



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

## Inspection Report on

**85 Brecon Road**

**Abergavenny**

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## **Description of the service**

85 Brecon Road is located in Abergavenny within walking distance of the town centre. The service is owned by 'The Priory Group' and the registered manager is Rachel Russell. The home provides care for up to five female adults with mental health support needs.

## **Summary of our findings**

### **1. Overall assessment**

Overall, the well-being of people living at the home and the quality of their care and support is good. They enjoy a varied range of planned activities; lead active and fulfilling lives and are encouraged to maintain relationships. The culture employed is supportive and enabling and people demonstrated contentment and a sense of belonging at the home.

### **2. Improvements**

The quality of the home's leadership and management is mainly good as well as the consistency of care and support provided for people.

The following improvements have been made since the last inspection:

- The opportunities for social and leisure activities have increased and have included several group holidays for service users.
- Meetings have been developed for homes' managers to share best practices and discuss any 'lessons learned' for instance as a result of incidents.
- Working relationships have developed further with a local hospital to improve opportunities for service users to make the transition to community living. This has included one service user living independently for the first time in ten years.
- Additional resources have been made available to support staff development and qualifications.

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

No areas of non compliance were identified and our recommendations for improvement are set out in Section 5 of this report.

## **1. Well-being**

### **Summary**

People are settled and content and experience a sense of belonging. They are compatible with the people they live with and have constructive and enabling relationships with staff. There were four people living at the home and one; that was not present during the inspection was attending visits in preparation for moving in. Overall; the well being of people at the home is very good. They all looked well and well presented and enjoyed activities and relationships that supported their well –being and self worth.

### **Our findings**

People are valued and treated with respect. We observed that the four ladies looked well and were well presented and they told us that they felt valued as individuals and that staff treated them with respect. It was evident in our conversations with staff that they spoke fondly of the people they cared for and demonstrated good knowledge of their individual circumstances. Two of the ladies seemed confident in them selves and told us that they liked living at the home. One of the others seemed less self assured and told us that they hoped to move to accommodation at some stage where they would have greater independence. Staff confirmed that this was possible but said this created some uncertainty for them. We saw several ‘birthday balloons’ in the dining room and two of the ladies told us that they were always made a fuss of on their s birthdays and at Christmas. One of them showed us their ‘nails’ and told us that they had recently had them varnished at a local salon. It was clear that they were proud of their nails and this provided evidence that their self image was promoted at the home. People feel a sense of security and belonging and positive self worth.

People lead active and fulfilling lives. The manager showed us weekly planners and told us that they try to ensure the ladies keep them selves busy. Two of the ladies told us that they regularly ate out at local pubs and restaurants; that they went bowling and to a quiz night and that they went dancing on a monthly basis in a neighbouring town. One of them attended a computer skills course and another told us they enjoyed talking to people at a local market and shopping for jewellery. The manager told us that two of the ladies had participated in group holidays whilst they had previously been anxious going out, even in the local area. Another told us they were planning a holiday at Disney Land in Paris. People engage in their local community and enjoy a varied range of social experiences.

People are supported to develop and maintain relationships. All of the ladies told us that they had positive relationships with each other and with staff members and we observed that staff were supportive and nurturing of them. It was evident in one of our conversations that one of the ladies did not find it easy to form relationships but they confirmed that they did get on well with some of the staff. One of them told us that they were supported to maintain close family relationships and showed us pictures on their bedroom walls and in an album of overseas holidays they had enjoyed with their family. The manager and two of the ladies told us that they were providing reassurance to the lady who was planning to come to live at the home so they would feel more confident about moving in. People are not socially isolated and feel supported by the people they live with and by the staff.

## **2. Care and Support**

### **Summary**

People receive consistent care and support from staff that know them well.

### **Our findings**

Staff provide support which is motivational. Two of the ladies provided very positive feedback about the care and support they received. They told us they enjoyed being with the staff and that they were always available if they need anything or if they wanted to talk about anything. We saw that the ladies and staff had fun together and that the staff and the manager presented an up beat and motivational approach with them. We also saw that staff presented themselves as constructive role models and encouraged the ladies to be confident. People are confident and encouraged to fulfil their potential.

