



Inspection Report on

Options Phoenix House

Holywell

Date Inspection Completed

03/11/2021

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About Options Phoenix House

Type of care provided	Care Home Service Adults Without Nursing
Registered Provider	Options Autism (4) Ltd
Registered places	4
Language of the service	English
Previous Care Inspectorate Wales inspection	
Does this service provide the Welsh Language active offer?	The service is working towards providing an 'Active Offer' of the Welsh language, and demonstrates an effort to promote the use of the Welsh language and culture.

Summary

The home has a culture of empowerment and people are encouraged and supported to express themselves and to develop skills in all aspects of their lives. Care staff support people to be independent, active and to achieve their individual goals and outcomes. Care planning is inclusive and a rights based approach is evident. Care staff know people well and they follow people's plans to provide consistent care and routines. They are responsive and patient and treat people with dignity and respect.

Care staff know their safeguarding responsibilities, complete relevant training and feel confident to follow procedures. People are encouraged to be as healthy as possible and care staff follow their individual positive behaviour support plans.

The home is clean, homely and adapted to meet individual needs. The provider has plans to develop the outdoor area to provide more opportunities for play and recreation.

Robust quality assurance measures are in place, which evidences that action is taken to drive improvements. The management and leadership are strong; roles are well defined and care staff are motivated, appropriately supervised and trained. The management is effective in delivering a service that keeps people safe and makes a positive difference to their lives.

Well-being

People express their views and they are able to influence their care and their environment. A wide range of consultation processes ensures people make choices about their day-to-day care, activities and their environment. They are involved in their person centred planning processes and they help to identify their goals. They choose the décor and furnishings in their flats to suit their tastes and needs. Care staff show respect and sensitivity towards people and their care and support needs.

Care staff support people to be physically and emotionally healthy which promotes people's well-being. Care staff are attentive to people's changing health needs and they help to manage their anxieties, and liaise with health professionals so they can attend health appointments. Care staff encourage people to take regular exercise and make healthier food choices. Care staff follow people's individual positive behaviour plans and support them to follow regular routines, which promotes their health and well-being.

People are happy and supported to do things that make them happy. Individuals have varied and active routines which contributed to their well-being. These included outings to the local area, swimming, and access to community activities. Management ensure staffing levels are sufficient to ensure appropriate levels of support.

The service provider protects people from poor and neglectful practices. Care staff are aware of the processes to follow if a person is at risk of harm. They complete ongoing safeguarding training and are aware of their individual responsibilities for raising concerns. Safeguarding policies and procedures are in place and staff are confident to raise concerns in what they told us is a '*transparent and open culture*'. The provider follows safe staff recruitment practices, and appropriate safety checks and processes are completed before staff begin work.

People are happy in their home environment. Care staff support people to undertake activities safely in and away from the home. Management has effective oversight of the maintenance and health and safety of the service. People live in a home, which best supports individuals to achieve their well-being.

Care and Support

People's health needs and personal outcomes are a priority of the service. Information is included in people's personal plans, including information from previous assessments undertaken by the local authority and health representatives. There is evidence of further and continuing assessment, and relatives/representatives are involved on an ongoing basis in decisions that affect people's care and support. Care staff follow people's individual personal plans and behaviour support plans, which provide them with important information about people's care and support needs, routines and preferences. The care staff make health referrals to ensure people get the treatment they need at the right time. The service provider's clinical team meet regularly to assess people's development and requirements, and attend multidisciplinary meetings with managers and team leaders to share information and provide guidance. Thorough assessment and person centred planning means staff have the information they need to provide appropriate, anticipated care to meet people's individual needs.

Care planning is inclusive. People and their families take part in person centred planning processes, which feed into personal plans. Creative approaches mean that people participate in identifying goals and activities they would like to achieve. Care staff sign the documentation to confirm they had read and understood people's desired outcomes. The key worker system enables care staff to focus on people's individual needs, and care staff share important information at the beginning and end of each shift for new staff coming on shift. People are supported to achieve their personal outcomes because care staff know people well and communicate effectively. Parents provided feedback for this inspection and were very positive about the standard of care provided at the home. A parent told us: *'We could not be happier with the service.'*

The provider has arrangements in place to make sure risks to people's health and safety are minimised as far as possible. Personal files contain information to safeguard people from deprivation of their liberties. Staff know whom to contact and what to do if they thought a person was at risk of abuse. The measures in place to reduce the risk of people and care staff contracting Covid-19 are consistent with current Welsh Government and Public Health Wales guidance. There are suitable systems in place to ensure the oversight and audit of medicines management.

Environment

People live in accommodation, which is clean, organised and well maintained. People feel included and valued because they are supported in a personalised environment that is appropriate to their individual needs. The home is a detached property located in a residential area. Internally, it is separated into four self-contained apartments with each apartment having a bedroom, lounge, bathroom and kitchen. People use the conservatory for social events, and to experience the sensory equipment. The apartments are clean, tidy and suitable for the people living there. Care staff support people to make choices about decoration and personal items such as photographs. People have notice boards at the entrance to their apartments, which are specific to their level of understanding and display photographs, picture symbols and communication strips. The provider has invested in the premises to ensure people live in accommodation, which meets their individual needs, enables them to make choices and supports them to participate in their preferred activities.

There are contracts in place for the regular servicing of the heating, electrical installation and fire safety equipment. The home identifies risks for the environment and activities and puts measures in place to reduce them. There is a fire risk assessment and care staff organise fire drills and regular testing of fire safety equipment and smoke detectors. Personal Emergency Evacuation Plans (PEEPs) are in place and written according to individual need. The management and care staff report maintenance issues to the provider and they respond promptly. The home is well maintained, safe and secure to help people achieve their personal outcomes.

Leadership and Management

The statement of purpose accurately describes the current service arrangements it has in place regarding people's care and accommodation. The provider updates the statement of purpose when they make changes. People living at the home have a guide to the service in suitable formats.

The provider follows safe procedures to recruit staff. Care staff are supported in their role through regular supervision meetings. The meetings include discussions about people's needs and progress, practice, staff members' own well-being and their training requirements. The management holds team meetings every two months, and the records show that discussions about people and the service are comprehensive. Records confirm the managers and care staff access suitable training to equip them to provide the right care for people, and care staff told us the quality of the training is good. Staff told us the individual supervision meetings and team meetings are valuable for discussing people's progress and how best to support them.

People are cared for in a home where there is a consistent management team, which sets high standards and there is effective use of resources. Care staff told us they enjoy working at the home and the standard of support from management is high, and the management team and responsible individual are available and approachable. At the time of the inspection visit, there were staff vacancies. The care staff team were working additional shifts to ensure people were cared for in accordance to their needs and commissioning service's arrangements. The provider is proactive in seeking to recruit staff, and the home was awaiting new care staff members to start their induction the following week.

The provider has comprehensive quality assurance systems in place to monitor the operation of the home and maintain high standards. The manager said they feel supported and have frequent contact with the responsible individual and other senior managers within the organisation. The responsible individual visits the home at least every three months. They speak with the people living there, care staff and the manager. They also check records and they write a report on their findings, which identifies any areas for the manager to address. The provider employs additional officers to carry out further quality assurance checks. They write a report and make recommendations if required, and this provides a more independent view of its operations. Every six months, the responsible individual completes a thorough review of the quality of care provided at the home. The review report contains evidence of the progress made by people and identifies areas for improvement.

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	N/A

	inspection	
	No evidence available to demonstrate the RI for the service was visiting the home every three months, talking with staff and individuals at the home and inspecting the premises, a selection of records of events and any complaints records.	Achieved

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