Quality of environment

This inspection focussed on Quality of life issues. CSSIW did not consider it necessary to look at the Quality of environment on this occasion because the self assessment form did not identify any issues. This theme will be considered at future inspections.

However, we did note that the radiator in the conservatory was extremely hot to the touch. This was brought to the attention of the manager who was advised to carry out a risk assessment of all radiators and, where necessary, cover them. This will reduce the risk of injury to people who live in the home.

Two relatives had commented that clothing was very creased when it was returned from the laundry, items were not folded or thrown into closets and clothes were put away in the wrong rooms. This was brought to the attention of the manager who agreed to review this practice.

How we inspect and report on services We conduct two types of inspection; baseline and focussed. Both consider the experience of people using services.

- **Baseline inspections** assess whether the registration of a service is justified and whether the conditions of registration are appropriate. For most services, we carry out these inspections every three years. Exceptions are registered child minders, out of school care, sessional care, crèches and open access provision, which are every four years.

At these inspections we check whether the service has a clear, effective Statement of Purpose and whether the service delivers on the commitments set out in its Statement of Purpose. In assessing whether registration is justified inspectors check that the service can demonstrate a history of compliance with regulations.

- **Focussed inspections** consider the experience of people using services and we will look at compliance with regulations when poor outcomes for people using services are identified. We carry out these inspections in between baseline inspections. Focussed inspections will always consider the quality of life of people using services and may look at other areas.

Baseline and focussed inspections may be scheduled or carried out in response to concerns.

Inspectors use a variety of methods to gather information during inspections. These may include;

- Talking with people who use services and their representatives
- Talking to staff and the manager
- Looking at documentation
- Observation of staff interactions with people and of the environment
- Comments made within questionnaires returned from people who use services, staff and health and social care professionals

We inspect and report our findings under 'Quality Themes'. Those relevant to each type of service are referred to within our inspection reports.

Further information about what we do can be found in our leaflet 'Improving Care and Social Services in Wales'. You can download this from our website, [Improving Care and Social Services in Wales](#) or ask us to send you a copy by telephoning your local CSSIW regional office.