Staff are clear about people's needs and monitor their progress. We observed in our conversations that staff had a good understanding of each of ladies' individual needs as well as their life histories and family relationships. We saw that information in case files was comprehensive and included detailed care plans, risk assessments and monthly reports that key workers had written about their progress. We saw in records that people had the support of an independent advocate; that staff recognised when they needed additional support for instance if their mood was low and that they were encouraged to develop self responsibility. We saw in addition to the comments made by the key workers that the 'senior support worker' and the manager also provided their comments about the progress people had made. The voice and the views of the service user however were not evident in these review reports though the manager said they were consulted as part of this process. Staff have a good understanding of people's needs and progress but better evidence is necessary of the views and involvement of service users in goal setting and reviewing their progress.

People are supported by staff who are positively motivated and well trained. All staff had permanent contracts of employment and there were no vacancies at the time of the inspection. The senior support worker told us that there were two staff members on duty at all times, including night time and that the registered manager and the deputy manager 'floated' between this and another home they were responsible for. They told us that a 'shift leader' was always designated and that all staff received regular supervision and appraisal of their work role. The senior support worker and one staff member told us that they had good access to training and that they received good support for their professional development. The manager told us that all staff had completed QCF level 2 qualifications; that the majority had completed or were undertaking QCF level 3 qualifications and that the two senior support workers and the deputy manager were being supported to undertake QCF level 5 management qualifications. People are supported by staff that are well trained and positively motivated and promote and monitor their progress.

### **3. Environment**

#### **Summary**

People live in accommodation that is well maintained and homely and positively supports their well –being.

#### **Our findings**

People live in accommodation which meets their needs and supports their self worth. The house is and set over three floors and was seen to be spacious and well presented throughout. There is off road parking for the home's car and the gardens provided a pleasant space for people to spend time outside.

There was a large entrance hallway with one of several quite grand chandeliers and a large lounge with comfortable sofas and a television. The kitchen was to the rear of the property with an adjoining dining room with comfortable chairs and this appeared to be the hub of the home during our visit. People told us that meal times were pleasant and sociable occasions and that their meals were of good quality.

The service users' bedrooms were seen to be personalised to reflect their individual tastes and were seen to be smartly decorated and had good quality furniture and a comfortable chair for watching television and reading etc.

The bathrooms and shower facilities all looked to be in good order and all aspects of the home were very well presented. There were no signs of disrepair and we were told that any maintenance was always carried out promptly. There were some complications with the operation of the central heating when we visited though the house was not cold and supplementary heating / radiators were being used. The manager said that the central heating problem was related to new electronic thermostats and that this issue was being addressed.

A key pad entry system was in place to provide security on the gate of the front garden. This had been installed as a result of safeguarding concerns for one of the service users and the manager confirmed that this was subject to DOLS (deprivation of liberty safeguards) and an individual risk assessment which was subject to ongoing review. They said that this was only used at night. The home is spacious and homely and reflects the very positive way people are treated and valued at the home.

## **4. Leadership and Management**

### **Summary**

People live in a home that is well managed and its ethos is people centred; supportive and enabling. The registered manager has been responsible for the home for four years and is supported by a deputy manager. They are responsible for the management of this and another home that is in close proximity.

### **Our findings**

Information about the home is clear and comprehensive. The statement of purpose dated 'to be reviewed April 2018' conveyed a people focussed ethos and included comprehensive information about the operation and resourcing of the home. It included general information about consultation but did not make clear how people would be consulted within quality assurance processes intended to monitor, review and improve the care provided at the home. We recommended that it also makes clear any arrangements that are in place or planned to provide the service for people using the Welsh language. The 'service user guide' was also comprehensive and reflected a rights based approach to supporting people though we were told that these were only given to people when they moved in and not when they were first considering a placement at the home. People can be confident that information provided about the home accurately describes the service.

