

# Inspection Report on

The Old Vicarage

The Old Vicarage Church Lane Cardiff CF3 2UF

## **Date Inspection Completed**

04/07/2023



### **About The Old Vicarage**

Type of care provided	Care Home Service
	Adults Without Nursing
Registered Provider	Orbis Education and Care Limited
Registered places	10
Language of the service	English
Previous Care Inspectorate Wales inspection	[Manual Insert] 23 August 2021
Does this service provide the Welsh Language active offer?	This service does not provide an 'Active Offer' of the Welsh language and does not demonstrate a significant effort to promoting the use of the Welsh language and culture.

#### Summary

The Old Vicarage is a care home for younger adults with needs associated with autism and learning disabilities.

People contribute to their care planning and they actively make decisions about their day-to-day care. They have positive relationships with committed, respectful care staff who follow their personal plans to ensure people are safe and can do the things they enjoy. People are getting out into the community, taking regular exercise and are encouraged to eat healthily.

Care staff receive training, supervision and support to enable them to carry out their role. They know their safeguarding duties and they support people in the least restrictive manner. There are sufficient numbers of care staff each day, with consistent agency care staff meeting the short falls. A positive team culture is evident.

Effective quality assurance measures show the service is making progress and is identifying its strengths and areas for development.

#### Well-being

People have a voice. There is regular individual consultation with each person using suitably formatted questionnaires. People express their views on a range of topics including their care and care staff and their future aspirations. On a daily basis people make choices about their clothes, food and what they want to do. They are encouraged to participate in the development of the home and some take part in wider service development meetings.

Care staff support people to be as healthy as they can be. People attend regular appointments and care staff are responsive to emerging health needs. People take regular exercise and try out healthy food options. Their health and well-being is monitored by care staff, professionals and families via regular multi -disciplinary meetings. Care staff follow people's personal plans; they know what works for particular individuals in order to reduce their anxieties and they use the least restrictive responses. The home provides a range of resources both indoors and outdoors to support people's physical and mental health.

People are safeguarded. People communicated to us they feel safe in the home. They are supported by suitably trained and knowledgeable care staff who follow the service's safeguarding policy. They are assured the manager has an open and transparent relationship with the local safeguarding team and they confidently carry out their safeguarding duties. People are supported to regularly see their families, and some have advocates. Their rights are respected and the manager ensures regular updates of their deprivation of liberty (DoLs) assessments. There are regular health and safety and fire safety checks which render the home safe and secure.

The home is meeting people's needs. People like their home; they personalise their bedrooms and have their own clean bathrooms. They have ample communal spaces which provide differing levels of furnishings and facilities to cater for a range of needs. The outdoor area has leisure facilities and a space for care staff to take a break. Efforts are being made to make the home more homely.

#### **Care and Support**

The service provider gathers and assesses a range of information to ensure they can meet the needs of people coming to live at the home. Effective pre-admission assessments have a compatibility component to them which considers the impact of people on each other and how this might be managed. People's files contain copies of their local authority plans and people, their families and previous care staff also provide relevant information. An initial provider assessment is completed in line with regulations, which is regularly reviewed.

Thorough and detailed personal plans provide suitable guidance for care staff so they can meet people's care and support needs. The regular consultation processes with people mean they can clearly indicate what they want to do and achieve. People and their families contribute to their plans by outlining their likes, dislikes and how their best day might look. Routines are clearly described and there is staged guidance for care staff to respond to people when they require support to manage their behaviour.

People are achieving their goals and are taking part in activities they enjoy. They are getting out into the community to do things such as shopping, walking, trampolining and gardening. Some attend the service provider's day service, The Orb, where they gain new skills and qualifications. They socialise with others there and some are completing work experience placements. In the home people help with domestic tasks such as cooking, cleaning, and doing their laundry. They enjoy doing art and help out in the garden.

There are strong relationships between people and care staff, who treat them with respect, dignity and patience. We saw care staff using people's preferred communication aides and responding to them in line with their care plans, in order to provide reassurance and to reduce any anxiety. Humour was used to good effect and our communication with people and the records of consultation exercises show people like their care staff.

Care staff support people to maximise their health outcomes. People are registered with health professionals, and they attend appointments with the preparation and support of their care staff. Some people take part in their regular multi-disciplinary meetings where their physical and mental health are discussed and follow up action plans are made. People are provided with nutritious meals and healthier snack options, although these could be more consistent. The home provides a good range of facilities to support people's health, including a garden with a trampoline, a mini trampoline indoors and communal rooms with varying sensory provisions and quiet areas.

