



Inspection Report on

Windsor Street

Aberdare

Date Inspection Completed

12/07/2022

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About Windsor Street

Type of care provided	Care Home Service Adults Without Nursing
Registered Provider	Planned Residential Support Services Limited
Registered places	4
Language of the service	English
Previous Care Inspectorate Wales inspection	11 June 2021
Does this service provide the Welsh Language active offer?	No. This is a service that does not provide an 'Active Offer' of the Welsh language. It does not anticipate, identify or meet the Welsh language needs of people /children who use, or intend to use their service.

Summary

People living at Windsor Street experience consistent care and support delivered by a team of dedicated, well trained care workers. Care documentation is well presented and provides clear information regarding people's care and support needs. People are supported to engage in a wide range of activities that are tailored to their needs and wants.

Improvements are required to ensure the recruitment process meets regulatory requirements, to safeguard people from harm and abuse. Care workers are happy working at the service and say they feel supported and valued. Governance and quality assurance arrangements are good. People live in individual flats, which are personalised to their individual tastes. Regular servicing and checks on equipment and utilities ensures the environment is safe.

Well-being

People are happy with the care and support provided. We observed positive interactions between individuals and care workers. Staff turnover is low. Care workers know the people they support well and are familiar with their needs, wants and routines. People's personal plans are comprehensive and reviewed as required. People's personal plans record access to a range of health care professionals is facilitated when needed. Care workers support people to access a range of activities in the home and community. Arrangements are in place to ensure people maintain relationships with family and friends. A relative told us "*I've found the team efficient in making and keeping medical appointments*".

There are good safeguarding measures in place. Care staff have relevant training to recognise the signs of neglect, abuse and poor mental or physical health. Most staff are fully aware of their safeguarding responsibilities and know what action to take if any concerns are identified. The service maintains a good working relationship with the local safeguarding team.

A homely environment supports people's well-being. The individual flats are clean, safe and welcoming and are appropriately furnished and decorated throughout. Our observations indicated people felt secure and relaxed within the home. We did not identify any hazards to people's safety on the day of our inspection. An ongoing schedule of checks and maintenance ensures people's continued safety and well-being.

Care and Support

Detailed personal plans support staff to meet people's needs. Prior to admission the manager conducts an assessment of people's needs, to ensure the service can provide the required level of care provision. People's personal plans clearly set out their care and support needs, and how they will be met. They are person centred, meaning they are dedicated to people's individual needs and circumstances. People's personal plans are reviewed in line with regulation. This ensures information is current and that people receive the best possible care. There is a stable staff team and turnover is low, this means the service can provide good continuity of care. Personal plans of care highlight people's preferences, likes and dislikes. People are supported to maintain their personal appearance. We observed good interactions when people receive assistance and saw care staff interacted with people in a natural friendly caring manner. One person told us "*They are good at their jobs*". Another person said, "*they are as good as gold, they listen to me*".

There are systems in place to ensure people's best interests are promoted. Deprivation of Liberty Safeguard (DoLS) authorisations are requested and put in place where people lacked the mental capacity to make important decisions relating to their life.

People are encouraged to express their needs and receive support to make choices. They are able to communicate with care workers using a variety of communication methods. Staff know people very well and are able to understand and interpret people's wishes and needs. Staff work with families and professionals to get to know the people who they support. A relative told us "*They are exceptionally nice, down to earth*".

People living at the service receive their medication as prescribed. The service completes checks, which ensures medication is stored at correct temperatures, and therefore remains effective. Audits ensure staff maintain good practices and identify any areas of improvement. Medication is generally stored safely in a locked facility and controlled drugs and stock checks managed effectively.

The service takes all reasonable steps to identify and prevent the possibility of abuse. Care workers recognise their personal responsibilities in keeping people safe and told us they would report any issues of concern. They are aware of the whistleblowing procedure, and said they felt confident approaching the manager if they needed to. Care workers told us they had undertaken training in safeguarding and there is a current safeguarding policy for all staff to access and follow.

Environment

The home is set up to blend in with the local surroundings, and not to stand out from any other ordinary home in the community, either outside, or inside of the property. A personalised environment that is appropriate to individual need supports people to feel included, uplifted and valued. The home takes a balanced approach to accessorizing rooms so the environment is warm and homely whilst also maintaining personal safety. People's flats reflect individual tastes. We saw three people's flats, which are personalised with photographs and pictures. The garden is separated into four individual areas so people can relax in their own space.

The service has systems in place that ensure the home and its facilities are safe. We looked at a range of documentation that relates to health and safety and the maintenance of the service. The information provides a detailed overview of a rolling programme of safety checks, servicing and maintenance of the home's equipment and facilities. Effective and efficient fire procedures, testing and training take place to protect people. Records confirmed fire alarm tests take place weekly. We saw the laundry facilities, which are suitable to meet the needs of people living in the home. We also saw window restrictors in place. Effective daily cleaning schedules are in place as all parts of the home are clean, tidy and well organised.

Leadership and Management

People can access information to help them understand the care, support and opportunities available to them. The statement of purpose and service users guide accurately describe the current arrangements in place regarding the service's accommodation, referral and admission process. The statement of purpose also includes details of the service's supervision and training arrangements for care staff.

There are systems and processes in place to monitor, review and improve the quality of care and support provided. We saw evidence that overall, the Responsible Individual (RI) has good oversight of the service. We looked at documentation, which confirmed formal quarterly RI visits take place. On a six-monthly basis, the RI produces a quality-of-care report. The manager appropriately notifies relevant regulatory bodies and statutory agencies when there are concerns or significant events that might affect the well-being of individuals receiving care.

All staff are vetted via a disclosure and barring (DBS) checks. However, the service does not hold all the required recruitment information to ensure staff are fit for working at the service. Some staff personnel files we sampled were missing interview notes and references from previous employers. While no immediate action is required, this is an area for improvement and we expect the provider to take action.

Staff who are trained, supported and developed are able to support people in the appropriate way. New care staff receive an induction in line with Social Care Wales's requirements. Staff receive training relevant to their roles and this includes infection control training. Staff say they feel valued, supported and that teamwork at the home is good. They also told us that they can talk to management, who are all approachable. We saw that there are robust company policies and procedures for staff to follow. We looked at a selection of policies: complaints, infection control, medication and safeguarding and found them to be up to date. Feedback from staff included "*This is the best company I have worked for*", "*the manager is brilliant*" and "*It's marvellous to work here*".

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
35	The provider has not ensured that appropriate records are in place to demonstrate fitness of staff. They need to ensure that robust processes are in place including records, to evidence this	New

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