Quality assurance systems need improvement. Visits had been made on behalf of the registered provider to monitor the standard of care provided at the home. The report of a visit dated 16/01/2018 stated that no consultation had taken place with service users and there was very little evidence of consultation with staff. The report of the visit dated 7/09/2017 provided evidence that consultation had taken place with service users as well as consultation with the deputy manager; though the focus of this discussion was not explicitly focussed on the standard of care provided at the home. The reports of both visits showed that the visitor had undertaken a considerable range of checks on documentation and records but there was no evidence that they had considered the findings of their visit to form and provide any specific 'opinion' about the standard of care provided at the home. We saw reports of 'quality walk around visits' which could be seen to indicate a commitment to quality assurance processes though these seemed more suitable for clinical than community based services. There was no evidence that the findings of these visits informed the quality of care review process.

An annual quality assurance report dated April 2017 provided no evidence of consultation with people living at the home or other stake holders or any plans for the improvement or development of the service. A recommendation was made for improvement in this area at the last inspection and this will be followed up at the next inspection. People cannot be confident that they will be consulted about the standard of care provided at the home or that its ongoing improvement is planned for.

Staff confirmed that they received good support from the home's manager and for their ongoing professional development. They said that the manager was supportive and enabling of staff and committed to the ongoing improvement of the service. They also said they were confident that they would address any issues arising in the care of service users or in regards to staff conduct.

The manager told us about improvements that had been made since the last inspection. They said that effective working relationships had been developed to support the transition of people from a local hospital to the home and that five service users had since moved on to less supported accommodation. They said that quality assurance processes had been improved but needed further development and that home's managers attended meetings to share best practices and discuss any lesson learnt for instance from incidents etc. They also said that two senior support worker roles had been introduced to improve staff development.

The home's self assessment dated 2017 stated that the service is provided in the English language only. We have recommended that the manager considers 'More Than Just Words' A Strategic Framework for Welsh Language Services in Health, Social Services and Social Care and make clear any plans in this regard in the statement of purpose.

Overall; we found that the ethos of the home was supportive and enabling. That people were cared for by motivated and well trained staff and the premises were homely and positively supported their well-being. The home has been effective in understanding and meeting the needs of people and supporting the ongoing development of staff and managers. Improvement is necessary to quality assurance processes and better evidence is needed of the voice and views of service users in placement planning and reviewing; and quality assurance processes.

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

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

No areas of non compliance were identified at the last inspection.

### **5.2 Recommendations for improvement**

We recommend the following:

- That the statement of purpose makes clear how people will be consulted within placement planning and reviewing and quality assurance processes.
- That there is clear evidence of the views and the voice of service users within placement planning and reviewing documentation.
- That there is clear evidence of the views and the voice of service users and others within quality assurance reports.
- That reports of visits made on behalf of the registered provider to monitor the standard of care provided at the home; include better evidence of consultation and the views of service users and others about the standard of care provided at the home and their ‘opinion’ about the standard of care that is provided.
- That a service user guide is given to people when they are first considering a placement at the home.
- That the manager considers ‘More Than Just Words’ A Strategic Framework for Welsh Language Services in Health, Social Services and Social Care and makes clear in the statement of purpose, any arrangements that are in place or planned to provide the service for people using the Welsh language.

## **6. How we undertook this inspection**

This was a full inspection undertaken as part of our inspection programme. We made an announced visit to the home on 26 January 2018 between 9.45am and 4.30pm.

- We consulted with each of the people living at the home and with the staff on duty and the registered manager.
- We viewed documentation and records including information held by CIW and the premises and garden.

Further information about what we do can be found on our website [www.cssiw.org.uk](http://www.cssiw.org.uk)

## About the service

Type of care provided	Adult Care Home - Younger
Registered Person	Parkcare Homes (No.2) Ltd
Registered Managers	Rachel Russell
Registered maximum number of places	5
Date of previous CSSIW inspection	21/03/2016
Dates of this Inspection visits	26/01/2018
Operating Language of the service	English
Does this service provide the Welsh Language active offer?	No
<b>Additional Information:</b>  The self assessment completed by the home for 2017 states that the service is provided in the English language only.	