People are safeguarded. Care staff are trained in safeguarding, they know what to do if they have a concern and the service has a suitable safeguarding policy. The knowledgeable manager regularly tests care staff's understanding of safeguarding at team meetings. They have built a strong, open working relationship with the local safeguarding team and they make safeguarding referrals when required. Risk assessments provide suitable guidance for care staff and the least restrictive measures are used to respond to people when they are anxious or require support. Most incident reports are completed in a timely manner and almost all contain sufficient detail. Care staff ensure people receive their medication in line with their care plans.

#### **Environment**

People live in a clean, comfortable home which is meeting their needs. The home has several communal rooms, with varying levels of decoration and stimulation to cater for the range of people's needs. People can use sensory materials and games, listen to music, watch television or sit quietly in these rooms. Bedrooms are decorated to reflect people's personalities and preferences and their bathrooms are clean. Some bathrooms require refurbishment due to wear and tear and the manager told us these are on a schedule for completion. Spacious kitchens contain suitable facilities, and these along with the laundry room promote opportunities for people to practice their independence skills.

The service provider ensures the home is as safe as possible. Records show care staff are undertaking regular health and safety and fire safety checks in line with the required timescales. People have easy access to soap and towels and are supported to wash their hands after using the toilet. Health and safety audits show progress is being made. Repairs are attended to in a timely manner and there are electronic and fob locked gates outdoors. On arrival we were asked to sign in the visitors' book and our identification was checked.

The sectioned, secure garden area provides a valued resource for people to relax and do things which promote their health. It provides plenty of space and contains a large trampoline and swings which people enjoy using. With people's help the service provider is working to make the garden a more inviting space. Care staff have a summer house for their breaks which contains suitable facilities and some simple resources to promote their well-being.

#### **Leadership and Management**

The service provider ensures people and their representatives have useful information about the service they receive. The statement of purpose is regularly updated and overall it reflects the service seen at inspection. People have their own visually formatted guide to the service. There are good processes for ensuring people have information about the service they receive; safeguarding, health and safety information and fire procedures are displayed around the home in a visual format and are shared at house meetings.

People have a sufficient number of trained, experienced, skilled care staff to meet their care and support needs. Rotas show there are enough care staff each day to ensure people's needs are met and they can do the things they enjoy. There has been a high turnover of care staff over the last year, however, the service is now almost fully staffed again. Some consistent, safely recruited agency care staff are meeting any staffing shortfalls and the managers sometimes step in to support people. The manager has a system whereby, if through short staffing, people are unable to get out into the community, increased staff are put in place the following day to compensate.

Care staff are provided with training and support to meet people's needs. Records show good compliance with the required mandatory training in safeguarding, first aid, fire safety and positive behaviour management and other areas relevant to their role. They are regularly supervised and effective team meetings are used to promote learning and understanding. Quality assurance records and our conversations with care staff show they feel valued by supportive, approachable managers. They describe their team as "amazing" and feel they work well together.

Quality assurance measures are effective. The reports of the RI's regular visits to the home show they consult with people, care staff and other stakeholders and carry out a range of checks. The reports present a rounded and open reflection of the service; they evidence where progress has been made and the areas which require further development. The sixmonthly quality of care reports mirror these findings; they are well structured and evidence the progress being made. Due to limited levels of stakeholder engagement with the formal quality assurance processes, the service provider intends to consider alternative methods to ensure their views are more successfully represented.

Summary of Non-Compliance		
Status	What each means	
New	This non-compliance was identified at this inspection.	
Reviewed	Compliance was reviewed at this inspection and was not achieved. The target date for compliance is in the future and will be tested at next inspection.	
Not Achieved	Compliance was tested at this inspection and was not achieved.	
Achieved	Compliance was tested at this inspection and was achieved.	

We respond to non-compliance with regulations where poor outcomes for people, and / or risk to people's well-being are identified by issuing Priority Action Notice (s).

The provider must take immediate steps to address this and make improvements. Where providers fail to take priority action by the target date we may escalate the matter to an Improvement and Enforcement Panel.

Priority Action Notice(s)		
Regulation	Summary	Status
N/A	No non-compliance of this type was identified at this inspection	N/A

Where we find non-compliance with regulations but no immediate or significant risk for people using the service is identified we highlight these as Areas for Improvement.

We expect the provider to take action to rectify this and we will follow this up at the next inspection. Where the provider has failed to make the necessary improvements we will escalate the matter by issuing a Priority Action Notice.

Area(s) for Improvement		
Regulation	Summary	Status

N/A	No non-compliance of this type was identified at this inspection	N/A
56	Infection control measures not followed.	Achieved
57	Not all safety checks completed within timescales, repair to fire doors outstanding.	Achieved
12	Supervision of staff not meeting service's required timescales.	Achieved

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